Check One: ☑ Initial ☐ Ame			CALIFORNIA 501
Anie	LOS ANGELES COUR 2019 APR -8 AM II	19 F 5010 1-	FORM SU
	2013 AFR -8 AM [15]	- 	1
I. Candidate Information:	PROPOSITION B UN	CAMPAIGN FINANCE	
IAME OF CANDIDATE (Lest, First Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional) EMAII	(optional)
Iniguez, Joseph F.	(562) 983-0815	() gaz	y@crummittandassociates.com
STREET ADDRESS	CITY	STATE ZIP CO	DDE
ASSIGN COLICUT (DOCITION TITLE)	Long Beach	CA 908	
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable. X No	DN-PARTISAN OFFICE
DISTRICT Attorney DEFICE JURISDICTION	County of Los Angeles	PART	Y PREFERENCE: (Check one box, if applicable.)
State (Complete Part 2.)	•		X PRIMARY / GENERAL
City County Multi-County:	(Name of Multi-County Jurisdiction)	2020 (Year of Election)	SPECIAL / RUNOFF
(Check one box) I accept the voluntary expenditure ceiling I do not accept the voluntary expenditure			
Amendment: I did not exceed the expenditure the general or special run-off electric description.	ceiling in the primary or special election held on: _ction,	and I accept the volu	intary expenditure celling for
I did not exceed the expenditure of the general or special run-off electric (Mark if applicable)	ction.	econogra	intary expenditure ceiling for
I did not exceed the expenditure of the general or special run-off electric (Mark if applicable)		econogra	intary expenditure ceiling for
I did not exceed the expenditure of the general or special run-off electric (Mark if applicable)	ction.	econogra	intary expenditure ceiling for
I did not exceed the expenditure the general or special run-off elections (Mark if applicable) On, I contributed p	ction.	for the election stated above.	intary expenditure ceiling for

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