

7/24/24 (1)

Officeholder and Candidate Campaign Statement - Short Form

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)	Date Stamp RECEIVED BY LOS ANGELES COUNTY 2024 JUL 26 PM 3:13 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only
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1. Statement Covers Calendar Year 20 2024

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
ANGELA CUTBILL

STREET ADDRESS

CITY STATE ZIP CODE
AGOURA HILLS CA 91301

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
818-326-1455

3. Office Sought or Held

OFFICE SOUGHT OR HELD
LAS VIRGENES UNIFIED SCHOOL BOARD

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
LA COUNTY

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 (terminated 12/22/22)	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 7/22/24 DATE

By _____ NDIDATE

Clear Form

Print Form