

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

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

3/03/2020

**Amendment** (Explain Below)

\_\_\_\_\_

\_\_\_\_\_

Date Stamp  
**RECEIVED BY  
LOS ANGELES COUNTY**

2023 JUL 17 PM 2: 23

**CAMPAIGN FINANCE  
DISCLOSURE SECTION**

**CALIFORNIA  
FORM 470**

For Official Use Only

**1. Statement Covers Calendar Year 20<sup>23</sup>**

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

Kay Kinsler

STREET ADDRESS

\_\_\_\_\_

CITY STATE ZIP CODE

Arcadia CA 91006

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

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

Arcadia Unified School District Governing Board

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)

Arcadia, Los Angeles County

**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 July 10, 2023 DATE

By \_\_\_\_\_ HOLDER OR CANDIDATE