

Recipient Committee Campaign Statement – Short Form

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.

0218-2

SHORT FORM

Date Stamp
RECEIVED BY
LOS ANGELES COUNTY
2022 OCT 31 PH 2:44

CALIFORNIA FORM 450
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For Official Use Only
G10977

Statement covers period
from 9/28/22
through 10/27/22

Date of election if applicable:
(Month, Day, Year)
11/8/22

1. Type of Recipient Committee:

- Ballot Measure Committee
- Primarily Formed
- Controlled
- Sponsored
- Primarily Formed Candidate/ Officeholder Committee
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee

2. Type of Statement:

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain) _____
(Also check type of statement you are amending)
- Quarterly Statement
- Special Odd-year Report

3. Committee Information

I.D. NUMBER
1301562

COMMITTEE NAME

Beverly Hills Education Association PAC

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Beverly Hills	CA	90212	323-687-6470

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Marla Weiss

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Beverly Hills	CA	90212	323-687-6470

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement under penalty of perjury under the laws of the State of California that the for

information contained herein is true and complete. I certify

Executed on 10/27/22
DATE

By _____

TREASURER

Executed on 10/27/22
DATE

By _____

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____
DATE

By _____

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent

Executed on _____
DATE

By _____

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

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NAME OF COMMITTEE

Beverly Hills Education Association PAC

I.D. NUMBER

1301562

Expenditures Made

1. Expenditures of \$100 or more made this period	\$ <u>4413.08</u>
2. Expenditures under \$100 made this period (Not itemized.)	<u>0</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD	<u>\$ 4413.08</u>
4. Nonmonetary Adjustment	<u>0</u>
5. Total expenditures made from previous statement	<u>\$ 0</u>
(If this is the first statement for the calendar year, enter zero.)	
6. TOTAL EXPENDITURES MADE TO DATE	<u>\$ 4413.08</u>

Contributions Received

7. Monetary contributions received this period	\$ <u>0</u>
8. Non-monetary contributions received this period	<u>0</u>
9. Total contributions received from previous statement	<u>\$ 0</u>
(If this is the first statement for the calendar year, enter zero.)	
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE	<u>\$ 0</u>

Current Cash Statement

11. Beginning cash balance	\$ <u>35559</u>
12. Cash receipts this period	<u>0</u>
13. Miscellaneous increases to cash	<u>\$ 0</u>
14. Cash expenditures this period	<u>4413.08</u>
15. ENDING CASH BALANCE THIS PERIOD	<u>\$ 31145.92</u>

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SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

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I.D. NUMBER

1301562

5. Payments Made (If more space is needed, use additional copies of this page for continuation sheets.)

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
9/28/22	California Teachers Association (CTA) 1705 Murch:	Request for Voter Data	Rachelle Marcus School Board Bev	175.00	Calendar Year \$ <u>175.00</u> Other
			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		\$ _____
9/28/22	California Teachers Association (CTA) 1705 Murch:	Request for Voter Data	Farrah Dodes School Board Beverl	175.00	Calendar Year \$ <u>175.00</u> Other
			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		\$ _____
10/10/22	California Teachers Association (CTA) 1705 Murch:	Postcards /Labels	Rachelle Marcus School Board Bev	249.54	Calendar Year \$ <u>424.54</u> Other
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		\$ _____
SUBTOTAL				\$ 599.54	

* Required only for payments which are contributions or independent expenditures.

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10/10/22	California Teachers Association (CTA) 1705 Murch	Postcards/Labels	Farrah Dodes School Board Beverl <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	249.54	Calendar Year \$ <u>424.54</u> Other \$ _____
10/19/22	Alana Castenon 200 S. Elm Drive, Beverly Hills, CA	Reimbursement for Postage	Rachelle Marcus School Board Bev <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	1782.00	Calendar Year \$ <u>2206.54</u> Other \$ _____
10/19/22	Alana Castenon 200 S. Elm Drive, Beverly Hills, CA	Reimbursement for Postage	Farrah Dodes School Board Beverl <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	1782.00	Calendar Year \$ <u>2206.54</u> Other \$ _____
SUBTOTAL				\$ 3813.54	

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