

Officeholder and Candidate
Campaign Statement –
Short Form

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

November, 5, 2024

☐ Amendment (Explain Below)

6E24

Date Stamp RECEIVED BY LOS ANGELES COUNTY 2024 OCT -4 AM 10:22 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only 016656
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1. Statement Covers Calendar Year 20 24 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Frank Aguirre

STREET ADDRESS

CITY

Whittier

AREA CODE/DAYTIME PHONE NUMBER

3238046693

STATE

CA

ZIP CODE

9064

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Orchard Dale Water District Board of Director

JURISDICTION (LOCATION)

Los Angeles County

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

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$;
all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the

g the calendar year and that I have used
orrect.

Executed on 10/3/2024
DATE

By _____

CANDIDATE