

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

7/23/21(1) 5121

Date of election if applicable:  
(Month, Day, Year)

NA

Amendment (Explain Below)

Date Stamp  
RECEIVED BY  
LOS ANGELES COUNTY  
2021 JUL 26 PM 2:43  
CAMPAIGN FINANCE

CALIFORNIA FORM 470  
For Official Use Only  
019120

1. Statement Covers Calendar Year 20<sup>21</sup>

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Sue ElHessen

STREET ADDRESS

CITY STATE ZIP CODE  
Bellflower CA 90706

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
GOVERNING SCHOOL BOARD MEMBER FOR BELLFLOWER SCHOOL DISTRI

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
LA COUNTY

**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 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 JULY 22 2021 DATE

By \_\_\_\_\_ SIGNATURE OF OFFICEHOLDER OR CANDIDATE