

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.

SHORT FORM

CALIFORNIA FORM **450**

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For Official Use Only

Statement covers period
from 7/1/2021
through 12/31/2021

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

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CAMPAIGN FINANCE

1. Type of Recipient Committee:

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

2. Type of Statement:

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

3. Committee Information

I.D. NUMBER
1243795

COMMITTEE NAME

EI Monte Union Educators Association PAC

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Irwindale CA 91706 (626)357-7814

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Donald Quick

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
W. Covina CA 91790 (626)242-3133

NAME OF ASSISTANT TREASURER, IF ANY

Richard Goodwell

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Altadena CA 91001 (626)372-4939

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true.

Executed on 1/10/2022
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

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SHORT FORM

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from 7/1/2021
through 12/31/2021

**CALIFORNIA
FORM 450**

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NAME OF COMMITTEE

EI Monte Union Educators Association PAC

I.D. NUMBER

1243795

Expenditures Made

1. Expenditures of \$100 or more made this period	\$ <u>0</u>
2. Expenditures under \$100 made this period (Not itemized.)	<u>0</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD..... <i>Add Lines 1 + 2</i>	\$ <u>0</u>
4. Nonmonetary Adjustment..... <i>From Line 8 Below</i>	<u>0</u>
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>	\$ <u>265.10</u>
6. TOTAL EXPENDITURES MADE TO DATE <i>Add Lines 3 + 4 + 5</i>	\$ <u>265.10</u>

Contributions Received

7. Monetary contributions received this period.....	\$ <u>4,726.41</u>
8. Non-monetary contributions received this period.....	<u>0</u>
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>	\$ <u>0</u>
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE <i>Add Lines 7 + 8 + 9</i>	\$ <u>4,726.41</u>

Current Cash Statement

11. Beginning cash balance <i>Previous Summary Page, Line 15</i>	\$ <u>11,731.65</u>
12. Cash receipts this period..... <i>Line 7 above</i>	<u>4,726.41</u>
13. Miscellaneous increases to cash	\$ <u>0</u>
14. Cash expenditures this period..... <i>Line 3 above</i>	<u>0</u>
15. ENDING CASH BALANCE THIS PERIOD <i>Add Lines 11 + 12 + 13, then subtract Line 14</i>	\$ <u>16,458.06</u>