

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

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

Amendment (Explain Below)

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1. Statement Covers Calendar Year ~~20~~ 21-22.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

Ann Ransford

STREET ADDRESS

CITY

818 549-9182  
AREA CODE/DAYTIME PHONE NUMBER

CA 91208  
STATE ZIP CODE

annransford@mac.com  
OPTIONAL FAX / E-MAIL ADDRESS

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

Trustee

JURISDICTION (LOCATION)

Glendale Community College Area 2  
Dist

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
<u>Re-elect Ann Ransford CCG Trustee</u> <u>Area 2 - 1309033</u>	<u>1846 Camino del Cielo</u> <u>Glendale, CA 91208</u>	<u>Argia Mahjoubi</u>

**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 \_\_\_\_\_

8/22/22  
DATE

Clear Form

Print Form