

**Officeholder and Candidate
Campaign Statement -
Short Form**

Date of election if applicable: (Month, Day, Year) <u>11/8/2022</u>	<input type="checkbox"/> Amendment (Explain Below) 2022 AUG 17 PM 3:42 CAMPAIGN FINANCE	Date Stamp RECEIVED BY LOS ANGELES COUNTY 017 2022 AUG 17 PM 3:42 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only 021558
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1. Statement Covers Calendar Year 20 22.

2. **Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE
Francesca Gill

STREET ADDRESS
, San Marino CA 91108

CITY STATE ZIP CODE
San Marino CA 91108

AREA CODE/DAYTIME PHONE NUMBER
26-234-2053

OPTIONAL: FAX / E-MAIL ADDRESS
francescamgill@gmail.com

213-820-2281

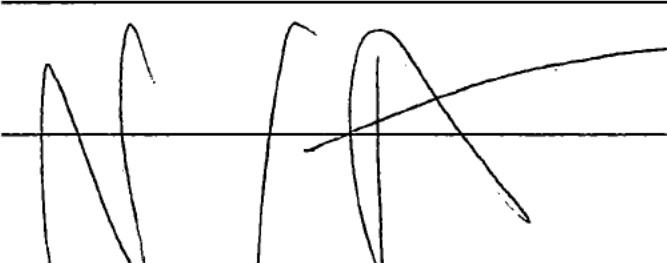
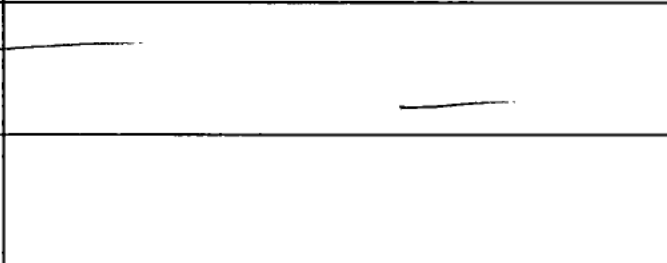
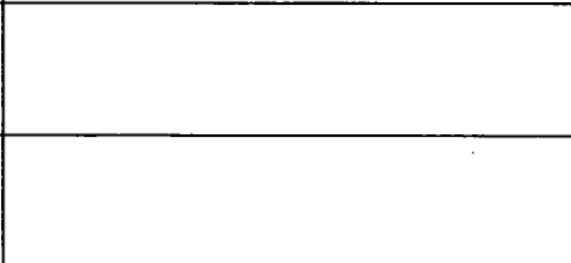
3. **Office Sought or Held**

OFFICE SOUGHT OR HELD
Board Member

JURISDICTION (LOCATION)
San Marino Unified School District

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 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 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.

Executed on 17th of Aug, 2022 By _____

DATE DATE