

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

7/25/22 PM

|  |   |  |   |
|--|---|--|---|
| <b>Date of election if applicable:</b><br>(Month, Day, Year) | <input type="checkbox"/> <b>Amendment</b> (Explain Below) | RECEIVED BY<br>LOS ANGELES COUNTY<br>2022 JUL 26 PM 2:55<br>CAMPAIGN FINANCE | <b>CALIFORNIA</b><br><b>FORM 470</b><br>For Official Use Only |
|--|---|--|---|

1. Statement Covers Calendar Year 20 22.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Frank Colcord

STREET ADDRESS

CITY STATE ZIP CODE  
La Crescenta CA 91214

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
(818) 216-5482 mr.frank.colcord@gmail.com

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
Director

|   |   |
|---|---|
| JURISDICTION (LOCATION)<br><u>Foothill Municipal Water District</u> | DISTRICT NUMBER (IF APPLICABLE)<br><u>5</u> |
|---|---|

**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 24, 2022  
DATE

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

Clear Form

Print Form