Officeholder and Candidate Campaign Statement – Short Form		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	RECEIVED B CALIFORNIA FOR Official Use Only
/		(world, Day, Tear)		2023 AUG -7 PM 2: 37
1.	Statement Covers Calendar Year 20 2-3			DISCLOSURE SECTION
2.	Officeholder or Candidate Information		3. Office Sought or Held	
	STEUE BUFFIALO		OFFICE SOUGHT OR HELD AND SOUL VAI) JURISDICTION (LOCATION) LOS ANGERS	er annunt College Books Manber Worty DISTRICT NUMBER (IF APPLICABLE)
Materia	CITY QUAVTZ NUL AREA CODE/DAYTIME PHONE NUMBER 661-962-3563	STATE ZIP CODE STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS		
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, and the second se			
	COMMITTEE NAME AND I.D. NUMBER	of St. Heart	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	The Republic of the second of	By.	LDER OR CANDIDATE

The second secon

FPPC Form 470/470 Supplement (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov