Officeholder and Candidate Campaign Statement –				Date Stamp CALIFORNIA 470
S	hort Form	Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	LOS ANGELES COUNFOPORICIALUSE ONLY
		11/8/22		2023 JUL 12 PM 3: 55 CAMPAIGN FINANCE
1.	Statement Covers Calendar Year 20 23			DISCLUSURE SECTION
2.			3. Office Sought or Hele	
•	NAME OF OFFICEHOLDER OR CANDIDATE Devek & Bahmanou		OFFICE SOUGHT OF HELD School BO	
	STREET ADDRESS		Bonita Unific	ad - San Dimas (IF APPLICABLE) 2
	San Dimas	STATE ZIP CODE CPA 91773	Y	
_	AREA CODE/DAYTIME PHONE NUMBER 626 - 893 - 9987	abahmanou a	adicom	·
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		COMMITTEE ADDRESS	NAME OF TREASURER
	NA			
5.	Verification			
	I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive les all reasonable diligence in preparing this statement. I certify under penalty of perjury under the law			

Executed on.