

Campaign Statement – Short Form

Date Stamp
7/30/22

CALIFORNIA FORM 470

For Official Use Only

RECEIVED BY
LOS ANGELES COUNTY

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

11/3/2020

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 22

2022 AUG -2 PM 1:06
Email 7/29/22
CAMPAIGN FINANCE

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Jane Chon

STREET ADDRESS

CITY STATE ZIP CODE
San Marino CA 91108

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
626-375-1935 janechon@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Governing Board Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
San Marino 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 ID. 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 \$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 7/29/2022
DATE

By _____
OFFICEHOLDER OR CANDIDATE