

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.

Date Stamp
 9/26/24
 REC'D BY
 LOS ANGELES COUNTY
 2024 SEP 30 PH 2:07
 CAMPAIGN FINANCE

CALIFORNIA FORM **450**
 Page 6 of 6
 For Official Use Only

Statement covers period
 from July 1, 2024
 through September 21, 2024

Date of election if applicable:
 (Month, Day, Year)
November 5, 2024

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
931834

COMMITTEE NAME

Covina Unified Education Association - Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Dimas</u>	<u>CA</u>	<u>91773</u>	<u>909-592-5806</u>

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

Treasurer(s)

NAME OF TREASURER

Calie Smejkal

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Pasadena</u>	<u>CA</u>	<u>91107</u>	<u>209-450-5184</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

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

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement under penalty of perjury under the laws of the State of California that the facts stated herein are true and complete. I certify

ained herein is true and complete. I certify

Executed on 9/23/2024
DATE

By _____

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

Statement covers period		CALIFORNIA FORM	450
from	July 1, 2024		
through	Sept 21, 2024	Page <u>2</u>	of <u>6</u>
NAME OF COMMITTEE		I.D. NUMBER	
Covina Unified Education Association - Political Action Committee		931834	

Expenditures Made

1. Expenditures of \$100 or more made this period	\$	5611.76
2. Expenditures under \$100 made this period (Not itemized.)		0.00
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD		5611.76
4. Nonmonetary Adjustment		0.00
5. Total expenditures made from previous statement		819.50
(If this is the first statement for the calendar year, enter zero.)		
6. TOTAL EXPENDITURES MADE TO DATE	\$	6431.26

Contributions Received

7. Monetary contributions received this period	\$	793.50
8. Non-monetary contributions received this period		0.00
9. Total contributions received from previous statement		3150.00
(If this is the first statement for the calendar year, enter zero.)		
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE	\$	3943.50

Current Cash Statement

11. Beginning cash balance	\$	10621.00
12. Cash receipts this period		793.50
13. Miscellaneous increases to cash	\$	0.00
14. Cash expenditures this period		5611.76
15. ENDING CASH BALANCE THIS PERIOD	\$	5802.74

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SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

Covina Unified Education Association - Political Action Committee

5. Payments Made (If more space is needed, use additional copies of this page for continuation sheets.)

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
8/27/2024	California Teachers Association Burlingame, CA 94010	Non Monetary - Voter Data	Steve Bennett Covina-Valley Unified School District, Governing Board Member Trustee Area No.1 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$175.00	Calendar Year \$ <u>175.00</u> Other \$ _____
8/29/2024	Kevin Glaspy Pomona, CA 91767	Non Monetary - Yard Signs	Steve Bennett Covina-Valley Unified School District, Governing Board Member Trustee Area No.1 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$563.65	Calendar Year \$ <u>738.65</u> Other \$ _____
9/29/2024	California Teachers Association Burlingame, CA 94010	Non Monetary - Mailers	Steve Bennett Covina-Valley Unified School District, Governing Board Member Trustee Area No.1 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp..	\$840.00	Calendar Year \$ <u>1578.65</u> Other \$ _____
SUBTOTAL				\$ 1578.65	

* Required only for payments which are contributions or independent expenditures.

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9/13/2024	Leabanos Covina CA 91722	Non Monetary - Flyers	Steve Bennett Covina-Valley Unified School District, Governing Board Member Trustee Area No.1 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$233.60	Calendar Year \$ 1812.25 Other \$ _____
8/27/2024	California Teachers Association Burlingame, CA 94010	Non Monetary - Voter Data	Jason Cook Covina-Valley Unified School District, Governing Board Member Trustee Area No.5 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$175.00	Calendar Year \$ 175.00 Other \$ _____
8/29/2024	Kevin Glaspy	Non Monetary - Yard Signs	Jason Cook Covina-Valley Unified School District, Governing Board Member Trustee Area No.5 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$563.66	Calendar Year \$ 738.66 Other \$ _____
SUBTOTAL				\$972.26	

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9/13/2024	Leabanos Covina CA 91722	Non Monetary - Flyers	Jason Cook Covina-Valley Unified School District, Governing Board Member Trustee Area No.5 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$233.60	Calendar Year \$ 1812.26 Other \$ _____
7/20/2024	California Teachers Association Burlingame, CA 94010	Non Monetary - Voter Data	Barbara Campos Covina-Valley Unified School District, Governing Board Member Trustee Area No.3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp..	\$350.00	Calendar Year \$ 350.00 Other \$ _____
SUBTOTAL				\$ 1423.60	

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8/29/2024	Kevin Glaspy	Non Monetary - Yard Signs	Barbara Campos Covina-Valley Unified School District, Governing Board Member Trustee Area No.3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$563.65	Calendar Year \$ <u>913.65</u> Other \$ _____
8/29/2024	California Teachers Association Burlingame, CA 94010	Non Monetary - Mailers	Barbara Campos Covina-Valley Unified School District, Governing Board Member Trustee Area No.3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$840.00	Calendar Year \$ <u>1753.65</u> Other \$ _____
9/13/2024	Leabanos Covina CA 91722	Non Monetary - Flyers	Barbara Campos Covina-Valley Unified School District, Governing Board Member Trustee Area No.3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	\$233.60	Calendar Year \$ <u>1987.25</u> Other \$ _____
SUBTOTAL				\$ 1637.25	

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