

0119-3

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.

Statement covers period
 from 2/14/2021
 through 6/30/2021

Date of election if applicable:
 (Month, Day, Year)
3/2/2021

Date Stamp
RECEIVED BY
LOS ANGELES COUNTY
 ③ 7/16/21
2021 JUL 19 PM 3:50
CAMPAIGN FINANCE

CALIFORNIA FORM 450
 Page 1 of 2
 For Official Use Only
602480

1. Type of Recipient Committee:

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

2. Type of Statement:

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

3. Committee Information

I.D. NUMBER
831541

COMMITTEE NAME

South Bay United Teachers Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90503	310-921-2500

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

310-921-2502/sgoins@cta.org

Treasurer(s)

NAME OF TREASURER

Samantha Weiss

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Pedro	CA	90732	(310) 435-6292

NAME OF ASSISTANT TREASURER, IF ANY

Sarah Robinson

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90505	(805) 431-8383

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

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

the information contained herein is true and complete. I certify

Executed on 7/15/21
DATE

By _____
SIGNATURE OF TREASURER OR ASSISTANT 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

SS

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SHORT FORM

Statement covers period		CALIFORNIA FORM 450
from	2/14/2021	
through	6/30/2021	Page <u>2</u> of <u>2</u>

NAME OF COMMITTEE	I.D. NUMBER
South Bay United Teachers Political Action Committee	831541

Expenditures Made

1. Expenditures of \$100 or more made this period	\$	0.00
2. Expenditures under \$100 made this period (Not itemized.)		0.00
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD..... <i>Add Lines 1 + 2</i>	\$	0.00
4. Nonmonetary Adjustment..... <i>From Line 8 Below</i>		0.00
5. Total expenditures made from previous statement <i>Previous Summary Page, Line 6</i> <i>(If this is the first statement for the calendar year, enter zero.)</i>	\$	4,650.00
6. TOTAL EXPENDITURES MADE TO DATE <i>Add Lines 3 + 4 + 5</i>	\$	4,650.00

Contributions Received

7. Monetary contributions received this period.....	\$	10,387.11
8. Non-monetary contributions received this period.....		0.00
9. Total contributions received from previous statement <i>Previous Summary Page, Line 10</i> <i>(If this is the first statement for the calendar year, enter zero.)</i>	\$	2,074.47
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE <i>Add Lines 7 + 8 + 9</i>	\$	12,461.58

Current Cash Statement

11. Beginning cash balance <i>Previous Summary Page, Line 15</i>	\$	283,668.91
12. Cash receipts this period..... <i>Line 7 above</i>		10,387.11
13. Miscellaneous increases to cash	\$	0.00
14. Cash expenditures this period..... <i>Line 3 above</i>		0.00
15. ENDING CASH BALANCE THIS PERIOD <i>Add Lines 11 + 12 + 13, then subtract Line 14</i>	\$	294,056.02