

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

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> <b>Amendment</b> (Explain Below)	Date Stamp <b>RECEIVED BY LOS ANGELES COUNTY</b> 2022 AUG 15 PM 4:00 CAMPAIGN FINANCE	<b>CALIFORNIA FORM 470</b> For Official Use Only
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**1. Statement Covers Calendar Year 20** \_\_\_\_\_ .

**2. Officeholder or Candidate Information**

**3. Office Sought or Held**

NAME OF OFFICEHOLDER OR CANDIDATE

Charles 'Chuck' Coyne

STREET ADDRESS

CITY

San Dimas

AREA CODE/DAYTIME PHONE NUMBER

909-263-8886

STATE

CA

OPTIONAL: FAX / E-MAIL ADDRESS

charlesacoyne@yahoo.com

ZIP CODE

91773

OFFICE SOUGHT OR HELD

Governing Board Member

JURISDICTION (LOCATION)

Bonita Unified School District

DISTRICT NUMBER  
(IF APPLICABLE)

**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 is true and correct.

Executed on 7/20/2022  
DATE

By \_\_\_\_\_  
INDICATE