

**Officeholder and Candidate  
Campaign Statement  
Form 470 Supplement**

④ DC PE24-1

Amendment (Explain Below)  
\_\_\_\_\_  
\_\_\_\_\_

RECEIVED BY  
Date Stamp  
**LOS ANGELES COUNTY**  
2024 FEB 26 PM 12: 51  
**CAMPAIGN FINANCE**

**CALIFORNIA FORM 470 SUPPLEMENT**  
For Official Use Only  
019688

SEE INSTRUCTIONS ON REVERSE

This form is written notification that the officeholder/candidate listed below has received contributions totaling \$2,000 or more or has made expenditures of \$2,000 or more during the calendar year.

**1. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
OMAR SPRY  
STREET ADDRESS

ZIP CODE  
COMPTON CA 90222  
AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

323-984-5933 OMARSPRY@GMAIL.COM

**2. Office Sought**

OFFICE SOUGHT DISTRICT NUMBER (IF APPLICABLE)  
COMPTON UNIFIED SCHOOL DISTRICT BOARD MEMBER COMPTON UNIFIED SCHOOL DISTRICT  
DATE OF ELECTION (MONTH, DAY, YEAR)  
MARCH 5, 2024

**3. Date Contributions Totalling \$2,000 or More Were Received or Date Expenditures of \$2,000 or More Were Made**

1 12 - 2024  
(MONTH, DAY, YEAR)