

Officeholder and Candidate  
Campaign Statement –  
Short Form

8721

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LOS ANGELES COUNTY  
① 8/11/21  
2021 AUG 13 PM 2:53  
CAMPAIGN FINANCE

CALIFORNIA FORM 470  
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020300

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

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 21 *mp*

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE  
Miles L. Prince

STREET ADDRESS

CITY STATE ZIP CODE  
Sierra Madre CA 91024

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
626-354-2312

3. Office Sought or Held

OFFICE SOUGHT OR HELD  
San Gabriel Valley Municipal Water District

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
County 4

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
NONE		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the \_\_\_\_\_ and that I have used \_\_\_\_\_

Executed on 08/11/2021 DATE By \_\_\_\_\_