Officeholder and Candidate Campaign Statement – Short Form		Date of election if applicable: (Month, Day, Year)		Amendment (Explain Below) 5.05 ANO			Date Stamp  CALIFORNIA 470  FORM  For Official Use Only		-
1.	Statement Covers Calendar Year 20 22								,
2.	Officeholder or Candidate Information			3.	Office Sought or	r Held	<del></del>		
•	NAME OF OFFICEHOLDER OR CANDIDATE	· · · · · · · · · · · · · · · · · · ·		• ,	OFFICE SOUGHT OR HELD				Coverni
J	Jennifer navarro				Westside	Un	ion School	District,	Board
	STREET ADDRESS			•	JURISDICTION (LOCATION)	1.5		DISTRICT NUMBER	mem
		CA			los ana	jeres	County	., [	
	Palmdale	CA 935	51		,				•
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX/E-MAILADI	RESS						
_	661-810-1086							1	
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		
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1						•			
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	•								
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 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 8/3/22			E	. (				
	DATE					_		TE /	

FPPC Form 470/470 Supplement (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov