7/22/21

Officeholder and Candidate Campaign Statement - Short Form					BECKINED ON FORM 470		
		Date of election if applicable: (Month, Day, Year)	☐ Amendment (Explain Below)		LOS ANGELES COUNTY For Official Use Only		
					CAMPAIGN FINANCE		
_		91			TOATTPAIGN FINANCE		
1.	Statement Covers Calendar Yea	r20 <u>—</u> .					
2.	Officeholder or Candidate Information 3.				Office Sought or Held		
	NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOUGHT OR HELD				
	LEE RENGER		BOARD DIRECTOR, LAS VIRGENES MUNICIPAL WATER DISTRICT				
	STREET ADDRESS			JURISDICTION (LC	DISTRICT NUMBER (IF APPLICABLE)		
				LOS ANGELES COUNTY			
	CITY STATE ZIP CODE			•			
	CALABASAS	CA 9130					
	AREA CODE/DAYTIME PHONE NUMBER	ADDRESS					
	818 880-4029						
4.	Committee Information						
	List all committees of which you have knowledge that are primarily formed to receive			ontributions or to make expenditures on behalf of your candidacy.			
	COMMITTEE NAME AND I.D. NUMBER COMMITTEE			SS	NAME OF TREASURER		
	NONE						
_							
					1		
=	Verification						
Э.		a best of my knowledge Lanticipate	that I will receive less t	han \$2 000 and	that I will spand loss than \$2 000 duri	ing the calendar year and that I have	
	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 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.						
	C .	and statement. Footery and or pondi	y or perjury under the	iding of the State	of committee and the releganty is a de-	did correct.	
	duly 18, 7021						
	Executed on			ByIGNATURE OF OFFICEHOLDER OR CANDIDATE			
	Clear Form Print Form	1					