

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

Date Stamp	CALIFORNIA FORM 470
RECEIVED BY LOS ANGELES COUNTY (LW) 2022 AUG 11 PM 12:15 CAMPAIGN FINANCE	
For Official Use Only	
016709	

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)

1. Statement Covers Calendar Year 20 22.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Laura Santos

STREET ADDRESS

CITY
Bassett

ZIP CODE
CA 91746

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Trustee

JURISDICTION (LOCATION)
Mt San Antonio College

DISTRICT NUMBER (IF APPLICABLE)
3

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
<u>none</u>		

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 expend 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

Executed on Aug 11, 2022 DATE

By _____