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Officeholder and Candidate Campaign Statement

Campaign Statement –						Date	Date Stamp CALIFORNIA 470			
Sn	ort Form		ection if applicable: nth, Day, Year)	☐ Amen	dment (Explain Below)		LANNA L	CO Unide Official Use Only		
		11/08/2	022			Zi	122 SEP 22 P	M 3: 11		
1.	Statement Covers Calendar Year 20	22						N-A-G-L-		
2.	Officeholder or Candidate Information	on		3.	Office Sought or I	leld	***************************************			
	NAME OF OFFICEHOLDER OR CANDIDATE				OFFICE SOUGHT OR HELD					
	Alec Hyeler					alley Water District Board of Directors				
	STREET ADDRESS				JURISDICTION (LOCATION)			DISTRICT NUMBER (IF APPLICABLE)		
					La Crescenta					
	CITY	STATE	ZIP CODE							
	La Crescenta AREA CODE/DAYTIME PHONE NUMBER	CA	91214 FAX/E-MAIL ADDRESS							
	(818) 434 4036	anyele	@gmail.com							
4.	Committee Information	dadaa that are mini	anily formed to re-	aire aantribre	tions outs make avenue	adituras on babalf	of ways andiday.			
	List all committees of which you have knowledge that are primarily COMMITTEE NAME AND I.D. NUMBER			COMMITTEE ADDRESS			NAME OF TREASURER			
	COMMITTEE NAME AND I.U. NUMBER			COMMITTE	E ADDRESS		NAME OF	REASURER		
	N/A					ļ				
	1071									
	N/A									
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5.	Verification		,	V - 17 17 - 17 18 18 18 18 18 18 18 18 18 18 18 18 18						
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	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 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.									
	00/40/2000									
	09/18/2022 Executed on				Ву					
	DATE									

FPPC Form 470/470 Supplement (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov