

**Recipient Committee  
Campaign Statement  
Cover Page**

Date Stamp  
**RECEIVED BY  
LOS ANGELES COUNTY  
2022 JUN -1 PM 3:27  
CAMPAIGN FINANCE**

Statement covers period  
from 4/24/22  
through 5/21/22

Date of election if applicable:  
(Month, Day, Year)  
June 7, 2022

Page \_\_\_\_\_ of \_\_\_\_\_  
For Official Use Only

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.**

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall  
(Also Complete Part 5)
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored  
(Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee  
(Also Complete Part 7)

**2. Type of Statement:**

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report

**3. Committee Information**

I.D. NUMBER  
0000980491

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Teachers Association of Paramount Fund for Quality of Schools

STREET ADDRESS (NO P.O. BOX)  
\_\_\_\_\_  
CITY STATE ZIP CODE AREA CODE/PHONE  
Cerritos CA 90703 562-263-4905

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
\_\_\_\_\_  
CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Michele Lewis  
MAILING ADDRESS  
\_\_\_\_\_  
CITY STATE ZIP CODE AREA CODE/PHONE  
Cerritos CA 90703 562-263-4905

NAME OF ASSISTANT TREASURER, IF ANY  
\_\_\_\_\_  
MAILING ADDRESS  
\_\_\_\_\_  
CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

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

Executed on 5/25/2022  
Date  
Executed on \_\_\_\_\_  
Date  
Executed on \_\_\_\_\_  
Date  
Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor  
By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent  
By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|  |                                |
|--|--------------------------------|
| Statement covers period<br>from <u>4/24/22</u> | <b>CALIFORNIA<br/>FORM 460</b> |
| through <u>5/21/22</u>                         |                                |
| Page _____ of _____                            |                                |
| I.D. NUMBER<br>0000980491                      |                                |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Teachers Association of Paramount Fund for Quality of Schools

## Contributions Received

|  | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 1. Monetary Contributions..... Schedule A, Line 3    | \$ <u>0</u>  | \$ _____                                   |
| 2. Loans Received..... Schedule B, Line 3            | <u>0</u>   | _____                                      |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2  | \$ <u>0</u>  | \$ _____                                   |
| 4. Nonmonetary Contributions..... Schedule C, Line 3 | <u>0</u>   | _____                                      |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4 | \$ <u>0</u>  | \$ _____                                   |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            | 1/1 through 6/30 | 7/1 to Date |
|----------------------------|------------------|-------------|
| 20. Contributions Received | \$ _____         | \$ _____    |
| 21. Expenditures Made      | \$ _____         | \$ _____    |

## Expenditures Made

|  | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 6. Payments Made..... Schedule E, Line 4                   | \$ <u>207.07</u>   | \$ _____                                   |
| 7. Loans Made..... Schedule H, Line 3                      | <u>0</u>   | _____                                      |
| 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7             | \$ <u>207.07</u>   | \$ _____                                   |
| 9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3 | <u>0</u>   | _____                                      |
| 10. Nonmonetary Adjustment..... Schedule C, Line 3         | <u>0</u>   | _____                                      |
| 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10      | \$ <u>207.07</u>   | \$ _____                                   |

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

## Current Cash Statement

|  |                    |
|--|--------------------|
| 12. Beginning Cash Balance..... Previous Summary Page, Line 16             | \$ <u>3,519.35</u> |
| 13. Cash Receipts..... Column A, Line 3 above                              | <u>0</u>           |
| 14. Miscellaneous Increases to Cash..... Schedule I, Line 4                | <u>0</u>           |
| 15. Cash Payments..... Column A, Line 8 above                              | <u>207.07</u>      |
| 16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ <u>3,312.28</u> |

If this is a termination statement, Line 16 must be zero.

|  |             |
|--|-------------|
| 17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 | \$ <u>0</u> |
|--|-------------|

## Cash Equivalents and Outstanding Debts

|  |             |
|--|-------------|
| 18. Cash Equivalents..... See instructions on reverse            | \$ <u>0</u> |
| 19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above | \$ <u>0</u> |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Amounts may be rounded  
to whole dollars.

SCHEDULE D

|  |                                  |
|--|----------------------------------|
| Statement covers period<br>from <u>4/24/22</u><br>through <u>5/21/22</u> | <b>CALIFORNIA FORM 460</b>       |
| Page _____ of _____  | I.D. NUMBER<br><b>0000980491</b> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Teachers Association of Paramount Fund for Quality of Schools

| DATE                      | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE   | TYPE OF PAYMENT  | DESCRIPTION (IF REQUIRED)  | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------|---|--|--|--------------------|---|------------------------------------|
| 3/21/22                   | CruzPUSD2022<br>[REDACTED]<br>Paramount, CA90723<br>#1445760<br><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution<br><input checked="" type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure | Check to Maria Parkin reimbursemnt for refreshments for canvassing | 76.10              |   | 76.10                              |
| 3/24/2022                 | CruzPUSD2022<br>[REDACTED]<br>Paramount, CA90723<br>#1445760<br><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution<br><input checked="" type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure | Check to April O'Connor reimbursement for canvassing               | 123.97             |   | 123.97                             |
|                           | <input type="checkbox"/> Support <input type="checkbox"/> Oppose  | <input type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure            |  |                    |   |                                    |
| <b>SUBTOTAL \$ 200.07</b> |   |  |  |                    |   |                                    |

**Schedule D Summary**

|  |                           |
|--|---------------------------|
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....                  | \$ 200.07                 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100.....                                      | \$ 0                      |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... | <b>TOTAL .. \$ 200.07</b> |

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

|  |                            |
|--|----------------------------|
| Statement covers period<br>from <u>4/24/22</u><br>through <u>5/21/22</u> | <b>CALIFORNIA FORM 460</b> |
|  | Page _____ of _____        |
|  | I.D. NUMBER<br>0000980491  |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Teachers Association of Parmaount Fund for Quality Schools

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT                              | AMOUNT PAID |
|---|---------|---|-------------|
| April O'Connor<br>[redacted]<br>long beach ca 90803                 | MTG     | reimbursement for Refreshments for canvassing event | 123.97      |
| Maria Parkin<br>[redacted]<br>Long Beach CA 90815                   | MTG     | reimbursement for Refreshments for canvassing event | 76.10       |
|   |         |   |             |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$**

**Schedule E Summary**

|  |                        |
|--|------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$ 200.07              |
| 2. Unitemized payments made this period of under \$100   | \$ 0                   |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)                   | \$ 0                   |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | <b>TOTAL \$ 200.07</b> |