

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

1/20/21

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

Amendment (Explain Below)

Date Stamp

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CAMPAIGN FINANCE

CALIFORNIA FORM 470

For Official Use Only

1. Statement Covers Calendar Year 20²¹ _____ .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Charles 'Chuck' Coyne

STREET ADDRESS

CITY STATE ZIP CODE
San Dimas CA 91773

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
9095992691

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Governing Board Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Bonita Unified School District

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 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 in this statement is true and correct.

Executed on 7/20/2021
DATE

By _____