

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

7/27/23

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

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**Amendment** (Explain Below)

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Date Stamp  
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**CALIFORNIA FORM 470**  
For Official Use Only

1. Statement Covers Calendar Year 20 2023

**2. Officeholder or Candidate Information**

**3. Office Sought or Held**

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

ANGELA CUTBILL

LAS VIRGENES UNIFIED SCHOOL BOARD

STREET ADDRESS

JURISDICTION (LOCATION)

DISTRICT NUMBER  
(IF APPLICABLE)

LA COUNTY

CITY STATE ZIP CODE

AGOURA HILLS

CA 91301

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

818-326-1455

**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
COMMITTEE TO RE-ELECT ANGELA CUTBILL FOR LVUSD SCHOOL BOARD 2022 (discontinued)	AGOURA HILLS, CA 91301	DAVID CUTBILL

**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 7/26/23  
DATE

By \_\_\_\_\_  
DATE

Clear Form

Print Form