

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

402

Date of election if applicable:
(Month, Day, Year)

06/30/22

Amendment (Explain Below)

Date Stamp

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CAMPAIGN FINANCE

CALIFORNIA FORM **470**

For Official Use Only

1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Linda L.A. Small

STREET ADDRESS

CITY STATE ZIP CODE
Whittier CA 90601

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
562-857-4588 Linda.Small@bbsihq.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Whittier City School District Governing Board Trustee

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Whittier, CA S721

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 th

Executed on July 30 2022 DATE

By _____