Officeholder and Candidate Campaign Statement - Form 470 Supplement SEE INSTRUCTIONS ON REVERSE	Amendment (Explain Bolow) CONTRIBUTIONS Nello (Wed & 2000), 00	2022 NOV 17 AM 8: 40 CAMPAIGN FINANCE	For Official Use Only
This form is written notification that the officeholder/candidate listed below has or has made expenditures of \$2,000 or more during the calendar year.	received contributions totaling \$2,000 or more		
1. Officeholder or Candidate Information  NAME OF OFFICEHOLDER OR CANDIDATE			
Pal NH ale	+ 93591	*	
CITY  CITY  AREA CODE/DAY TIME PHONE NUMBER  STA  ORI	ATE ZIP CODE  A SLOV O SMUUL, COM  TIONAL: FAX/E-MAIL ADDRESS		
2. Office Sought			
DISTUCT BOARDMONDER	DISTRICT NI (IF APPLICA)		
DATE OF ELECTION (MONTH, DAY, YEAR)  NOW LIMON . Str. 2008			
Date Contributions Totaling \$2,000 or More Were Rece	ived or Date Expenditures of \$2,	,000 or More Were Made	