

Semi-Annual Statement of No Activity

Type or print in ink

STATEMENT OF NO ACTIVITY

For use by recipient committees that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. **Candidate controlled committees formed for an elective office may not use this form.**

See the Information Manual on Campaign Disclosure Provisions of the Political Reform Act for additional information and information required to be provided to you pursuant to the Information Practices Act of 1977.

BEV HILLS CITY CLERK
2023 FEB 28 PM 4:22

Date Stamp

CALIFORNIA FORM 425

For Official Use Only

INDEXED
3/14/2023
(Signature)

1. Committee Information

I.D. NUMBER

840 876

COMMITTEE NAME

BEVERLY HILLS FIREMEN
FOR BETTER GOVERNMENT

STREET ADDRESS (NO P.O. BOX)

445 N. REXFORD DR.

CITY STATE ZIP CODE AREA CODE/PHONE

BEVERLY HILLS CA 90210 (310) 281-2736

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

DEREK GUARO

MAILING ADDRESS

19584 SHOSHONEE RD.

CITY STATE ZIP CODE AREA CODE/PHONE

APPLE VALLEY CA 92307 (760) 403-2729

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

2. Period of No Activity

No contributions have been received and no expenditures have been made during the period covering the dates below:

Check one of the following boxes and complete the year. January 1, through June 30, 20 22 July 1, through December 31, 20 _____

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on FEB. 28, 2023
DATE

By *(Signature)*
SIGNATURE OF TREASURER/ASSISTANT TREASURER