

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

Date Stamp
9/6/22
①
CALIFORNIA FORM 470
For Official Use Only
LOS ANGELES COUNTY
2022 SEP -8 AM 11:13
CAMPAIGN FINANCE

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

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
BORRI BRUESCH

STREET ADDRESS

CITY ROSEMEAD STATE CA ZIP CODE 91770

AREA CODE/DAYTIME PHONE NUMBER 626 975-6778 OPTIONAL: FAX / E-MAIL ADDRESS 626 571-7812

3. Office Sought or Held

OFFICE SOUGHT OR HELD
SCHOOL BOARD TRUSTEE

JURISDICTION (LOCATION) GARVEY ELEMENTARY 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
<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 the all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of California that the information provided is true and correct.

Executed on SEPT. 5, 2022
DATE

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