Semi-Annual Statement of No Activity	ν,	pe or print in ink.	Date Stamp	S729 STATEMENT OF NO ACTIVITY CALIFORNIA 125
For use by recipient committees that have not received and during the six-month period covered by a semi-annual state elective office may not use this form. See the Information Manual on Campaign Disclosure Proyent information required to be provided to you pursuant to	tement. Candidate controlled committe	onal information 2024 AU	GEIVED BY GEIVED BY GELES COUNTY G-2 PH 3: 03 GN FINANCE	FORM For Official Use Only GO77 40
1. Committee Information	1243795	Freasurer(s)		
El Monte Union Educators	Association PAC	Donald Q	uick	
STREET ANDRESS (NO PO ROX)	<u> </u>	W. Covina	le .	790 (626) 242-3133
Irwindale CA 9	1706 (621)337-7814	Harmony Valu Mailing address	<u></u>	
CITY STATE ZIP CO	DDE AREA CODE/PHONE	Whither	,	CODE AREA CODE/PHONE
optional: FAX/E-MAILADDRESS emuea 1 pac@gmail.co		PPTIONAL: FAX / E-MAIL ADDR	RESS	
2. Period of No Activity No contributions have been received and no exp Check one of the following boxes and comple	enditures have been made during the		· —	h December 31, 20
3. Verification				
I have used all reasonable diligence in preparing is true and complete. I certify under penalty of p			le .	ormation contained herein
Executed on 7/31/24	Ву _			RER

FPPC Form 425 (Jan/01) FPPC Toll-Free Helpline: 866/ASK-FPPC 866/275-3772