Officeholder and Candidate Campaign Statement – Short Form			1.	Date Stamp	CALIFORNIA 470
	O.C.I Olim	Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	JUL 15 2024  RISTY JAYNE EDWARDS  USA COUNTY CLERK-RECORDS	FORM For Official Use Only
1.	Statement Covers Calendar Year 20 24	• 4			
2.	Officeholder or Candidate Information  NAME OF OFFICEHOLDER OR CANDIDATE  Chales Grunn  STREET ADDRESS  CITY  ASSAULL  AREA CODE/DAYTIME PHONE NUMBER	STATE ZIP CODE  OPTIONAL: FAX/E-MAIL ADDRESS	3. Office Sought or Held  OFFICE SOUGHT OR HELD  Commission  JURISDICTION (LOCATION)  Ashadda 1		DISTRICT NUMBER (IF APPLICABLE)
4.	Committee Information  List all committees of which you have knowledge the COMMITTEE NAME AND I.D. NUMBER	nat are primarily formed to rece		ures on behalf of your candid	асу.
			COMMITTEE ADDRESS	NAME	OF TREASURER
5.	Verification				
	I declare under penalty of perjury that to the best of my all reasonable diligence in preparing this statement. I consider the statement of the best of my all reasonable diligence in preparing this statement.	knowledge I anticipate that I will r ertify under penalty of perjury und	eceive less than \$2,000 and that I will spe er the laws of the State of California that to	and less than \$2,000 during the the foregoing is true and correct	calendar year and that I have used

SIGNATURE OF OFFICEHOLDER OR CANDIDATE