

Officeholder and Candidate
Campaign Statement –
Short Form

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CAMPAIGN FINANCE

CALIFORNIA FORM 470
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021731

Date of election if applicable:
(Month, Day, Year)
11/5/2024

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 24

2. Officeholder or Candidate Information
NAME OF OFFICEHOLDER OR CANDIDATE
DENNIS A. CURTIS
STREET ADDRESS
HAWTHORNE, CA 90250
CITY STATE ZIP CODE
AREA CODE/DAYTIME PHONE NUMBER
310-850-4067
OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held
OFFICE SOUGHT OR HELD
SCHOOL BOARD
JURISDICTION (LOCATION)
WISEBURN UNITED SCHOOL DISTRICT
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

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 7/15/2024 DATE