Officenoider and Candidate  Campaign Statement –  Short Form				Q Voters	CALIFORNIA 470	
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	JUL 18 2024	For Official Use Only	
		Nov 5, 2024		Imperial		
1.	Statement Covers Calendar Year 20 24.					
2.	Officeholder or Candidate Information		3. Office Sought or Hel	d		
	NAME OF OFFICEHOLDER OR CANDIDATE  Patricia & Burton  STREET ADDRESS  JURISDICTION (LOCATION)  OFFICE SOUGHT OR HELD  Seeley Elen-School Trustee  JURISDICTION (LOCATION)					
	STREET ADDRESS  CITY STATE ZIP CODE		Inperior (FAPPLICABLE) 389208			
	760-353-291) AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX/E-MAIL ADDRESS				
4.	Committee Information List all committees of which you have knowledge the	ommittee Information It 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	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 07/18/2024  By Latinia L. Routes  Signature of OfficeHolder or CANDIDATE					