Officeholder and Candidate Campaign Statement – Short Form				RECEIVED CALIFORNIA 470	
		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	AUG 0 8 2022 For Official Use Only	
		November 8,		CITY MGR. CLERK DEPT.	
1.	Statement Covers Calendar Year 20 22			CALIFO	
2.	Officeholder or Candidate Information  NAME OF OFFICEHOLDER OR CANDIDATE  MARINE RODINI STREET ADDRESS		3. Office Sought or H  OFFICE SOUGHT OR HELD  City C  JURISDICTION (LOCATION)		
4.	COmmittee Information List all committees of which you have knowledge	STATE ZIP CODE  A 95482  OPTIONAL FAX / E-MAIL ADDRESS	eive contributions or to make expend	ditures on behalf of your candidacy.	_
	COMMITTEE NAME AND I.D. NUMBER	_ ·		NAME OF TREASURER	
			n <2		
5.	Verification				
	I declare under penalty of perjury that to the best of mall reasonable diligence in preparing this statement. I	y knowledge I anticipate that I will of certify under penalty of perjury und	receive less than \$2,000 and that I will ster the laws of the State of California the	spend less than \$2,000 during the calendar year and that I have at the foregoing is true and correct.  SIGNATURE OF OFFICEHOLDER OR CANDIDATE	used