

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

GE24

Date of election if applicable: (Month, Day, Year)  <u>11/05/2024</u>	<input type="checkbox"/> <b>Amendment</b> (Explain Below) <hr/> <hr/>	Date Stamp RECEIVED BY LOS ANGELES COUNTY 2024 AUG -1 PM 2:01 CAMPAIGN FINANCE	CALIFORNIA FORM <b>470</b> For Official Use Only 010198
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1. Statement Covers Calendar Year 20 24.

**2. Officeholder or Candidate Information**

**3. Office Sought or Held**

NAME OF OFFICEHOLDER OR CANDIDATE  
Joseph K. Chang

STREET ADDRESS  
Hacienda Heights, CA 91745

ZIP CODE  
91745

AREA CODE/DAYTIME PHONE NUMBER  
(626) 336-3308

OPTIONAL: FAX / E-MAIL ADDRESS  
Josephchangforschoolboard@yahoo.com

OFFICE SOUGHT OR HELD  
Mt Sac CCD Board of Trustees

JURISDICTION (LOCATION)  
Mt Sac CCD Board of Trustees

DISTRICT NUMBER (IF APPLICABLE)  
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**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
N/A		

**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 laws of the State of California that the foregoing is true and correct.

Executed on Aug 1, 2024  
DATE

By \_\_\_\_\_