Campaign Statement –				RECEIVED BY CALIFORNIA 470			
Sh	ort Form	Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)		2021 JUL 29 PM 12: 15 CAMPAIGN FINANCE	For Official Use Only	
		11/2018					
1.	Statement Covers Calendar Year 20 21	4.					
2.	Officeholder or Candidate Information		3.	Office Sought or I	Held		
	NAME OF OFFICEHOLDER OR CANDIDATE	 	_	OFFICE SOUGHT OR HELD		MARCHAN AND AND AND AND AND AND AND AND AND A	
	Jennifer Chayo Fenton			Manhattan Beach Un	nified School District, Governing	Board Member	
	STREET ADDRESS			JURISDICTION (LOCATION)		DISTRICT NUMBER (IF APPLICABLE)	
				Manhattan Beach		(IF AF CIOABLE)	
	CITY	STATE ZIP CODE					
	(310) 993-2926 jenchris.fenton@gmail.co	m					
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS					
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 anticipate that I will	receive less to	han \$2 000 and that I will	spend less than \$2,000 during the ca	alendar year and that I have use	
	all reasonable diligence in preparing this statement.	I certify under penalty of perjury un	der the laws o	f the State of California to	hat the forecoing is true and correct.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

7/27/213