

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

(CM) 5723

Date Stamp <b>RECEIVED</b> LOS ANGELES COUNTY 2023 JUL 31 PM 1:02 <b>CAMPAIGN FINANCE</b>	<b>CALIFORNIA FORM 470</b> <small>For Official Use Only</small>
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Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)

1. Statement Covers Calendar Year 20 2023.

**2. Officeholder or Candidate Information**

**3. Office Sought or Held**

NAME OF OFFICEHOLDER OR CANDIDATE  
Evelyn M. Avdalayan

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Whittier CA 90606

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

562 822 0469 evelyn-avdalayan@LNSD.net

OFFICE SOUGHT OR HELD  
Board Trustee

JURISDICTION (LOCATION) \_\_\_\_\_ DISTRICT NUMBER (IF APPLICABLE) \_\_\_\_\_

Los Nietos School District

**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 information provided in this statement is true and correct.

Executed on July 31 2023  
DATE

By \_\_\_\_\_