Officeholder and Candidate Campaign Statement – Short Form		Date of election if applicable: (Month, Day, Year) Amendment (Explain Below)		RECEIVED BY ANGELES COUNT	CALIFORNIA 470 For Official Use Only	
		<u> </u>		2021 AUG 27 PM 4: 0	° 016681	
١.	Statement Covers Calendar Year 20					
2.	Officeholder or Candidate Information		3. Office Sought of	r Held		
	NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD School Board Member DISTRICT NUMBER OFFICE SOUGHT OR HELD					
	STREET ADDRESS JURISDICTION (LOCATION) FOR THE APPLICABLE) DISTRICT NUMBER (IF APPLICABLE)					
	STATE ZIP CODE Whittiam AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS					
	(562) 201-6450	Caparicio e ewo	050,019			
1.	Committee Information List all committees of which you have knowledge the	mmittee Information 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	NA NA	ME OF TREASURER	
i.	. 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 forcesion is two codes are stated as a statement.					
	Executed on 8/27/21		Ву			