

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT**

Date Original Filing Received  
FEB 11 2021  
RY.

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Saccareccia Angela Louisa

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)  
Las Virgenes - Triunfo Joint Powers Authority  
Division, Board, Department, District, if applicable  
Your Position  
Finance Manager

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

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**2. Jurisdiction of Office (Check at least one box)**

State  
 Multi-County Los Angeles/Ventura  
 City of \_\_\_\_\_  
 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 County of \_\_\_\_\_  
 Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

Annual: The period covered is January 1, 2020, through December 31, 2020.  
-or-  
The period covered is \_\_\_\_\_ through December 31, 2020.  
 Assuming Office: Date assumed \_\_\_\_\_  
 Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_  
 Leaving Office: Date Left \_\_\_\_\_ (Check one circle.)  
 The period covered is January 1, 2020, through the date of leaving office.  
-or-  
 The period covered is \_\_\_\_\_ through the date of leaving office.

**4. Schedule Summary (must complete) ► Total number of pages including this cover page: 1**

**Schedules attached**

Schedule A-1 - Investments - schedule attached  
 Schedule A-2 - Investments - schedule attached  
 Schedule B - Real Property - schedule attached  
 Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule D - Income - Gifts - schedule attached  
 Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
4232 Las Virgenes Road Calabasas CA 91302  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 818 ) 251-2100

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/9/2021 Signature \_\_\_\_\_  
(month, day, year) (Print name)