

Officeholder and Candidate
Campaign Statement –
Short Form

6E24-1

CALIFORNIA FORM 470

For Official Use Only

016709

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

☐ Amendment (Explain Below)

Date Stamp
RECEIVED BY
LOS ANGELES COUNTY
2024 JUL 31 PM 2:01
CAMPAIGN FINANCE

1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Laura Santos

STREET ADDRESS

CITY

STATE

ZIP CODE

Bassett

CA

91746

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

626 261-9358

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Trustee/Governing Board Member

JURISDICTION (LOCATION)

Mt San Antonio College

DISTRICT NUMBER
(IF APPLICABLE)

3

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

none

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2 all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the S

Executed on July 30, 2024
DATE

By _____