

**Officeholder and Candidate  
Campaign Statement –  
Short Form**

7/26/24(1)

Date of election if applicable:  
(Month, Day, Year)  
11/8/2022

**Amendment** (Explain Below)  
\_\_\_\_\_  
\_\_\_\_\_

Date Stamp  
**RECEIVED BY  
LOS ANGELES COUNTY  
2024 JUL 30 AM 11:59  
CAMPAIGN FINANCE**

**CALIFORNIA  
FORM 470**  
For Official Use Only

1. Statement Covers Calendar Year 20 24

2. **Officeholder or Candidate Information**  
NAME OF OFFICEHOLDER OR CANDIDATE  
JOHN EDWARD BELLAH  
STREET ADDRESS  
\_\_\_\_\_  
CITY  
Rowland Hts STATE CA ZIP CODE 91748  
AREA CODE/DAYTIME PHONE NUMBER (626) 965-4450 OPTIONAL: FAX / E-MAIL ADDRESS jbella@RWD.ORG

3. **Office Sought or Held**  
OFFICE SOUGHT OR HELD  
\_\_\_\_\_  
JURISDICTION (LOCATION)  
\_\_\_\_\_  
DISTRICT NUMBER (IF APPLICABLE)  
\_\_\_\_\_

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.

COMMITTEE NAME AND I.D. NUMBER	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 7/26/2024 DATE