

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

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

---

**Amendment** (Explain Below)

---



---

|                 |                                |
|-----------------|--------------------------------|
| Date Stamp      | <b>CALIFORNIA<br/>FORM 470</b> |
| <b>RECEIVED</b> | For Official Use Only          |
| JUL 13 2021     |                                |
| TOWN CLERK      |                                |

1. Statement Covers Calendar Year 20 21.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Larry Casack

STREET ADDRESS

CITY Apple Valley Ca STATE Ca ZIP CODE 92307

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

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
Town Council

JURISDICTION (LOCATION) Town of Apple Valley 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 |
|--------------------------------|-------------------|-------------------|
|                                |                   |                   |
|                                |                   |                   |

**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 7-13-21  
DATE

By [Signature]  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE