Of	ficeholder and Candidate		7/28/230		
Campaign Statement – Short Form		Date of election if applicable: (Month, Day, Year)		IVED BY LES COLLETY IN FINANCE  CALIFORNIA 470 FORM FORM FOR Official Use Only	
1.	Statement Covers Calendar Year 20			THE SECTION	
2.	Officeholder or Candidate Information  NAME OF OFFICEHOLDER OR CANDIDATE  VINSON BELL  STREET ADDRESS  TEMPL  AREA CODE/DAYTIME PHONE NUMBER	ECITY 91780  STATE ZIPCODE  SON bell to OPTIONAL: FAX/E-MAIL ADDRESS	3. Office Sought or Held  OFFICE SOUGHT OR HELD  BOARD OF EDUC  JURISDICTION (LOCATION)  TEMPLE CITY  USd. net	DISTRICT NUMBER (IF APPLICABLE)	
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	
5.	Verification  I declare under penalty of perjury that to the best of all reasonable diligence in preparing this statement.	my knowledge I anticipate that I will I certify under penalty of perjury under	receive less than der the laws of th	/ear and that I have used	
	Executed on 7 2 4 23		Ву.		

Supplement (Jan/2016) c.ca.gov (866/275-3772) www.fppc.ca.gov