

Semi-Annual Statement of No Activity

Type or print in ink.

STATEMENT OF NO ACTIVITY

For use by recipient committees that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. **Candidate controlled committees formed for an elective office may not use this form.**

See the Information Manual on Campaign Disclosure Provisions of the Political Reform Act for additional information and information required to be provided to you pursuant to the Information Practices Act of 1977.

Date Stamp	CALIFORNIA FORM 425 For Official Use Only G10977
RECEIVED BY LOS ANGELES COUNTY ① 6/5/23 2023 JUN -7 PM 3:08 CAMPAIGN FINANCE DISCLOSURE SECTION	

1. Committee Information	I.D. NUMBER		
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			

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			

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

2. Period of No Activity

No contributions have been received and no expenditures have been made during the period covering the dates below:

Check one of the following boxes and complete the year. January 1, through June 30, 20²³ July 1, through December 31, 20____

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and certify that the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the information contained herein is true and complete.

mation contained herein

Executed on June 1, 2023
DATE

By _____
SIGNATURE OF TREASURER/ASSISTANT TREASURER