

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.

2020-1 SHORT FORM

Statement covers period
 from 07-01-2020
 through 09--19-2020

Date of election if applicable:
 (Month, Day, Year)
11-03-2020

Date Stamp
 ① 9/2/23

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CAMPAIGN FINANCE DISCLOSURE SECTION

CALIFORNIA FORM 450

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For Official Use Only
 G10977

1. Type of Recipient Committee:

Ballot Measure Committee
 Primarily Formed
 Controlled
 Sponsored

General Purpose Committee
 Sponsored
 Small Contributor Committee

Primarily Formed Candidate/ Officeholder Committee

2. Type of Statement:

Pre-election Statement
 Semi-annual Statement
 Termination Statement

Quarterly Statement
 Special Odd-year Report

Amendment (Explain) Per request from LA County RRCC
 (Also check type of statement you are amending)

3. Committee Information

I.D. NUMBER
1301562

COMMITTEE NAME
Beverly Hills Education 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

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

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 it herein is true and complete. I certify

Executed on 8/28/23 By _____
 DATE

Executed on _____ By _____
 DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
 DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
 DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Recipient Committee
Campaign Statement
Summary Page**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SHORT FORM

Statement covers period from <u>07-01-2020</u> through <u>09-19-2020</u>	CALIFORNIA FORM 450
	Page <u>2</u> of <u>4</u>
NAME OF COMMITTEE	
Beverly Hills Education PAC	
IID NUMBER	
1301562	

Expenditures Made

1. Expenditures of \$100 or more made this period	\$	<u>2,336</u>
2. Expenditures under \$100 made this period (Not itemized.)		<u>212</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD		<u>2,548</u>
4. Nonmonetary Adjustment		<u>0</u>
5. Total expenditures made from previous statement		<u>50</u>
<i>(If this is the first statement for the calendar year, enter zero.)</i>		
6. TOTAL EXPENDITURES MADE TO DATE		<u>2,598</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>5,380</u>
<i>(If this is the first statement for the calendar year, enter zero.)</i>		
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE		<u>5,380</u>

Current Cash Statement

11. Beginning cash balance		<u>34,424</u>
12. Cash receipts this period		<u>0</u>
13. Miscellaneous increases to cash		<u>0</u>
14. Cash expenditures this period		<u>2,548</u>
15. ENDING CASH BALANCE THIS PERIOD		<u>31,876</u>

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NAME OF COMMITTEE

Beverly Hills Education PAC

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*
09/15/2020	California Teachers Association (CTA) Burlingame CA 94010 (FPPCID#: 741941)	Mailing Lists	Noah Margo School Board, Beverly Hills Unified <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input checked="" type="checkbox"/> Ind. Exp.	116	Calendar Year \$ <u>116</u> Other \$ _____
09/15/2020	California Teachers Association (CTA) Burlingame CA 94010 (FPPCID#: 741941)	Mailing Lists	Dr. Amanda Stern School Board, Beverly Hills Unified <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input checked="" type="checkbox"/> Ind. Exp.	117	Calendar Year \$ <u>117</u> Other \$ _____
09/15/2020	California Teachers Association (CTA) Burlingame CA 94010 (FPPCID#: 741941)	Mailing Lists	Mary Wells School Board, Beverly Hills Unified <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input checked="" type="checkbox"/> Ind. Exp.	117	Calendar Year \$ <u>117</u> Other \$ _____
SUBTOTAL \$ 350					

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

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FORM 450**

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09/15/2020	California Teachers Association (CTA) Burlingame CA 94010 (FPPCID#: 741941)	Postcards	Noah Margo School Board, Beverly Hills Unified <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input checked="" type="checkbox"/> Ind. Exp.	662	Calendar Year \$ <u>778</u> Other \$ _____
09/15/2020	California Teachers Association (CTA) Burlingame CA 94010 (FPPCID#: 741941)	Postcards	Dr. Amanda Stern School Board, Beverly Hills Unified <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input checked="" type="checkbox"/> Ind. Exp.	662	Calendar Year \$ <u>779</u> Other \$ _____
09/15/2020	California Teachers Association (CTA) Burlingame CA 94010 (FPPCID#: 741941)	Postcards	Mary Wells School Board, Beverly Hills Unified <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input checked="" type="checkbox"/> Ind. Exp.	662	Calendar Year \$ <u>779</u> Other \$ _____
SUBTOTAL				\$ 1986	

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