

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

Date Stamp RECEIVED BY LOS ANGELES COUNTY 2024 JUL 25 PM 12:28 CAMPAIGN FINANCE	CALIFORNIA FORM 470
	For Official Use Only

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)

1. Statement Covers Calendar Year 20 24 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Ann Ransford

STREET ADDRESS

CITY
Glendale

STATE
CA

ZIP CODE
91208

AREA CODE/DAYTIME PHONE NUMBER
818 549-9182

OPTIONAL: FAX / E-MAIL ADDRESS
annransford@mac.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
trustee

JURISDICTION (LOCATION)
Glendale Community College Dist

DISTRICT NUMBER
(IF APPLICABLE)
Area 2

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
<u>Re-Elect Ann Ransford gcc trustee Area 2 - 1309033</u>	<u>1846 Camino del Cielo Glendale, CA 91208</u>	<u>Arjins Mahwodi</u>

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 July 20, 2024
DATE