

Officeholder and Candidate
Campaign Statement –
Short Form

5723

CALIFORNIA
FORM 470

For Official Use Only

020900

Date of election if applicable:
(Month, Day, Year)

☐ Amendment (Explain Below)

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LOS ANGELES COUNTY
8/14/23 (3)
2023 AUG 17 AM 11:40

CAMPAIGN FINANCE
DISCLOSURE SECTION

1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Amanda Stern

STREET ADDRESS

CITY

Bev Hills, CA 90212

STATE ZIP CODE

310 801 4678

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

B.H.U.S.D of Education

JURISDICTION (LOCATION)

Beverly Hills

DISTRICT NUMBER
(IF APPLICABLE)

Bev Hills, CA 90212

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

defunct
since I
won on
Dec 2020

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

8/1/2023

DATE

By

INDICATE