

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

8/1/22 (D)

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

11/8/2022

Amendment (Explain Below)

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CAMPAIGN FINANCE

CALIFORNIA FORM 470
For Official Use Only

1. Statement Covers Calendar Year 20 2022

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Paul Solano
STREET ADDRESS

CITY STATE ZIP CODE
La Puente CA 91746
AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
6267806950 psolano79@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
School Board Member
JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Bassett Unified School District

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 St

alendar year and that I have used

Executed on 8/1/2022
DATE

By _____
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