

MAILED 5/29/22

Officeholder and Candidate Campaign Statement - Short Form

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

Amendment (Explain Below)

RECEIVED BY LOS ANGELES COUNTY 2022 JUN -6 PM 3:50 CAMPAIGN FINANCE

CALIFORNIA FORM 470 For Official Use Only

1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

John H Martin

CITY STATE ZIP CODE

Arcadia CA 91006

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX/E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Pasadena Area Community College Dist.

JURISDICTION (LOCATION)

DISTRICT NUMBER (IF APPLICABLE) 6

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.

Table with 3 columns: 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 5/27/22 DATE

By SIGNATURE OF OFFICEHOLDER OR CANDIDATE