

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

Date of election if applicable:  
(Month, Day, Year)

\_\_\_\_\_

**Amendment** (Explain Below)

\_\_\_\_\_

\_\_\_\_\_

Date Stamp <b>RECEIVED</b> LOS ANGELES	<b>CALIFORNIA</b> <b>FORM 470</b>
2022 FEB -7 PM 2:20	For Official Use Only
CAMPAIGN FINANCE 2/5/22	020745

1. Statement Covers Calendar Year 20 22.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

AUDREY T MILLER

STREET ADDRESS

\_\_\_\_\_

CITY	STATE	ZIP CODE
LANCASTER	CA	93535

AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS
661-609-1288	

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

DIVISION SIX-ANTELOPE VALLEY-EAST KERN WATER AGENCY

JURISDICTION (LOCATION)

LOS ANGELES, KERN, VENTURA CO

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
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 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 2/3/2022  
DATE

By \_\_\_\_\_  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form

Print Form