

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

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

July 30, 2024

Amendment (Explain Below)

7/12/24
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CAMPAIGN FINANCE

CALIFORNIA FORM 470

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1. Statement Covers Calendar Year 20 24.

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2. Officeholder or Candidate Information

3. Office Sought or Held

NAME OF OFFICEHOLDER OR CANDIDATE

Charles Marvin Collins

STREET ADDRESS

CITY

La Canada Flintridge

AREA CODE/DAYTIME PHONE NUMBER

818-790-1009

STATE

CA

ZIP CODE

91011

OPTIONAL: FAX / E-MAIL ADDRESS

OFFICE SOUGHT OR HELD

Director, La Canada Irrigation District

JURISDICTION (LOCATION)

La Canada Flintridge, CA

DISTRICT NUMBER
(IF APPLICABLE)

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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
none		

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 10, 2024
DATE

By _____
OFFICEHOLDER OR CANDIDATE