Officeholder and Candidate Campaign Statement – Short Form			Date of election if applicable: (Month, Day, Year) Amendment (Explain Below)			LO34 2022	Date Stamp CALIFORNIA 470 COS ANGELES COUNTY 2022 JUL 28 PM 4: 03 CAMPAIGN FINANCE	
١.	Statement Covers Calendar Year 20 22							
2.	Officeholder or Candidate Information			3.	Office Sought o			
	NAME OF OFFICEHOLDER OR CANDIDATE				OFFICE SOUGHT OR HELD	D		
	ANTHONY J. LIMA]			DIRECTOR, DIV			
	STREET ADDRESS				JURISDICTION (LOCATION			DISTRICT NUMBER (IF APPLICABLE)
					ROWLAND WA	TER DIST	RICT	
	CITY	STATE	ZIP CODE					
	HACIENDA HEIGHTS	CA	91745					
	AREA CODE/DAYTIME PHONE NUMBER	į	FAX / E-MAIL ADDRESS					
_	909-714-6686	ALIMA	@RWD.ORG					
4.	Committee Information List all committees of which you have knowledge the	nat are prim	arily formed to rece	eive contribu	tions or to make exp	penditures	on behalf of your candidacy.	
	COMMITTEE NAME AND I.D. NUMBER		1	COMMITTEE ADDRESS			NAME OF TREASURER	
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<u> </u>	Verification	1						
	I declare under penalty of perjury that to the best of my	by 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 certify under penalty of perjury under the laws of the State of California that the foregoing is truffend correct.						
-	all reasonable diligence in preparing this statement. I co	ertify under p	penalty of perjury und	der the laws o	f the State of Californi	ia that the fo	ironning is truspend correct	•
	7/26/2022	}						
	Executed onDATE				Ву			