

RECEIVED BY
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 2022 AUG 30 PM 2:57
 CAMPAIGN FINANCE

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

Date Stamp	CALIFORNIA FORM 470
	For Official Use Only

Date of election if applicable: (Month, Day, Year) 11/08/2022	<input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/>
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1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
 Jay Lewitt

STREET ADDRESS

CITY STATE ZIP CODE
 Agoura Hills CA 91301

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX/E-MAIL ADDRESS
 (818) 516-2826

3. Office Sought or Held

OFFICE SOUGHT OR HELD
 Director

JURISDICTION (LOCATION) DISTRICT NUMBER
 (IF APPLICABLE)
 Las Virgenes Municipal Water District 5

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 \$2,000 and that I will all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California th

that I have used

Executed on August 24, 2022
 DATE

By _____