7/20/22 3

Ca	ficeholder and Candidate Impaign Statement – Iort Form	<u></u>			CALIFORNIA 470 REGET VED BY FORM FORM For Official Use Only 2022 JUL 25 PM 3: 34	
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)			
					_ CAMPAIGN FINANCE	
1.	Statement Covers Calendar Year 20 22					
2.	Officeholder or Candidate Information -		3.	Office Sought or He	eld	
	NAME OF OFFICEHOLDER OR CANDIDATE		_	OFFICE SOUGHT OR HELD		
	James Bodnar			Crescenta Valley Water District Board of Director		
	STREET ADDRESS			JURISDICTION (LOCATION)	DISTRICT NUMBER (IF APPLICABLE)	
	CITY	STATE ZIP CODE				
	La Crescent	CA 91214				
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS				
	818-288-1283	jamesbodnar@live.com			•	
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.					
	July 19, 2022	,		By		
	DATE	1		· · · · · · · · · · · · · · · · · · ·	SIGNATURE OF OFFICEHOLDER OR CANDIDATE	