

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

Date of election if applicable: (Month, Day, Year) <u>11/2024</u>	<input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/>	Date Stamp RECEIVED BY LOS ANGELES COUNTY 2022 AUG -4 AM 11:57 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only <u>020324</u>
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1. Statement Covers Calendar Year 20 2022.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

GREGG PETERSON
STREET ADDRESS

COVINA, CA 91724
CITY STATE ZIP CODE

626-252-9662
AREA CODE/DAYTIME PHONE NUMBER

PETEY519CSBLLWRBAC-87
OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

GOVERNAL BOARD MEMBER
JURISDICTION (LOCATION)

CHANDLER OAK UNIFIED S/D

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
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$5,000 and that I will spend less than \$5,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the act.

Executed on 08/01/2022 DATE

Clear Form **Print Form**