

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

7/31/21 (1)

<p>Date of election if applicable: (Month, Day, Year)</p> <p>11/03/20</p>	<p><input type="checkbox"/> Amendment (Explain Below)</p> <p>_____</p> <p>_____</p>
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Date Stamp	CALIFORNIA FORM 470
RECEIVED LOS ANGELES COUNTY	Official Use Only
2021 AUG -2 PM 4: 21	
CAMPAIGN FINANCE	

1. Statement Covers Calendar Year 20 21 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Matthew L. Watson

STREET ADDRESS

CITY STATE ZIP CODE
Santa Clarita CA 91350

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
661-212-2594

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Governing Board Member

JURISDICTION (LOCATION) Saugus Union School District	DISTRICT NUMBER (IF APPLICABLE) 4
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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
No Committees		

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 7/30/21
DATE

By _____