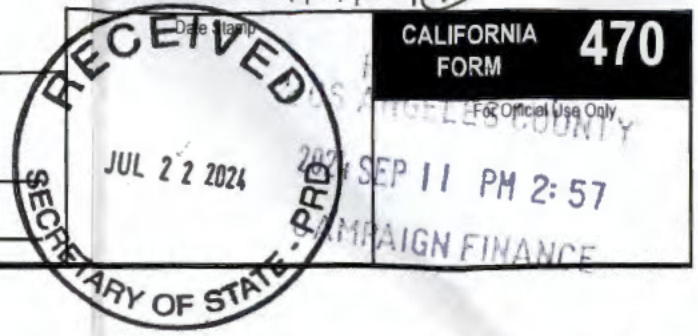


**Officeholder and Candidate  
Campaign Statement –  
Short Form**

9/9/24



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

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 24

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Richard O'Neill

CITY  
CLAREMONT

STATE  
CA ZIP CODE  
91711

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

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
School Board Trustee

JURISDICTION (LOCATION)  
CLAREMONT UNIFIED SD

DISTRICT NUMBER (IF APPLICABLE)  
3

**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>NO committee/ NO election</u>	<u>→ Appointed</u>	

**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 law that the information provided is true and correct.

Executed on July 18 2024  
DATE

\_\_\_\_\_  
OFFICEHOLDER OR CANDIDATE