Officeholder and Candidate Campaign Statement – Short Form					Dete Startip CALIFORNIA 470		
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)		LOS ANGELES  2021 AUG -2 PM  CAMPAIGN FIR	COUNTY For Official Use Only  M 4: 24	
1.	Statement Covers Calendar Year 20 2						_
2.	Officeholder or Candidate Information  NAME OF OFFICEHOLDER OR CANDIDATE  Beth Braunstein  STREET ADDRESS  CITY  BYD Santa Clarita  AREA CODE/DAYTIME PHONE NUMBER  (310) 717 1963	CA 91387 STATE ZIP CODE  OPTIONAL: FAX/E-MAIL ADDRESS	3. 	OFFICE SOUGHT OR HELD	oard Director	DISTRICT NUMBER (IF APPLICABLE) 土 1	-
4.	Committee Information ist all committees of which you have knowledge that are primarily formed to receive the committee name and i.d. number			utions or to make exper	nditures on behalf of your	r candidacy.  NAME OF TREASURER	_
5.	Verification I declare under penalty of perjury that to the best all reasonable diligence in preparing this statement in the statement of the	of my knowledge I anticipate that I will into I certify under penalty of perjury und	receive less t der the laws o	han \$2,000 and that I will of the State of California to	spend less than \$2,000 dur hat the foregoing is true and SIGNATURE OF OFFICEHOLDER	d correct.	ed -