

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

8/6/22 (1)

Date of election if applicable: (Month, Day, Year)  _____	<input type="checkbox"/> <b>Amendment</b> (Explain Below)  _____ _____
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Date Stamp	<b>CALIFORNIA FORM 470</b>
RECEIVED BY LOS ANGELES COUNTY 2022 AUG -8 PM 3:42 CAMPAIGN FINANCE	For Official Use Only  020770

1. Statement Covers Calendar Year 20 \_\_\_\_\_ .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE		
Katherine M Cooper		
STREET ADDRESS		
CITY	STATE	ZIP CODE
Saugus	CA	91350
AREA CODE/DAYTIME PHONE NUMBER		OPTIONAL: FAX / E-MAIL ADDRESS
661-373-1555		

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD	
Governing Board Member	
JURISDICTION (LOCATION)	DISTRICT NUMBER (IF APPLICABLE)
Saugus Union School District	Area 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

**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 8-5-2022  
DATE