

**Officeholder and Candidate
Campaign Statement
Form 470 Supplement**

SEE INSTRUCTIONS ON REVERSE

This form is written notification that the officeholder/candidate listed below has received contributions totaling \$2,000 or more or has made expenditures of \$2,000 or more during the calendar year.

Amendment (Explain Below)

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2022 OCT 13 PM 1:53
CAMPAIGN FINANCE
10/11/22 (3)

**CALIFORNIA
FORM 470
SUPPLEMENT**
For Official Use Only

1. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Nicole Wilson

STREET ADDRESS

CITY

STATE

ZIP CODE

818/309 8293

AREA CODE/DAYTIME PHONE NUMBER

vote.wilson.scv@gmail.com

OPTIONAL: FAX / E-MAIL ADDRESS

2. Office Sought

OFFICE SOUGHT

SCV Water Agency Board of Directors

DATE OF ELECTION (MONTH, DAY, YEAR)

11/08/2022

DISTRICT NUMBER
(IF APPLICABLE)

Division 1

3. Date Contributions Totaling \$2,000 or More Were Received or Date Expenditures of \$2,000 or More Were Made

10/11/2022

(MONTH, DAY, YEAR)