CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)			
Coradeschi	Richard		Andrew			
1. Office, Agency,	or Court					
Agency Name (Do I	not use acronyms)					
• •	Municipal Water District					
Division, Board, Dep	artment, District, if applicable	Your Po	osition			
Board of Direct	ors	Direc	ctor	<u> </u>		
► If filing for multipl	e positions, list below or on an attachment	. (Do not use acronyms)				
		Docitic				
Agency:		Fosition				
2. Jurisdiction of	f Office (Check at least one box)					
State			e, Retired Judge, Pro Tem Judge wide Jurisdiction)	e, or Court Commissioner		
Multi-County		Coun	ty of Los Angeles			
• •	ment (Check at least one box)			,		
	period covered is January 1, 2021, through mber 31, 2021.	Lea	ving Office: Date Left/_ (Check one cit			
-0r-	period covered is/	through	The period covered is January 1	, 2021, through the date of		
	mber 31, 2021 .	-or-	eaving office.			
Assuming Offi	Assuming Office: Date assumed 12 / 2 / 2022					
	·					
Candidate: Da	ate of Election and	office sought, if different that	n Part 1:			
4. Schedule Sun	nmary (must complete) ► To:	tal number of pages in	ncluding this cover page	. 1		
Schedules at						
Schedule A	-1 - Investments - schedule attached	Schedule C	- Income, Loans, & Business P	ositions – schedule attached		
	-2 - Investments - schedule attached	<u> </u>	- Income - Gifts - schedule att			
	- Real Property - schedule attached	Schedule E	 Income – Gifts – Travel Paym 	ents - schedule attached		
	No reportable interests on any sch	edule				
5. Verification			OTATE	ZIP CODE		
MAILING ADDRESS (Business or Agency Add	STREET dress Recommended - Public Document)	CITY	STATE	ZIP GODE		
4232 Las Virg		Calabasas	CA	91302		
DAYTIME TELEPHONE		EMAIL ADDRES	8			
(818) 251-2		t I have reviewed this state	ment and to the best of my know	ledge the information contained		
herein and in any a	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 per	nalty of perjury under the laws of the St	ate of California that the fo	regoing is true and correct.			
	D 1 10 0000		V /			
Date Signed	December 12, 2022	Signature	(File the originally signed paper statement	ent with your filing official.)		
	(11010-110			

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION AMENDMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Indial Filing Received
DEC 2 0/2022
BY: #
(MIDDLE)

Please type or print in ink.

NAME OF FILER	(LAST)		(FIRST)	(MIDDLE)	
	Coradeschi	Richard		Andrew	
1. Office, Age	ency, or Court				
Agency Name	(Do not use acronyms)				
Las Virger	nes Municipal Water Distric	t			
Division, Board	d, Department, District, if applicable		Your Position		
2			Director		
► If filing for	multiple positions, list below or on	an attachment. (Do not use acron	yms)		
Agency:			Position:		
2. Jurisdiction	on of Office (Check at least of	one box)			
State	(0,000)		Judge, Retired Judge, Pro Ter (Statewide Jurisdiction)	n Judge, or Court Commissioner	
Multi-Coun	ity		County of Los Angeles		
	•		Other		
•	tatement (Check at least one	_	7		
	The period covered is January 1, 2 December 31, 2021.	.021, through	•	ck one circle.)	
	The period covered is		leaving office.	nuary 1, 2021, through the date of	
Assuming	g Office: Date assumed 12	02 , 2022	 or- The period covered is the date of leaving office. 	, through	
Candidat	e: Date of Election	and office sought, if differer	t than Part 1:		
4 Sabadula	Summary (must complete	(a) Total number of pe	ges including this cover	naga: 2	
	es attached	e) Frotal number of pa	iges including this cover	page.	
				D. W	
	dule A-1 - Investments - schedule		edule C - Income, Loans, & Bus edule D - Income — Gifts — sche	iness Positions – schedule attached	
<u> </u>	dule A-2 - Investments – schedule dule B - Real Property – schedule	attaonoa		el Payments – schedule attached	
-or-	ule b - Real Froperty - Scriedule	attached och	sadie E - moome – ome – mave	or raymonia donodalo dilacino	
	No reportable interests on a	nv schedule			
5. Verification		.,			
MAILING ADDRE		CITY	STATE	ZIP CODE	
	ncy Address Recommended - Public Docume	nt) Calabasas	CA	91302	
DAYTIME TELEP	Virgenes Road		ADDRESS	0.002	
	251-2100	E 140/11E	TIDEN CO		
I have used all	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 pocument.				
	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Date Signed	December 20,20	22— Signatur	\ \		
Date Signed	(month, day, year)	Olgilatui	(File the originally signed paper	er statement with your filing official.)	

SCHEDULE D Income - Gifts

NAME OF SOURCE (Not an Acronym)		► NAME OF SOURCE	E (Not an Acronym))
Best Best & Krieger, LLP				
ADDRESS (Business Address Acceptable	ADDRESS (Business Address Acceptable)			
2855 E. Guasti Rd. Ste. 400,	Ontario, CA 91761			
BUSINESS ACTIVITY, IF ANY, OF SOL	BUSINESS ACTIV	TY, IF ANY, OF SO	DURCE	
Attorneys at Law				
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11,30,22 ,103.09	Dinner			
11 30 J 22 \$ 100.03	Diffici		\$	
/ / ©		H , ,	s	
				*
\$		/	\$	·
► NAME OF SOURCE (Not an Acronym)		► NAME OF SOURCE	E (Not an Acronym))
Aleshire & Wynder				
ADDRESS (Business Address Acceptable	le)	ADDRESS (Busine	ss Address Acceptat	ble)
2659 Townsgate Rd., Westla	ike Village CA 91361			
BUSINESS ACTIVITY, IF ANY, OF SOL	URCE	BUSINESS ACTIV	TY, IF ANY, OF SO	DURCE
Attorneys at Law				
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11,29,22 \$ 336.64	Dinner		\$	
			œ	
			Ψ	
	·	/	\$	
NAME OF SOURCE (Not an Acronym)		Filer's Verific	ation	Construction of the Construction
		Print Name_Richa	ard Andrew Co	radeschi
ADDRESS (Business Address Acceptable	(e)	I I		
		or Court	is Virgenes Mu	inicipal Water District
BUSINESS ACTIVITY, IF ANY, OF SOU	URCE	Statement Type	2021/2022 Annı	ual Assuming Leaving
BATE (() () MALUE	DESCRIPTION OF CIET(S)	Ctatement Type	Annual	
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	L have used all rose		n preparing this statement. I have
	-	reviewed this statem	ent and to the best	t of my knowledge the information schedules is true and complete.
\$	·	11	nalty of perjury ι	under the laws of the State of
		Camornia that the		1
	1	Date Signed		mber 20,2022— th, day, year)
		 Filer's Signature _	4	
		الــــــــــــــــــــــــــــــــــــ		

Comments: _____



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date	nitial Filing Received ED
	FEB 0 7 2023
	(MIDDLE)

Please type or print in ink.

NAN	WE OF FILER (LAST)	(rikal)	Androw		
	Coradeschi	Richard	Andrew		
1.	Office, Agency, or Court				
	Agency Name (Do not use acronyms)				
	Las Virgenes Municipal Water District				
	Division, Board, Department, District, if applicable	Your Position			
	2	Director			
	\blacktriangleright If filing for multiple positions, list below or on an attachment.	(Do not use acronyms)			
	Agency:	Position:			
2.	Jurisdiction of Office (Check at least one box)				
	State	(Statewide			
	Multi-County	County of _	Los Angeles		
	City of				
-	Type of Statement (Check at least one box)				
J.	Annual: The period covered is January 1, 2021, through December 31, 2021.	Leaving C	Office: Date Left/(Check one circle.)		
	The period covered is/	_,oug	eriod covered is January 1, 2021, through the date of g office.		
	Assuming Office: Date assumed 12 , 02 , 202	The pe	eriod covered is/, through te of leaving office.		
	Candidate: Date of Election and office				
			P 4.1		
4.		al number of pages includ	ling this cover page:		
	Schedules attached				
	Schedule A-1 - Investments - schedule attached	_	ome, Loans, & Business Positions – schedule attached		
	Schedule A-2 - Investments – schedule attached		ome – Gifts – schedule attached		
١.	Schedule B • Real Property – schedule attached	Schedule E - Inco	ome - Gifts - Travel Payments - schedule attached		
- ا	Or-				
_	None - No reportable interests on any schedule	; 			
5.	Verification	OLTV	STATE ZIP CODE		
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY			
	4232 Las Virgenes Road	Calabasas	CA 91302		
	DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS			
	(818) 251-2100 I have used all reasonable diligence in preparing this statement.	I have reviewed this statement a	nd 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 perjuly under the laws of the State of California that the foregoing is true and correct.				
	2/7/23	Sim.4			
	Date Signed (month, day, year)	Signature	le the originally signed paper statement with your filing official.)		

SCHEDULE D Income - Gifts

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURC	E (Not an Acronym)		
Best Best & Krieger, LLP			275	
ADDRESS (Business Address Acceptable	ADDRESS (Business Address Acceptable)			
2855 E. Guasti Rd., Ste. 400,	Ontario, CA 91761			
BUSINESS ACTIVITY, IF ANY, OF SOU	BUSINESS ACTIVI	TY, IF ANY, OF SOL	JRCE	
Attorneys at Law				
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11,30,22 \$103.09	Dinner ACWA Conf		\$	
\$			\$	
\$			s	
► NAME OF SOURCE (Not an Acronym)		► NAME OF SOURC	E (Not an Acronym)	
Metropolitan Water District of	Southern California			
ADDRESS (Business Address Acceptable		ADDRESS (Busines	ss Address Acceptabl	le)
700 N. Alameda St., Los Ange	eles, CA 90012			
BUSINESS ACTIVITY, IF ANY, OF SOU		BUSINESS ACTIVI	TY, IF ANY, OF SOI	URCE
Water supplier to public water				
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10,14,22 \$267.85	SWP Inspection Trip		\$	<u>}</u>
10,15,22 \$267.85	SWP Inspection Trip		\$	
10,16,22 \$267.86	SWP Inspection Trip		\$	
► NAME OF SOURCE (Not an Acronym)		Filer's Verifica	ation	
p filme of observe procedures, my				radeschi
ADDRESS (Business Address Acceptable)	Print Name Richa	ird Andrew Cor	auesciii
	, 	Office, Agency La	s Virgenes Mu	nicipal Water District
BUSINESS ACTIVITY, IF ANY, OF SOU	RCE	Statement Type	2021/2022 Annu	al Assuming Leaving
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)		Annual	Candidate
\$		reviewed this statem	ent and to the best	preparing this statement. I have of my knowledge the information schedules is true and complete.
\$		I certify under per California that the	nalty of perjury u foregoing is true	nder the laws of the State of and correct.
\$		Date Signed	7 7 7	n, day, year)
		Filer's Signature _	N	

Comments: __