

Officeholder and Candidate
Campaign Statement –
Short Form

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|------------|--|----------------------------------|------------|
| Date Stamp | Received by Mail AUG 12 2022 City of Live Oak | CALIFORNIA FORM | 470 |
| | | For Official Use Only | |

| | |
|---|--|
| Date of election if applicable: (Month, Day, Year) <u>11/8/22</u> | <input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/> |
|---|--|

1. Statement Covers Calendar Year 20 22.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Aleks Tica

STREET ADDRESS
[REDACTED]

STATE CA ZIP CODE 95953

CITY Live Oak CA

AREA CODE/DAYTIME PHONE NUMBER [REDACTED] OPTIONAL FAX/EMAIL ADDRESS [REDACTED]

3. Office Sought or Held

OFFICE SOUGHT OR HELD
City Council

JURISDICTION (LOCATION)
Live Oak

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 8/10/2022
DATE

By [REDACTED]
SIGNATURE OF OFFICEHOLDER OR CANDIDATE