

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

5723

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)
_____	_____
_____	_____

RECEIVED  
LOS ANGELES CO  
③ 8/1/23  
AUG -3 PM 2:20  
CAMPAIGN F  
DISCLOSURE

CALIFORNIA FORM <b>470</b>
For Official Use Only
019249

1. Statement Covers Calendar Year 20 22

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE		
SERGIO R MORTARA		
STREET ADDRESS		
CITY	STATE	ZIP CODE
HAWTHORNE	CA	90250
AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS	
310-676-5444		

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD	
HAWTHORNE SCHOOL BOARD #64592	
JURISDICTION (LOCATION)	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
MORTARA FOR HAWTHORNE SCHOOL BOARD 2022		SERGIO R MORTARA
# 1361110		

**5. Verification**

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

Executed on 07/31/2023  
DATE

By \_\_\_\_\_