		1/25/22 MY SHURLI FURM			
Recipient Committee Campaign Statement – Short Form			Date Stamp	_ €AI	IFORNIA 450
SEE INSTRUCTIONS ON REVERSE For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not	Statement covers period from 1/1/2022	Date of election if applicable: (Month, Day, Year)	REGE LOS ANGE	VED B Year LES COUN	For Official Use Only
received or made loans, and have no outstanding accrued expenses.	through6/30/2022		2022 JUL 2	5 PM 3:3	3
1. Type of Recipient Committee:	*,	2. Type of Stateme	nt: CAMPAIG	H FINANC	E
O Primarily Formed S S	ral Purpose Committee consored mall Contributor Committee	☐ Pre-election Stater ☐ Semi-annual State ☐ Termination Staten ☐ Amendment (Expla (Also check type of state	ment [nent nin)	Quarterly S	Statement Id-year Report
3. Committee Information	i.D. NUMBER 1299569	Treasurer(s)		.*	THE RESIDENCE OF THE PROPERTY
COMMITTEE NAME		NAME OF TREASURER			
Palmdale Teachers Education PAC		Stephanie Baker			
		MAILING ADDRESS			1.00.00
STREET ADDRESS (NO P.O. BOX)		CITY Palmdale	STATE CA	ZIP CODE 93551	AREA CODE/PHONE 661-478-3166
CITY STATE ZIP CO		NAME OF ASSISTANT TREASUR	RER, IF ANY		
Palmdale CA 9355					
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	ox ·	MAILING ADDRESS		-	
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Palmdale CA 9355	51				
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	ESS		
4. Verification I have used all reasonable diligence in preparing and under penalty of perjury under the laws of the State of Executed on 7/22/2022				ein is true and	complete. I certify
DATE	: '	SIGNATURE OF TREASURER OR ASS	BISTANT TREASURER		
Executed on	SIGNATURE OF CONTROLLING	G OFFICEHOLDER, CANDIDATE, STATE MEASU	RE PROPONENT, OR RESP	ONSIBLE OFFICER	OF SPONSOR
Executed on	BySIGNATU	URE OF CONTROLLING OFFICEHOLDER, CAND	DIDATE, STATE MEASURE P	ROPONENT	
Executed on	Ву	URE OF CONTROLLING OFFICEHOLDER, CANU			
DATE	SIGNATU	ONE OF CONTROLLING OFFICEHOLDER, CAME	WEASURE P	AOPONEN I	

C	ecipient Committee ampaign Statement ummary Page	: :	Amounts may be rounded to whole dollars.	Statement covers period from1/1/2022 through6/30/2022	CAEIFOF		
N	AME OF COMMITTEE			,	I.D. NUMBE		
P	almdale Teachers Education PAC	•			1299569		
E	xpenditures Made	Andrew State Control of the Control	Annual Control of the Control of				
1	Expenditures of \$100 or more made this period	od			\$		
2	Expenditures under \$100 made this period (N	•					
3	3. SUBTOTAL EXPENDITURES MADE THIS PERIOD						
4	4. Nonmonetary Adjustment						
5	5. Total expenditures made from previous statement						
6	TOTAL EXPENDITURES MADE TO DATE			Add Lines 3 + 4 + 5	\$		
	ontributions Received				approvince to public term of the second terms of the		
7	Monetary contributions received this period				\$		
8	. Non-monetary contributions received this per	iod					
9	. Total contributions received from previous sta (If this is the first statement for the calendar y	tement ear; enter zero.)	F	Previous Summary Page, Line 10	\$		
1	0. TOTAL CONTRIBUTIONS RECEIVED TO DATE .			Add Lines 7 + 8 + 9	\$		

11. Beginning cash balance Previous Summary Page, Line 15 \$
12. Cash receipts this period Line 7 above

13. Miscellaneous increases to cash

Current Cash Statement

SHORT FORM

12.35 12.35

12.35

19,000

19,000

57582.46

19,000

12.35

76570.11