							,		
Officeholder and Candidate Campaign Statement – Short Form		·				7/27/22 3			
		i i					Dale Stamp	CALIFORNIA 470	
		Date of election if applicable: (Month, Day, Year)		Amendment (Explain Below) LOS		LOS	RECEIVED BY ANGELES COUNTY	FORM For Official Use Only	
						20 22 J	JUL 29 PM 3:56		
		<u> </u>				-car	PAIGN FINANCE		
1.	Statement Covers Calendar Year 20 22								
2.	Officeholder or Candidate Information			3.	Office Sought	or Held			
	NAME OF OFFICEHOLDER OR CANDIDATE				OFFICE SOUGHT OR HEL	.D			
	Victoria L. Green				Governing Board				
	STREET ADDRESS				JURISDICTION (LOCATION			DISTRICT NUMBER (IF APPLICABLE)	
	CITY	STATE	ZIP CODE		Wilsona School	District			
		STATE					,		
	Lancaster AREA CODE/DAYTIME PHONE NUMBER	CA OPTIONAL	93535 FAX / E-MAIL ADDRESS						
	(661)492-1913		@wilsona.ca.us.gov						
_		· greene	e wilsona.ca.us.gov						
4.	Committee Information List all committees of which you have knowledge	that are prim	narily formed to rec	eive contribu	ions or to make ex	penditures	s on behalf of your candidac	v	
	COMMITTEE NAME AND I.D. NUMBER	and and primi	1		E ADDRESS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		F TREASURER	
	-		1				(
		,							
		:							
	-								
5.	Verification	•				- '			
	I declare under penalty of perjury that to the best of my all reasonable diligence in preparing this statement.	y knowledge I certify under	anticipate that I will a penalty of perjury und	receive less th der the laws of	an \$2,000 and that I the State of Coliforn	will spend I	less than \$2,000 during the cal	endar year and that I have us	
	7/25/2022	Į,							
	Executed onDATE				By				