

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

5723

<p>Date of election if applicable: (Month, Day, Year)</p>	<p><input type="checkbox"/> Amendment (Explain Below)</p>	<p>Date Stamp RECEIVED BY LOS ANGELES COUNTY ① 7/20/23 2023 JUL 24 PM 2:13 CAMPAIGN FINANCE DISCLOSURE SECTION</p>	<p>CALIFORNIA FORM 470 For Official Use Only 018447</p>
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1. Statement Covers Calendar Year 20 22 .

<p>2. Officeholder or Candidate Information</p> <p>NAME OF OFFICEHOLDER OR CANDIDATE <u>Soo Yoo</u></p> <p>CITY STATE ZIP CODE <u>Cerritos CA 90703</u></p> <p>AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS <u>562-405-0797 Soo.Yoo@abcusd.us</u></p>	<p>3. Office Sought or Held</p> <p>OFFICE SOUGHT OR HELD <u>ABCUSD School Board Member</u></p> <p>JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE) <u>ABCUSD 2</u></p>
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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 in contributions 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 information provided in this statement is true and correct.

Executed on 7/18/2023 By _____