Officeholder and Candidate Campaign Statement – Short Form						)	NAM AFIR: S721  Date Stamp  RECEIVED BY FORM			
		Date of election if applicable: (Month, Day, Year)  November 2020		Amendment (Explain Below)		05 ANGEL 0 01/05/ - 2021 FEB -8	ES COUNT	For	Official Use Only	
						- CAMPAIGN	- 1	-		
1.	Statement Covers Calendar Year 20 21	•								
2.	Officeholder or Candidate Information	į.		3.	Office Sought or H	eld ·				
•	NAME OF OFFICEHOLDER OR CANDIDATE	,			OFFICE SOUGHT OR HELD					
•	Patricia Edwards			,	School Board Preside	nt				
	STREET ADDRESS				JURISDICTION (LOCATION)  Gorman-Los Angeles			DISTRICT NI (IF APPLICA		
	CITY	STATE	ZIP CODE							
	Gorman	CA	93243							
	AREA CODE/DAYTIME PHONE NUMBER	1	FAX / E-MAIL ADDRESS							
_	661-248-6441	edwards	p138@gmail.com							
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				
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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 Califorr									
	2-05-2021  Executed on		<del></del>		Ву	SIGNATURE OF OFFICER	OLUBA OR CANDIDATE		1:1	
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