

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

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

**Amendment** (Explain Below)

Date Stamp  
RECEIVED  
LOS ANGELES  
07/31/23  
2023 AUG -2 AM 11:26  
CALIFORNIA FORM 470  
For Official Use Only  
CAMPAIGN FINANCE  
DISCLOSURE SECTION

Statement Covers Calendar Year 20 23

**1. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Richard J Hever

CITY STATE ZIP CODE  
Whittier CA 90606

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
562-360-2176 heversfam@verizon.net

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
Whittier City School Board Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
Trustee Area 3 562-789-3000

**2. 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

**3. 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 information provided is true and correct.

Executed on 7-31-23  
DATE

By \_\_\_\_\_  
OFFICEHOLDER OR CANDIDATE

Clear Form Print Form