

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received
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A PUBLIC DOCUMENT

Please type o	or print in ink.						
NAME OF FILER	(LAST)	(FIRST)		(MIDDLE)			
Bellah		John		E			
l. Office, /	Agency, or Court						
0 ,	ame (Do not use acronyms) d Water District						
Division, B	ivision, Board, Department, District, if applicable			Your Position			
Division	vision III			Board of Director			
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)							
Agency:	gency: Pomona-Walnut-Rowland Joint Water Line			Position: Alternate Commissioner			
2. Jurisdi	ction of Office (Check at lea	st one box)					
State	State			 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) 			
Multi-C	County		County of	Los Angeles			
City of			Other				
3. Type o	f Statement (Check at least of						
71	al: The period covered is January December 31, 2022.	•	Leaving C	Office: Date Left			
-0	The period covered is/_ December 31, 2022.	, through	☐ The pe leaving -or-		1, 2022, through the date of		
Assu	ming Office: Date assumed		☐ The pe	eriod covered is/_ te of leaving office.	, through		
Cand	idate: Date of Election	and office sough	nt, if different than Part	1:			
	ule Summary (required)	► Total numbe	r of pages includ	ling this cover pag	e: 1		
Sched	ules attached						
Sc	Schedule A-1 - Investments - schedule attached						
	Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts – schedule attached Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached						
Sc	chedule B - Real Property – schedu	ile attached	Scriedule E - IIIco	ine – Gills – Travel Fayl	ments – schedule attached		
-or- ■ Λ	lone - No reportable interes	ts on any schedule					
5. Verifica		,					
MAILING AD		CITY		STATE	ZIP CODE		
	r Agency Address Recommended - Public Do Fullerton Road	,	and Heights	CA	91748		
	ELEPHONE NUMBER		EMAIL ADDRESS				
(562) 383-2323		gsanchez@rw	d.org			
	ed all reasonable diligence in prepar d in any attached schedules is true				wledge the information contained		
I certify ι	under penalty of perjury under th	e laws of the State of Califo	ornia that the foregoin	ng is true and correct.			
Date Sign	ned 2/13/2023		Signature (1)	Im & 13.	ellel		
,	(month, day, year)			le the originally signed paper stater	ment with your filing official.)		



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NAME OF FILER (LAST)	(FIRST)	(MIDDLE)						
Bellah	John		E					
1. Office, Agency, or Court								
Agency Name (Do not use acronyms)				-				
Association of California Water	er Agency (ACWA)							
Division, Board, Department, District, if	applicable	Your Position	1					
		Director						
▶ If filing for multiple positions, list be	ing for multiple positions, list below or on an attachment. (Do not use acronyms)							
Agency:		Position:						
2. Jurisdiction of Office (Check	r at least one hov)							
				lan on Count Commissioner				
State	State		 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) 					
Multi-County	Multi-County			County of Los Angeles				
	_			Other				
City of		_ Unler						
3. Type of Statement (Check at	least one box)							
Annual: The period covered is January	anuary 1, 2022, through	Leaving C	Office: Date Left					
December 31, 2022.			(Check one					
	/, throug	h		1, 2022, through the date of				
Assuming Office: Date assumed	1	· · · · · · · · · · · · · · · · · · ·	eriod covered is/. te of leaving office.	, through				
Candidate: Date of Election	and office sou	ght, if different than Part	1:					
4. Schedule Summary (require	chedule Summary (required) ► Total number of pages including this cover page: 1							
Schedules attached								
Schedule A.1 - Investments -	- Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule attached							
	Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts – schedule attached							
	Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached							
-or- None - No reportable in	iterests on any schedule							
5. Verification								
MAILING ADDRESS STREET (Business or Agency Address Recommended - P	CITY		STATE	ZIP CODE				
3021 Fullerton Road	,	land Heights	CA	91748				
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		01110				
(562) 383-2323		gsanchez@rw	d.org					
I have used all reasonable diligence in herein and in any attached schedules		eviewed this statement a	nd to the best of my kno	wledge the information contained				
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.								
Date Signed 2/13/2023		Signature	ohn &					
(month, day, y	rear)		e the originally signed paper state	ment with your filing official.)				