Officeholder and Candidate Campaign Statement – Short Form					Date Stamp  LOS RECEIVE CALIFORNIA FORM  ANGELES GOU For Official Use Only	
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)		2024 SEP 30 AM 2: 10 CAMPAIGN FINANC	
1.	Statement Covers Calendar Year 20 24		1		Tranc	
2.	Officeholder or Candidate Information  NAME OF OFFICEHOLDER OR CANDIDATE  TONY YEH  STREET ADDRESS  CITY  TORRANCE  AREA CODE/DAYTIME PHONE NUMBER  310-938-7578	STATE ZIP CODE  CA 90505  OPTIONAL: FAX/E-MAIL ADDRESS  yehforschoolboard@gmail	3.	Office Sought or Held OFFICE SOUGHT OR HELD BOARD OF TRUSTEE JURISDICTION (LOCATION) TORRANCE USD	DISTRICT NUMBER (IF APPLICABLE) AREA E	
4.	Committee Information List all committees of which you have knowledge  COMMITTEE NAME AND I.D. NUMBER		eive contribu	utions or to make expenditures	es on behalf of your candidacy.  NAME OF TREASURER	
5.	Verification I declare under penalty of perjury that to the best of mall reasonable diligence in preparing this statement.	ny knowledge I anticipate that I will I certify under penalty of perjury und	receive der the			