

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

(9) DC

Date Stamp	CALIFORNIA FORM 470
RECEIVED BY LOS ANGELES COUNTY	For Official Use Only
2024 SEP -3 PM 12: 04	
CAMPAIGN FINANCE	021853

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)

1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
LARRY BATISTA

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

WHITTIER CA 90606

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

902 325-4074

3. Office Sought or Held

OFFICE SOUGHT OR HELD
WHITTIER CITY SCHOOL BOARD

JURISDICTION (LOCATION)
LOS ANGELES COUNTY

DISTRICT NUMBER (IF APPLICABLE)
AREA 1

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 SEPT. 3 2024

By _____
OFFICEHOLDER OR CANDIDATE