Officeholder and Candidate Campaign Statement –					Pale Stamp RECEIVED BY CALIFORNIA 470		
Sh	ort Form	Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)		LOS ANGELES COUNTY For Official Use Only 2021 JUL 14 PM 3: 20		
					_ CAMPAIGN FINANCE		
1.	Statement Covers Calendar Year 20	21					
2.	Officeholder or Candidate Information			3. Office Sought or Held			
	NAME OF OFFICEHOLDER OR CANDIDATE			OFFICE SOUGHT OR HELD			
	JOHN E. BELLAH			DIRECTOR, DIVISION 3			
	STREET ADDRESS			JURISDICTION (LOCATION)	DISTRICT NUMBER (IF APPLICABLE)		
				ROWLAND WATER			
	СПҮ	STATE ZIP CODE					
	ROWLAND HEIGHTS	CA 91748					
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS					
	562-697-1726						
4.	Committee Information						
	List all committees of which you have knowledge that are primarily formed to receive						
	COMMITTEE NAME AND I.D. NUMB	ier en	COMMITTE	E 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 use all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the						
	JULY 1, 2021						
	Executed onDATE			By_		_	