Ca	ficeholder and Candidate Impaign Statement –			Date Stamp CALIFORNIA 470 FORM	
Short Form		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	LOS ANGELES COUNTY For Official Use Only 2021 JUL 26 PM 2: 42 CAMPAIGN FINANCE	
1.	Statement Covers Calendar Year 20	21.			
2.	Office holder or Candidate Information NAME OF OFFICEHOLDER OR CANDIDATE Jennifer Hall Lee STREET ADDRESS STATE ZIP CODE A Hadena CA 91001 AREA CODE/DAYTIME PHONE NUMBER 818-219-9339 OFFICE SOUGHT OR HELD Pasadena Infried & had District Board Trustee JURISDICTION (LOCATION) Vasadena 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. NUMBE	ER .	COMMITTEE ADDRESS	NAME OF TREASURER	
5.	Verification I declare under penalty of perjury that to the bes all reasonable diligence in preparing this statem			that I have used	
	Executed on DATE	2, 202/	By		

FPPC Form 470/470 Supplement (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov