

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

NAM
A-0218

Date of election if applicable: (Month, Day, Year) <u>11/8/2022</u>	<input type="checkbox"/> Amendment (Explain Below) _____ _____	Date Stamp RECEIVED BY LOS ANGELES COUNTY (LW) 2022 AUG -5 AM 8:43 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only <u>015717</u>
---	---	--	--

1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

3. Office Sought or Held

NAME OF OFFICEHOLDER OR CANDIDATE
NELSON MARTINEZ

STREET ADDRESS

CITY STATE ZIP CODE
HAWTHORNE CA 90250

OPTIONAL: FAX / E-MAIL ADDRESS
626-833-5673 nmartinez@wiseburn.org

OFFICE SOUGHT OR HELD
WISEBURN UNIFIED SCHOOL DISTRICT

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
EZ SEGUNDO

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 \$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 8/5/2022 By _____
DATE OR CANDIDATE

RS