

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

Date Stamp	CALIFORNIA FORM 470
RECEIVED BY LOS ANGELES COUNTY 2023 JUL 24 PM 1:53 CAMPAIGN FINANCE DISCLOSURE SECTION	
For Official Use Only	

Date of election if applicable: (Month, Day, Year) <u>NA</u>	<input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/>
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1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

3. Office Sought or Held

NAME OF OFFICEHOLDER OR CANDIDATE
Dr. Sue Eltessen for Bellflower School Board

STREET ADDRESS
Board

CITY
Bellflower

STATE
CA

ZIP CODE
90706

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

OFFICE SOUGHT OR HELD
Governing Board Member Bellflower Unified School District

JURISDICTION (LOCATION)
LA County

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
NA		

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 foregoing is true and correct.

Executed on July 20, 2023
 DATE

By _____
 OFFICEHOLDER OR CANDIDATE