Officeholder and Candidate Campaign Statement – Short Form					RECERTIFIED BY CALIFORNIA 470			
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)		2021 SEP 27 P	M 12: 43	For Official U	Use Only
	· ·,				CAMPAIGN F	MANCE		
1.	Statement Covers Calendar Year 20 21)			
2.	Officeholder or Candidate Information		3. Offic	e Sought or Held	1			
	NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE	SOUGHT OR HELD				
	Adrian Greer Board				usa Unified School	ol District)		
	STREET ADDRESS		JURISE	DICTION (LOCATION)			DISTRICT NUMBER (IF APPLICABLE)	
	Azusa, CA 91702	CA 91702	City	y of Azusa			(IF AFFLICABLE)	
	CITY	STATE ZIP CODE			,			
	626 629-8061	agreer@azusa.org						
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX/E-MAILADDRESS			i i			
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 ADDR	RESS		NAME OF T	REASURER	
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5.	Verification							
	I declare under penalty of perjury that to the best of my all reasonable diligence in preparing this statement. I describe the statement of th	knowledge I anticipate that I will certify under penalty of perjury ur	receive less than \$2, der the laws of the St	000 and that I will spe tate of California that t	nd less than \$2,000 dur the foregoing is true and	ring the calend I correct.	dar year and tha	at I have use
	Executed on September 24, 2024		Ву					
	DATE		-,					