Officeholder and Candidate Campaign Statement – Short Form				① 7J4 24,2024  Date Stamp	Date Stamp CALIFORNIA 470	
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	RECEIVED BY LUS ANGELES COUNTY 2024 JUL 30 AM II: 57 CAMPAIGN FINANCE	For Official Use Only	
1.	Statement Covers Calendar Year 20	24.				
2.	Officeholder or Candidate Information  NAME OF OFFICEHOLDER OR CANDIDATE  BACHELLE MARCUS  STREET ADDRESS  CITY  BEVERY HILS  CA 90210  AREA CODE/DAYTIME PHONE NUMBER  OPTIONAL: FAX/E-MAIL ADDRESS  3. Office Sought or Held  OFFICE SOUGHT OR HELD  DEVERY HILS Unifie  School  OPTIONAL: FAX/E-MAIL ADDRESS  3. Office Sought or Held  OFFICE SOUGHT OR HELD  DEVERY HILS  OPTIONAL: FAX/E-MAIL ADDRESS  OPTIONAL: FAX/E-MAIL ADDRESS				1 Trustee 1 School Boar 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. NUMB	ER	COMMITTEE ADDRESS		NAME OF TREASURER	
	NA	N/A		N	N/A	
5.	Verification I declare under penalty of perjury that to the be all reasonable diligence in preparing this staten  7/25/2  Executed on	st of my knowledge I anticipate that I will nent. I certify under penalty of perjury un	receive less than \$2,000 and that I will der the laws of the State of California	will spend less than \$2,000 during the can that the foregoing is true and correct.		