

# 497 Contribution Report

Amounts may be rounded to whole dollars.

|   |   |  |   |   |
|---|---|--|---|---|
| NAME OF FILER<br><b>South Bay United Teachers Issues Political Action Committee</b> |   | Date of This Filing<br><b>08/30/2024</b>   | RECEIVED<br>LOS ANGELES<br>③ 8/30/24<br>2024 SEP -3 PM 2:59<br>CAMPAIGN FINANCE | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| AREA CODE/PHONE NUMBER<br><b>(310) 921-2500</b>                                     | I.D. NUMBER (if applicable)<br><b>1319419</b> | Report No.<br><b>083024IPAC</b>  |   |   |
| STREET ADDRESS  |   | <input type="checkbox"/> Amendment to Report No. _____<br>(explain below) <b>2</b> |   |   |
| CITY<br><b>Torrance</b>   | STATE<br><b>CA</b>                            | ZIP CODE<br><b>90503</b>   | No. of Pages<br><b>2</b>  |   |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br><small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE*  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br><small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED  |
|---------------|--|--|--|--|
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | <input type="checkbox"/> Check if Loan<br>_____%<br><small>Provide interest rate</small> |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | <input type="checkbox"/> Check if Loan<br>_____%<br><small>Provide interest rate</small> |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | <input type="checkbox"/> Check if Loan<br>_____%<br><small>Provide interest rate</small> |

\* Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment: \_\_\_\_\_

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|  |  |                   |   |            |   |
|--|--|-------------------|---|------------|---|
| NAME OF FILER<br>South Bay United Teachers Issues Political Action Committee |  |                   | Date of This Filing<br>08/30/2024   | Date Stamp | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| AREA CODE/PHONE NUMBER<br>(310) 921-2500                                     | I.D. NUMBER (if applicable)<br>1319419 |                   | Report No.<br>083024IPAC  |            |   |
| STREET ADDRESS   |  |                   | <input type="checkbox"/> Amendment to Report No. _____<br>(explain below) |            |   |
| CITY<br>Torrance   | STATE<br>CA                            | ZIP CODE<br>90503 | No. of Pages<br>2   |            |   |

## 2. Contribution(s) Made

| DATE MADE | FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION                      | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|-----------|---|---|------------------------|----------------------------------|
| 08/30/24  | California Teachers Association<br>Burlingame, CA 94010                                       | CTA and Local Chapter Join Mail Project- Measure S for Redondo Beach. | \$3,000.00             | November 5, 2024                 |
|           |   |   |                        |                                  |
|           |   |   |                        |                                  |
|           |   |   |                        |                                  |

Reason for Amendment: \_\_\_\_\_  
 \_\_\_\_\_