Officeholder and Candidate Campaign Statement – Short Form	Date of election if applicable:	☐ Amendment (Explain Below)	CAMPAIGN FINANCE
	(Month, Day, Year)		
. Statement Covers Calendar Year 20	24.		
Officeholder or Candidate Information NAME OF OFFICEHOLDER OR CANDIDATE FRANCISCO JAUL SANT STREET ADDRESS CITY WHITTIER AREA CODE/DAYTIME PHONE NUMBER (502) 279-4329	STATE ZIP CODE CA 90605 OPTIONAL: FAX/E-MAIL ADDRESS F31679 @1 yaho	LOS AN GELB	TER SCHOOL DISTRICT GOVERNING BOARD DISTRICT NUMBER (IF APPLICABLE)
4. Committee Information List all committees of which you have knowled COMMITTEE NAME AND I.D. NUMBER	edge that are primarily formed to rec		nditures on behalf of your candidacy. NAME OF TREASURER
5. Verification I declare under penalty of perjury that to the best all reasonable diligence in preparing this statement of the statement of	of my knowledge I anticipate that I will ent. I certify under penalty of perjury ur	receive less than \$2,000 and that I will der the laws	spend less than \$2,000 during the calendar year and that I have used ue and correct.