Officeholder and Candidate Campaign Statement – Short Form					CECEIVED BY	RECEIVED BY FORM 4/0		
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)		10\$ ANGELES CO	For Official Use Only PM 2: 46		
1.	Statement Covers Calendar Year 20 21							
2.	Officeholder or Candidate Information		3.	Office Sought of	r Held			
	NAME OF OFFICEHOLDER OR CANDIDATE			OFFICE SOUGHT OR HELD				
	Anthony Hunt		Governing School Board Member					
	STREET ADDRESS			JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)				
				Los Angeles County/Palmdale				
	CITY	STATE ZIP CODE						
	Palmdale	CA 93552						
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS						
	661-839-3844	hunt4psd@gmail.com		in a second				
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		
	Anthony Hunt for School Board	5307 Cisero Dr	5307 Cisero Dr. Palmdale, CA 93552		Anthony Hunt	Anthony Hunt		
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					ne calendar year and that I have used ect.		
	09/13/2021 Executed on			Ву				
	DATE					NDIDATE		