

5723

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

(Government Code Section 84208)

Type or print in ink.

SHORT FORM

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

Amendment (Explain Below)

LOS ANGELES COUNTY

2023

Date Stamp  
RECEIVED BY  
LOS ANGELES COUNTY  
① 7/24/23  
JUL 26 PM 2:37

CALIFORNIA FORM 470

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CAMPAIGN FINANCE  
DISCLOSURE SECTION

1. Statement Covers Calendar Year 20 23

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

MICHAEL R ADAMS

STREET ADDRESS

CITY

Palmdale

STATE

CA

ZIP CODE

93551

AREA CODE/DAYTIME PHONE NUMBER

661 361 3139

OPTIONAL: FAX / E-MAIL ADDRESS

mradamis@avc.edu

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

Antelope Valley Community College District Governing Board member

JURISDICTION (LOCATION)

Los Angeles County

DISTRICT NUMBER  
(IF APPLICABLE)

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**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
N/A		

**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 7-22-23 DATE

By \_\_\_\_\_ CANDIDATE