

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

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CAMPAIGN FINANCE
DISCLOSURE SECTION

Date of election if applicable: (Month, Day, Year) <u>November 08, 2022</u>	<input type="checkbox"/> Amendment (Explain Below) _____ _____
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1. Statement Covers Calendar Year 20 23 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Anagh Mamdapurkar

STREET ADDRESS

CITY STATE ZIP CODE
San Gabriel CA 91775

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
626.540.2290 anagh4sg@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
San Gabriel County Water District - Board of Director - Member

JURISDICTION (LOCATION) <u>County</u>	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
N/A	N/A	N/A
N/A	N/A	N/A

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 information provided is true and correct.

Executed on July 21, 2023 DATE By _____ CANDIDATE