Ca	ficeholder and Candidate Impaign Statement –						7/2 Date Stamp	CALIFORNIA 470	
Short Form		Date of election if applicable: (Month, Day, Year)					EIVED BY BLES COUNTY	For Official Use Only	
							28 PM 12: 27		
1.	Statement Covers Calendar Year 20 22		gallang - a constant have mer greek a a talk hamilan menda. Silme			<u> WAMPAH</u>	SN FINANCE		
Ca Sh	Officeholder or Candidate Information				3. Office Sought or Held				
	NAME OF OFFICEHOLDER OR CANDIDATE				OFFICE SOUGHT OR HELD				
	Janet E. Rock STREET ADDRESS				Governing Board N JURISDICTION (LOCATION)	Tember Little Lak	nber Little Lake City School District, Area #3		
	· OTTLET MADE LEGG				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(IF APPLICABLE)	
	CITY	STATE	ZIP CODE						
	Santa Fe Springs AREA CODE/DAYTIME PHONE NUMBER	CA	90670 FAX / E-MAIL ADDRESS						
	562.412.1669	OPTIONAL.	PAX / E-IVAIL ADDRESS						
4.	Committee Information List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy. COMMITTEE NAME AND I.D. NUMBER NAME OF TREASURER								
	COMMITTEE TRAVE AND I.D. HOWBER	COMMITTEE ADDRESS				NAME OF	TREASURER		
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	Varification		AND THE PARTY OF LAND WATER	the supplied to the supplied to	The second secon				
o.	Verification I deciare under penalty of perjury that to the best of my	that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used not be statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct							
	all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.								
	07/19/22		Ву						
	Executed onDATE				Ψ)	_		_	