

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

5724

Date of election if applicable:
(Month, Day, Year)
11/8/2022

Amendment (Explain Below)

Date Stamp
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7/26/24
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CAMPAIGN FINANCE

CALIFORNIA FORM 470
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1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
JENNIFER FENTON

STREET ADDRESS

CITY STATE ZIP CODE
Manhattan Beach CA 90266

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
(310) 993-2926 jenchris.fenton@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Manhattan Beach Unified School District - Governing Board Member

JURISDICTION (LOCATION)
Manhattan Beach, CA

DISTRICT NUMBER (IF APPLICABLE)

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>NA</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 all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State

that I will receive less than \$2,000 during the calendar year and that I have used the information provided in this statement as true and correct.

Executed on 7/25/2024
DATE

By _____

OFFICEHOLDER OR CANDIDATE