

Recipient Committee Campaign Statement - Short Form

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.

01/16/2024

Date Stamp

SHORT FORM

CALIFORNIA FORM 450

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For Official Use Only

607740

Statement covers period
from 7/1/23
through 12/31/23

Date of election if applicable:
(Month, Day, Year) 2024

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LOS ANGELES COUNTY
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CAMPAIGN FINANCE

1. Type of Recipient Committee:

- Ballot Measure Committee
- Primarily Formed
- Controlled
- Sponsored
- Primarily Formed Candidate/ Officeholder Committee
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee

2. Type of Statement:

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain) _____
(Also check type of statement you are amending)
- Quarterly Statement
- Special Odd-year Report

3. Committee Information

I.D. NUMBER
1243795

COMMITTEE NAME
El Monte Union Educators Association PAC

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Irwindale CA 91706 (626)337-7814

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
emuea1pac@gmail.com

Treasurer(s)

NAME OF TREASURER
Donald Quick

MAILING ADDRESS
CITY STATE ZIP CODE AREA CODE/PHONE
W. Covina CA 91790 (626)242-3133

NAME OF ASSISTANT TREASURER, IF ANY
Harmony Valuet

MAILING ADDRESS
CITY STATE ZIP CODE AREA CODE/PHONE
Whittier CA 90601 (562)298-2337

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to under penalty of perjury under the laws of the State of California that the foregoing is

contained herein is true and complete. I certify

Executed on 1-14-24
DATE

By _____

ANT TREASURER

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SHORT FORM

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from 7/1/23
through 12/31/23

CALIFORNIA
FORM **450**

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NAME OF COMMITTEE

El Monte Union Educators Association PAC

I.D. NUMBER

1243795

Expenditures Made

1. Expenditures of \$100 or more made this period.....		\$ <u>0</u>
2. Expenditures under \$100 made this period (Not itemized.).....		<u>50</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD.....	Add Lines 1 + 2	\$ <u>50</u>
4. Nonmonetary Adjustment.....	From Line 8 Below	<u>0</u>
5. Total expenditures made from previous statement..... (If this is the first statement for the calendar year, enter zero.)	Previous Summary Page, Line 6	\$ <u>0</u>
6. TOTAL EXPENDITURES MADE TO DATE.....	Add Lines 3 + 4 + 5	\$ <u>50</u>

Contributions Received

7. Monetary contributions received this period.....		\$ <u>4,725.21</u>
8. Non-monetary contributions received this period.....		<u>0</u>
9. Total contributions received from previous statement..... (If this is the first statement for the calendar year, enter zero.)	Previous Summary Page, Line 10	\$ <u>0</u>
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE.....	Add Lines 7 + 8 + 9	\$ <u>4,725.21</u>

Current Cash Statement

11. Beginning cash balance.....	Previous Summary Page, Line 15	\$ <u>4,528.27</u>
12. Cash receipts this period.....	Line 7 above	<u>4,725.21</u>
13. Miscellaneous increases to cash.....		\$ <u>0</u>
14. Cash expenditures this period.....	Line 3 above	<u>50</u>
15. ENDING CASH BALANCE THIS PERIOD.....	Add Lines 11 + 12 + 13, then subtract Line 14	\$ <u>9,203.48</u>