Office. der and Candidate Campaign Statement – Short Form (Government Code Section 84206)		Type or print in ink.			Date Stamp	CALIFORNIA 470	
		Date of election if applicat (Month, Day, Year)	ole: Ame	endment (Explain Below)	ECEIVED	FORM For Official Use Only	
_					CITY CLERK		
1.	Statement Covers Calendar Year 2	0		GIT	1 OF FRANCE		
2.	Officeholder or Candidate Information			Office Sought or Held			
	NAME OF OFFICEHOLDER OR CANDIDATE			OFFICE SOUGHT OR HELD			
	George Loew			PUSD BOE seat 2			
	STREET ADDRESS					DISTRICT NUMBER	
	938 N. Oakland Ave.	CA 91104		(,		(IF APPLICABLE)	
	CITY	STATE ZIP CODE					
	626-818-2450	gl					
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL AI	DDBESS				
		OF HOMAE, FACT C-MAIL AL	DDRESS				
4.	Committee Information List all committees of which you have knowled COMMITTEE NAME AND I.D. NUMBER Committee to Elect George Loew	938 N. Oa	Pe primarily formed to receive contributions or COMMITTEE ADDRESS 938 N. Oakland Ave. Pasadena, CA 91104		ake expenditures on behalf of your candidacy. NAME OF TREASURER William Loew		
	Verification I declare under penalty of perjury that to the b calendar year and that I have used all reason that the foregoing is true and correct. Executed on	est of my knowledge I ant able diligence in preparin	g this stateme	nt. I certify under penalt	y of perjury under the laws	of the State of California	
				,	FPPC Form 47 FPPC Toll-Free Helpline:	0/470 Supplement (January/05) 866/ASK-FPPC (866/275-3772)	