

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

Date Stamp	CALIFORNIA FORM 470
<p>RECEIVED</p> <p>2022 JUL 20 P 5:09</p>	For Official Use Only

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)
_____	_____ _____

1. Statement Covers Calendar Year 20 22

CITY OF FOSTER CITY
COMMUNICATIONS/
CITY CLERK

2. Officeholder or Candidate Information

3. Office Sought or Held

NAME OF OFFICEHOLDER OR CANDIDATE
Jon Froomin

STREET ADDRESS
[REDACTED]

CITY STATE ZIP CODE
Foster City [REDACTED]

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

OFFICE SOUGHT OR HELD
Council Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Foster City

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
None		

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 in my campaign. I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the law that the information provided is true and correct.

Executed on July 14, 2022
DATE

