

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

2/22/22 (1) 5722

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)	Date Stamp	CALIFORNIA FORM 470
		RECEIVED BY LOS ANGELES COUNTY	
		2022 JUL 27 PM 2:25	
		CAMPAIGN FINANCE	

1. Statement Covers Calendar Year 20 22.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Leighton Anderson

STREET ADDRESS

CITY STATE ZIP CODE
Whittier CA 90603

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
562-907-2032 562-309-8113

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Whittier Union High School Dist. Governing Board

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Los Angeles County 4

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
NO ACTIVE COMMITTEE		

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 an all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of

ing the calendar year and that I have used correct.

Executed on JULY 22, 2022
DATE

By _____
R CANDIDATE