

Officeholder and Candidate
Campaign Statement –
Short Form

Date Stamp RECEIVED BY LOS ANGELES COUNTY 2023 JUL 24 PM 1:55 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 470 <small>For Official Use Only</small>
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Date of election if applicable: (Month, Day, Year) _____	<input type="checkbox"/> Amendment (Explain Below) _____ _____
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1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
JAY Lewitt

STREET ADDRESS

CITY STATE ZIP CODE
AGOURA Hills CA 91301

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
818 597 9900 jle Witt@lv mwd.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Director

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Las Virgenes Municipal Water District 5

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
<u>N/A</u>		

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 all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that _____ calendar year and that I have used _____

Executed on 7/10/23 DATE By _____