Officeholder and Candidate Campaign Statement –			Date Stamp CALIFORNIA 470
Short Form	Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	ANGELES COUNTY For Official Use Only 2022 JUL 18 AM 10: 30
	11/8/20		- CAMPAIGH FINANCE
1. Statement Covers Calendar Year 20 22			
2. Officeholder or Candidate Information		3. Office Sought or He	ld
NAME OF OFFICEHOLDER OR CANDIDATE US 1 Stein		School Bt	sand member
STREET ADDRESS	STATE ZIPCODE 91	<i>(y)</i>	S Virgues Virgle (FAPPLICABLE)
AREA CODE/DAYTIME PHONE NUMBER		gnoil com	***
Committee Information List all committees of which you have knowledge to	that are primarily formed to rece	eive contributions or to make expend	itures on behalf of your candidacy.
COMMITTEE NAME AND I.D. NUMBER		COMMITTEE ADDRESS	NAME OF TREASURER
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5. Verification		·	<u> </u>
I declare under penalty of perjury that to the best of my all reasonable diligence in preparing this statement.	knowledge I anticipate that I will recrify funder penalty of perjury und	eceive less than \$2,000 and that I will spler the laws of the State of Canfornia that	pend less than \$2,000 during the calendar year and that I have used the foregoing is true and correct.
DATE			SIGNATURE OF OFFICEHOLDER OR CANDIDATE