

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

7/16/24  
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1. Statement Covers Calendar Year 20 24

Raymond Cheung

2. Officeholder or Candidate Information

3. Office Sought or Held

NAME OF OFFICEHOLDER OR CANDIDATE  
[REDACTED]

STREET ADDRESS  
[REDACTED]

CITY  
Arcadia

STATE  
CA

ZIP CODE  
91007

CITY  
626-755-5270

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

OFFICE SOUGHT OR HELD  
Governing Board Member

JURISDICTION (LOCATION)  
Arcadia Unified School District

DISTRICT NUMBER (IF APPLICABLE)

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 7-16-2024

By [Signature]  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE