Officeholder and Candidate Campaign Statement – Short Form		Date Stamp CALIFORNIA FORM				
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below) 1.08 A IGE FS 60		FE COUNTY	For Official Use Only
		11/8/2022			NFINANCE	
1.	Statement Covers Calendar Year 20 22					
2.	Officeholder or Candidate Information NAME OF OFFICEHOLDER OR CANDIDATE Derek H Bahmanou STREET ADDRESS San Dimas CA 91773 CITY 626-893-9987 AREA CODE/DAYTIME PHONE NUMBER	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS	3. ————————————————————————————————————	Office Sought or Held OFFICE SOUGHT OR HELD School Board Member JURISDICTION (LOCATION) Bonita Unified School Board		DISTRICT NUMBER (IF APPLICABLE) 2
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		COMMITT	EE ADDRESS	NAME O	F TREASURER
	N/A					
5.	Verification					
	I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$% all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the \$\frac{1}{2}\$					
	Executed on		·	Ву		_