

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

5723

CALIFORNIA FORM **470**

For Official Use Only

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

Amendment (Explain Below)

LOS

Date Stamp
7/31/23 (3)
RECEIVED BY
LOS ANGELES COUNTY
2023 AUG -2 AM 11:31
CAMPAIGN FINANCE
DISCLOSURE SECTION

1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Jacqueline Saidana

STREET ADDRESS

CITY

El Monte

STATE

CA

ZIP CODE

91732

AREA CODE/DAYTIME PHONE NUMBER

(626) 290-0511

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Governing Board Member Mountain View School District

JURISDICTION (LOCATION)

El Monte, CA

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
		RECEIVED BY LOS ANGELES COUNTY 2023 AUG -2 PM 12:00 CAMPAIGN FINANCE DISCLOSURE SECTION

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 information provided is true and correct.

Executed on

07/28/2023

DATE

By

INDICATE