

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

7/19/2022 (3) 9722

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

**Amendment** (Explain Below)

Date Stamp  
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CAMPAIGN FINANCE

CALIFORNIA  
FG 470  
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1. Statement Covers Calendar Year 20 22

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Anne E Misicka

STREET ADDRESS

CITY STATE ZIP CODE  
Palmdale CA 93591661-264-3

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
661-264-3895

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
Board Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)

**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

**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 19 2022  
DATE

By \_\_\_\_\_  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE