Officeholder and Candidate			RECEIVED BY CALIFORNIA 470
Campaign Statement - Short Form	Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	2023 JUL 10 PM 3: 26
			CAMPAIGN FINANCE
. Statement Covers Calendar Yea	ar 20 22-23		
NAME OF OFFICEHOLDER OR CANDIDATE AND RUNS FORD ADEA CONDENSAVINASE DUPME AN INSEED	OPTIONAL: FAX/E-MAI	JURISDICTION (LO	OCATION) DISTRICT NUMBER (IF APPLICABLE)
List all committees of which you have COMMITTEE NAME AND I.D. NUMBER		med to receive contributions or to	make expenditures on behalf of your candidacy. NAME OF TREASURER
Re-elect Ann Ransfor	1846 Enmindo del Et elo		Argin Mah Nodi
Aveal - 1309633			
	this statement. I certify under penal		d that I will spend less than \$2,000 during the calendar year and that I have a of California that the foregoing is true and correct.