Officeholder and Candidate Campaign Statement – Short Form				•	. 1	·	5	722
				ř	Date Stamp	CALIFORNIA FORM	470	
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below) 103		RECEIVED BY ANGELES COUNTY		For Official Use Only	
		11/08/2022		_2.4		19 PM 12: 23		
I. St	atement Covers Calendar Year 20 22	1	<u> </u>	CAT	TPA1	GN FINANCE	L	
2. Of	fficeholder or Candidate Information		3.	Office Sought or Held	<u> </u>			
NA	ME OF OFFICEHOLDER OR CANDIDATE	:		OFFICE SOUGHT OR HELD				
M	lichele Kipke			SPUSD Governing Boar	d			
STF	REET ADDRESS			JURISDICTION (LOCATION)			DISTRICT NUMBER (IF APPLICABLE)	
_		· · · · · · · · · · · · · · · · · · ·		South Pasadena			1	
CIT		STATE ZIP CODE						
	outh Pasadena EA CODE/DAYTIME PHONE NUMBER	CA 91030  OPTIONAL: FAX/E-MAIL ADDRESS						
		1						
32	23-630-4816	kipkespusd@gmail.com						
	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		COMMITTE	E ADDRESS	,	NAME	OF TREASURER	
C	ommittee to Re-elect Kipke to School Board 202	2#1451800	Sou	nth Pasadena CA 91030	1	Margaret Lee	e i e	
_		:						
	erification	knowledge I entisingto the the discontinuous	manius lees 4	<u></u>	dlas	s than \$2,000 during the ca	dender uses and the	t I house

all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of

Executed on \_

e foregoing is true and correct.

SIGNATURE OF OFFICEHOLDER OR CANDIDATE