

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

(Government Code Section 84206)

Type or print in ink.

SHORT FORM

<p>Date of election if applicable: (Month, Day, Year)</p> <p><u>3/5/2013</u></p>	<p><input type="checkbox"/> Amendment (Explain Below)</p> <p>_____</p> <p>_____</p>	<p>Date Stamp</p> <p>13 FEB 01 09:04AM</p> <p>CITY CLERK</p>	<p>CALIFORNIA FORM <b>470</b></p> <p>For Official Use Only</p>
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1. Statement Covers Calendar Year 20 13 .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
DEAN COOPER

STREET ADDRESS  
[REDACTED]

CITY STATE ZIP CODE  
PASADENA, CA 91101

AREA CODE/DAYTIME PHONE NUMBER  
[REDACTED]

OPTIONAL FAX/E-MAIL ADDRESS  
[REDACTED]

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
PUSD BOARD OF EDUCATION STATE/DISTRICT

JURISDICTION (LOCATION)  
PASADENA

DISTRICT NUMBER (IF APPLICABLE)

**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 \$1,000 and that I will spend less than \$1,000 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 2/10/13 DATE

By [Signature] SIGNATURE OF OFFICEHOLDER OR CANDIDATE