



624 N. REXFORD DRIVE
BEVERLY HILLS, CA 90210
BHUSD.ORG
P. 310-551-5100

RECEIVED
By Anjanette at 2:59 pm, Apr 16, 2026

April 16, 2026

Los Angeles County Office of Education
Business Advisory Services
Attn: Ms. Victoria Bernstein
9300 Imperial Highway
Downey, CA 90242-2890

To Whom it May Concern,

Per LACOE Informational Bulletin #7112 and in anticipation of the Biennial Governing Board Member Elections on November 3, 2026, please find attached BHUSD Resolution #2025-2026-15 Ordering Governing Board Member Election, signed by Mrs. Rachelle Marcus, Board Clerk along with the updated Roster of Officeholders for Local Jurisdictions.

Should you need additional information or documentation, please do not hesitate to reach me at kaustin@bhusd.org, or via phone at 310-551-5100, ext 2210.

Thank you.

A handwritten signature in blue ink that reads 'Krissy Austin'.

Krissy Austin
Executive Assistant to the Superintendent

cc: Los Angeles County Registrar-Recorder/County Clerk

DISTRICT LEADERSHIP

JUDITH MANOUCHEHRI, ESQ. PRESIDENT · SIGALIE SABAG VICE-PRESIDENT
DR. AMANDA STERN BOARD MEMBER · RUSSELL STUART BOARD MEMBER · RACHELLE MARCUS BOARD MEMBER/CLERK
DR. ALEX CHERNISS SUPERINTENDENT OF SCHOOLS · DR. DUSTIN SEEMANN ASSISTANT SUPERINTENDENT



BEVERLY HILLS
UNIFIED SCHOOL DISTRICT
EDUCATIONAL EXCELLENCE

BEVERLY HILLS UNIFIED SCHOOL DISTRICT
RESOLUTION 2025-2026-15
RESOLUTION ORDERING GOVERNING BOARD MEMBER ELECTION

RESOLVED that pursuant to Education Code (EC) §5000-5030, the Los Angeles County Superintendent of Schools (County Superintendent) is hereby ORDERED to call an election for the purpose, and in accordance with the designations contained in the following specifications of the Election Order made under the authority of EC §5302, §5304, and §5322.

SPECIFICATIONS OF THE ELECTION ORDER

The election shall be held on Tuesday, November 3, 2026. The polling hours shall be from 7:00 a.m. to 8:00 p.m. on multiple days at the Voting Centers leading up to Election Day.

The purpose of the election is to submit to the voters of the district the question of whether two (2) members shall be elected to the Governing Board of the Beverly Hills Unified School District.

The Los Angeles County Registrar-Recorder/County Clerk (Registrar-Recorder) will perform all the duties incident to the preparation for and holding of the above-mentioned election. The Beverly Hills Unified School District will pay the costs of the election. If any agency holds an election on November 3, 2026, the Beverly Hills Unified School District shall pay its pro rata share pertaining to the conduct of this election shall be under the provisions of the appropriate sections of the Education and Election Codes.

IT IS FURTHER ORDERED that the Clerk of the district is hereby directed to furnish two copies of this order to the County Superintendent not less than 130 days prior to the date set for the election.

The foregoing Resolution and Order was adopted and affirmed by the Governing Board of the Beverly Hills Unified School District of Los Angeles County, being the Board authorized by law to make the designations contained therein, by formal vote as follows:

Ayes	<u>5</u>
Nays	<u>0</u>
Absent	<u>0</u>
Abstain	<u>0</u>

Signed: Rachelle Marcus
Clerk of the Governing Board



LOS ANGELES COUNTY REGISTRAR-RECORDER/COUNTY CLERK

ROSTER OF OFFICEHOLDERS FOR LOCAL JURISDICTIONS (For School and Special Districts)

DEAN C. LOGAN
Registrar-Recorder/County Clerk

DISTRICT NAME: Beverly Hills Unified School District	
DISTRICT TYPE (select one): <input checked="" type="checkbox"/> School District <input type="checkbox"/> Special District	
Please select one of the following: <input checked="" type="checkbox"/> SUPERINTENDENT <input type="checkbox"/> MANAGER <input type="checkbox"/> SECRETARY	
NAME: Dr. Alex Cherniss	TITLE: Superintendent
CONTACT PERSON (if different from above)	
NAME: Krissy Austin	TITLE: Exec. Asst. to the Superintendent
MAILING ADDRESS: 624 N. Rexford Drive, Beverly Hills, CA 90210 STREET CITY ZIP	
PHONE NUMBER (Public Use Only): 310-551-5100	FAX NUMBER: 310-276-5023
PHONE NUMBER (RR/CC Use Only):	BUSINESS HOURS: 7:30am - 4:00pm
PRIMARY EMAIL: kaustin@bhusd.org	SECONDARY EMAIL: acherniss@bhusd.org
AUTHORIZED REPRESENTATIVE	
NAME: Dr. Alex Cherniss	TITLE: Superintendent
SIGNATURE:	DATE: April 3, 2026
POLITICAL REFORM ACT	
Officeholders who receive a salary and/or compensation from the district (excluding contributions to insurance plans and other fringe benefits), averaging \$200 or more per month , are required to file semi-annual campaign statements. This applies whether or not they had any campaign activity. To assist this office in notifying your officeholders of their filing obligations, please indicate their monthly threshold by checking one of the appropriate boxes below.	
Monthly Threshold is:	<input type="checkbox"/> Less than \$ 200 <input checked="" type="checkbox"/> More than \$200
Please provide the following information for any officeholder whom, to your knowledge was and/or is a candidate for an election held between January 1 and June 30.	
NAME:	ELECTION DATE:
NAME:	ELECTION DATE:
Will your District hold an election this year? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes , return completed roster via email to: ECU@rrcc.lacounty.gov	If no , return completed roster via email to: CFD@rrcc.lacounty.gov
Fax Number: (562) 406-2149	Fax Number: (562) 651-2548
Mailing Address: Registrar-Recorder/County Clerk Attn: Election Coordination Unit 12400 Imperial Highway, Room 2013A Norwalk, CA	Mailing Address: Registrar-Recorder/County Clerk Attn: Campaign Finance Section 12400 Imperial Highway, Room 2003 Norwalk, CA

CANDIDATE STATEMENTS		
This is to inform you that the governing body of the above named district, by resolution dated <u>April 14, 2026</u> adopted the following policy regarding filing of Candidate Statements for district elections:		
NUMBER OF WORDS ALLOWED (please select one):	<input checked="" type="checkbox"/> 200 Word Limitation	<input type="checkbox"/> 400 Word Limitation
PAYMENT METHOD (please select one):		
<input checked="" type="checkbox"/> Payment must be made by candidate at the time of filing.	<input type="checkbox"/> District will bear costs for all statements.	<input type="checkbox"/> District will bill candidate after the election.
<input type="checkbox"/> Other: _____		
Copy of the resolution and/or board minutes is: <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Forthcoming		

OFFICEHOLDERS
List each current Officeholder. Officers should be listed by term date order; least to greatest. Note: You may not use the District address or phone number.
IMPORTANT DEFINITIONS
<ul style="list-style-type: none"> ➤ Appointed Provisionally: Refers to a qualified individual who was appointed in between regularly scheduled elections ➤ Appointed in Lieu: Refers to a candidate who was appointed following cancelation of an election due to insufficient candidates ➤ Date Term Expires: Refers to the date when an Officeholder's term ends ➤ Unexpired Term: Refers to a term that is still in progress and has not yet been completed

NAME: Manouchehri, Judith	Select one of the following: <input type="checkbox"/> Appointed Provisionally <input type="checkbox"/> Appointed in Lieu <input checked="" type="checkbox"/> Elected			
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">LAST</td> <td style="width: 33%; text-align: center;">FIRST</td> <td style="width: 33%; text-align: center;">MIDDLE INITIAL</td> </tr> </table>		LAST	FIRST	MIDDLE INITIAL
LAST	FIRST	MIDDLE INITIAL		
PO BOX OR RESIDENTIAL ADDRESS: 521 Arden Drive, Beverly Hills, CA 90210				
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">STREET</td> <td style="width: 33%; text-align: center;">CITY</td> <td style="width: 33%; text-align: center;">ZIP</td> </tr> </table>	STREET	CITY	ZIP	
STREET	CITY	ZIP		
PHONE NUMBER: 310-490-4195 EMAIL: jmanouchehri2@bhusd.org				
Name of preceding officeholder:	Date Appointed/Elected: 12/2022			
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">LAST</td> <td style="width: 33%; text-align: center;">FIRST</td> <td style="width: 33%; text-align: center;">MIDDLE INITIAL</td> </tr> </table>	LAST	FIRST	MIDDLE INITIAL	
LAST	FIRST	MIDDLE INITIAL		
DIVISION/DISTRICT TRUSTEE AREA NUMBER: (If applicable)	Date Term Expires: 12/2026 <input type="checkbox"/> Unexpired Term			

NAME: Marcus, Rachelle	Select one of the following: <input type="checkbox"/> Appointed Provisionally <input type="checkbox"/> Appointed in Lieu <input checked="" type="checkbox"/> Elected			
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">LAST</td> <td style="width: 33%; text-align: center;">FIRST</td> <td style="width: 33%; text-align: center;">MIDDLE INITIAL</td> </tr> </table>		LAST	FIRST	MIDDLE INITIAL
LAST	FIRST	MIDDLE INITIAL		
PO BOX OR RESIDENTIAL ADDRESS: 707 N. Elm Drive, Beverly Hills, CA 90210				
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">STREET</td> <td style="width: 33%; text-align: center;">CITY</td> <td style="width: 33%; text-align: center;">ZIP</td> </tr> </table>	STREET	CITY	ZIP	
STREET	CITY	ZIP		
PHONE NUMBER: 310-550-5884 EMAIL: rmarcus@bhusd.org				
Name of preceding officeholder:	Date Appointed/Elected: 12/2022			
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">LAST</td> <td style="width: 33%; text-align: center;">FIRST</td> <td style="width: 33%; text-align: center;">MIDDLE INITIAL</td> </tr> </table>	LAST	FIRST	MIDDLE INITIAL	
LAST	FIRST	MIDDLE INITIAL		
DIVISION/DISTRICT TRUSTEE AREA NUMBER: (If applicable)	Date Term Expires: 12/2026 <input type="checkbox"/> Unexpired Term			

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NAME: Sabag, Sigalie			Select one of the following: <input type="checkbox"/> Appointed Provisionally <input type="checkbox"/> Appointed in Lieu <input checked="" type="checkbox"/> Elected
LAST	FIRST	MIDDLE INITIAL	
PO BOX OR RESIDENTIAL ADDRESS: 329 South Rexford Drive #2, Beverly Hills, CA 90212			
STREET	CITY	ZIP	
PHONE NUMBER: 323-829-0505	EMAIL: ssabag@bhusd.org		
Name of preceding officeholder: Margo, Noah			Date Appointed/Elected: 12/2024
LAST	FIRST	MIDDLE INITIAL	
DIVISION/DISTRICT TRUSTEE AREA NUMBER: (If applicable)			Date Term Expires: 12/2028 <input type="checkbox"/> Unexpired Term
NAME: Stuart, Russell			<input type="checkbox"/> Appointed Provisionally <input type="checkbox"/> Appointed in Lieu <input checked="" type="checkbox"/> Elected
LAST	FIRST	MIDDLE INITIAL	
PO BOX OR RESIDENTIAL ADDRESS: 258 South Bedford Drive, Beverly Hills, CA 90212			
STREET	CITY	ZIP	
PHONE NUMBER: 310-880-5298	EMAIL: rstuart@bhusd.org		
Name of preceding officeholder: Vacated position previously held by Mary Wells			Date Appointed/Elected: 12/2024
LAST	FIRST	MIDDLE INITIAL	
DIVISION/DISTRICT TRUSTEE AREA NUMBER: (If applicable)			Date Term Expires: 12/2028 <input type="checkbox"/> Unexpired Term
NAME: Stern, Amanda			<input type="checkbox"/> Appointed Provisionally <input type="checkbox"/> Appointed in Lieu <input checked="" type="checkbox"/> Elected
LAST	FIRST	MIDDLE INITIAL	
PO BOX OR RESIDENTIAL ADDRESS: 417 South Rodeo Drive, Beverly Hills, CA 90212			
STREET	CITY	ZIP	
PHONE NUMBER: 310-801-4678	EMAIL: astern@bhusd.org		
Name of preceding officeholder:			Date Appointed/Elected: 12/2024
LAST	FIRST	MIDDLE INITIAL	
DIVISION/DISTRICT TRUSTEE AREA NUMBER: (If applicable)			Date Term Expires: 12/2028 <input type="checkbox"/> Unexpired Term

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NAME: <hr/> LAST FIRST MIDDLE INITIAL <hr/> PO BOX OR RESIDENTIAL ADDRESS: <hr/> STREET CITY ZIP <hr/> PHONE NUMBER: EMAIL: <hr/> Name of preceding officeholder: <hr/> LAST FIRST MIDDLE INITIAL <hr/> DIVISION/DISTRICT TRUSTEE AREA NUMBER: (If applicable)	Select one of the following: <input type="checkbox"/> Appointed Provisionally <input type="checkbox"/> Appointed in Lieu <input type="checkbox"/> Elected <hr/> Date Appointed/Elected: <input style="width: 100%;" type="text"/> <hr/> Date Term Expires: <input style="width: 100%;" type="text"/> <input type="checkbox"/> Unexpired Term
NAME: <hr/> LAST FIRST MIDDLE INITIAL <hr/> PO BOX OR RESIDENTIAL ADDRESS: <hr/> STREET CITY ZIP <hr/> PHONE NUMBER: EMAIL: <hr/> Name of preceding officeholder: <hr/> LAST FIRST MIDDLE INITIAL <hr/> DIVISION/DISTRICT TRUSTEE AREA NUMBER: (If applicable)	<input type="checkbox"/> Appointed Provisionally <input type="checkbox"/> Appointed in Lieu <input type="checkbox"/> Elected <hr/> Date Appointed/Elected: <input style="width: 100%;" type="text"/> <hr/> Date Term Expires: <input style="width: 100%;" type="text"/> <input type="checkbox"/> Unexpired Term
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