Officeholder and Candidate Campaign Statement – Short Form

8723

Date Stamp
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LOS ANGELES COUNTY
③ 8/8/23
2023 AUG 10 AM II: 09
CAMPAIGN FINANCE
DISCLOSURE SECTION

CALIFORNIA FORM 470

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020409

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

☐ **Amendment** (Explain Below)

1. **Statement Covers Calendar Year 20** _23_ .

2. **Officeholder or Candidate Information**

   NAME OF OFFICEHOLDER OR CANDIDATE
   Armond Aghukhanian

   STREET ADDRESS

   Burbank, CA 91506

   CITY
   STATE   ZIP CODE

   818 6409797   Armond1915@gmail.com

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

3. **Office Sought or Held**

   OFFICE SOUGHT OR HELD
   1 School Board

   JURISDICTION (LOCATION)
   Burbank

   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

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 _8/8/2023_   By _____
   DATE   R CANDIDATE