

Officeholder and Candidate
Campaign Statement –
Short Form

5724

9/13/24 (3)
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CAMPAIGN FINANCE
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Date of election if applicable:
(Month, Day, Year)
11/8/2022

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Ernesto Smith

STREET ADDRESS

CITY Valencia STATE CA ZIP CODE 91355

AREA CODE/DAYTIME PHONE NUMBER 818-429-6271

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Governing School Board Trustee Area 3

JURISDICTION (LOCATION) Newhall 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
<u>N/A</u>		

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 if

Executed on 9/11/2024
DATE

By _____