

Officeholder and Candidate  
Campaign Statement  
Form 470 Supplement

*SM*

SEE INSTRUCTIONS ON REVERSE

☒ **Amendment** (Explain Below)

Raised more than \$2,000

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LOS ANGELES COUNTY

Date Stamp

2024 SEP 26 PM 3

CAMPAIGN FINANCE

CALIFORNIA  
FORM

**470**  
SUPPLEMENT

For Official Use Only

This form is written notification that the officeholder/candidate listed below has received contributions totaling \$2,000 or more or has made expenditures of \$2,000 or more during the calendar year.

**1. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

Giggy Perez-Saab

STREET ADDRESS

CITY

Downey

STATE

CA

ZIP CODE

90240

AREA CODE/DAYTIME PHONE NUMBER

562-746-5904

OPTIONAL: FAX / E-MAIL ADDRESS

g4downey@gmail.com

**2. Office Sought**

OFFICE SOUGHT

Downey School Board Member

DISTRICT NUMBER  
(IF APPLICABLE)

Trustee Area 3

DATE OF ELECTION (MONTH, DAY, YEAR)

November 5, 2024

**3. Date Contributions Totaling \$2,000 or More Were Received or Date Expenditures of \$2,000 or More Were Made**

August 30, 2024

(MONTH, DAY, YEAR)