Officeholder and Candidate Campaign Statement – Short Form				Date Stamp, IVED CALIFORNIA 470	
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	7 T (1 t) 1 T (1 t)	FORM For Official Use Only
		11-5-204	BIANG PROPERTY OF THE PROPERTY	KINGS COUNTY ELECTIONS	
1.	Statement Covers Calendar Year 20	-•			
2. 	ENCTOODED TO THE TOTAL NORMALIN	STATE ZIP CODE OPTIONAL: FAX/E-MAIL ADDRESS	3. Office Sought or Held OFFICE SOUGHT OR HELD JURISDICTION (LOCATION)	unset Unified School DISTRICT NUMBE (IF APPLICABLE)	<u>Oxstric</u>
-7,	List all committees of which you have knowledge to committee NAME AND I.D. NUMBER	hat are primarily formed to rec	elve contributions or to make expendit COMMITTEE ADDRESS	ures on behalf of your candidacy. NAME OF TREASURER	
	MIA				
	Nelp				
5.	Verification I declare under penalty of perjury that to the best of my all reasonable diligence in preparing this statement. To Executed on DATE				hat I have used