

Officeholder and Candidate  
Campaign Statement –  
Short Form

no postage

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

Amendment (Explain Below)

Date Stamp  
RECEIVED BY  
LOS ANGELES COUNTY  
2021 JUL 20 PM 2:04  
CAMPAIGN FINANCE

CALIFORNIA FORM 470  
For Official Use Only

1. Statement Covers Calendar Year 20 21.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE  
JAMES CODY BIRKEY

STREET ADDRESS

CITY STATE ZIP CODE  
NORWALK, CALIF. 90706

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
562-354-0978 jbirkey@cerritos.edu

3. Office Sought or Held

OFFICE SOUGHT OR HELD  
BOARD OF TRUSTEES

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
CERRITOS COMM. COLL. DISTRICT AREA #3

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>NONE</u>                    | <u>—</u>          | <u>—</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 all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State

lendar year and that I have used

Executed on July 18, 2021  
DATE

By \_\_\_\_\_