

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

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(4) DC

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CAMPAIGN FINANCE
DISCLOSURE SECTION

CALIFORNIA
FORM **470**

For Official Use Only

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

11/4/2020

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 23.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Patrick Cahalan

STREET ADDRESS

CITY STATE ZIP CODE

Pasadena CA 91104

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

626.395.3290 pat.cahalan@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

School Board Trustee

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)

Pasadena Unified School District Trustee Area 4

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	NA	NA

5. Verification

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

I have used

Executed on 07/26/2023 DATE