

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

Date Stamp	<b>CALIFORNIA FORM 470</b>
RECEIVED BY LOS ANGELES COUNTY	For Official Use Only
2023 JUL 20 PM 2:23	
CAMPAIGN FINANCE DISCLOSURE SECTION	

Date of election if applicable: (Month, Day, Year)  <u>11-6-2018</u>	<input type="checkbox"/> <b>Amendment</b> (Explain Below)  <hr/> <hr/>
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**1. Statement Covers Calendar Year 20** 23 .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Donna Georgino

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

CITY STATE ZIP CODE  
Temple City CA 91780

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
6262868637 donnageorgino@sbcglobal.net

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
Temple City Unified Governing Board

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
Temple City Unified School District 5

**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
n/a		

**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 foregoing is true and correct.

Executed on July 18, 2023 DATE By \_\_\_\_\_ OFFICEHOLDER OR CANDIDATE