0			Type or print in ink.	STATEMENT NO ACTIVITY
S	Semi-Annual Statement of No Activity		Type of print in link.	Date Stamp CALIFORNIA 425
du ele Se	r use by recipient committees that have not receive ring the six-month period covered by a semi-annual ective office may not use this form.  The the Information Manual on Campaign Disclosure information required to be provided to you pursua	a statement. Candidate controller Provisions of the Political Reform	ed committees formed for an  Act for additional information	LOS ARGELES GOUNT For Official Use Only  O 02/22/2022 2022 FEB 28 AM 1: 56  CAMPAIGN FINANCE
1.	Committee Information	I.D. NUMBER 801796	Treasurer(s)	
	COMMITTEE NAME		NAME OF TREASURER	
	National Women's Political Caucus - San Fernand	do Valley Chapter	Cecile Bendavid	
			MAILING ADDRESS	
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CODE AREA CODE/PHONE
			Woodland Hills	CA 91367 818 731 3228
	CITY STATE ZI	IF CODE AREA CODE/PHONE	_	[
	Woodland Hills CA 9	91367 818 731 3228		2
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET		MAILING ADDRESS	
	<del></del>			
	CITY STATE ZIE	IP CODE AREA CODE/PHONE	CITY	STATE ZIP CODE AREA CODE/PHONE
			<del></del> ,	
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL	ADDRESS
	cecile.bendavid@gmail.com		cecile.bendavid@gm	ail.com
2.	Period of No Activity			
	No contributions have been received and no	expenditures have been made	e during the period covering the	e dates below:
	Check one of the following boxes and com	molete the year.   ☐ Janu	ary 1, through June 30, 20 _	☑ July 1, through December 31, 20
3.	Verification			
		ng this statement. I have reviewed the statement and to the best of my knowledge the information contained herein perjury under the laws of the State of California that the foregoing is true and correct.		
	Executed on January 17, 2022	_	Bysign/	VURE OF TREASURER/ASSISTANT TREASURER
	DATE		SIGNA	
				FPPC Form 425 (Jan/01) FPPC Toll-Free Helpline: 866/ASK-FPPC 866/275-3772