

Semi-Annual Statement of No Activity

Type or print in ink

1/19/23 (1)

STATEMENT OF NO ACTIVITY

For use by recipient committees that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. **Candidate controlled committees formed for an elective office may not use this form.**

See the Information Manual on Campaign Disclosure Provisions of the Political Reform Act for additional information and information required to be provided to you pursuant to the Information Practices Act of 1977.

Date Stamp	CALIFORNIA FORM 425 For Official Use Only
RECEIVED BY LOS ANGELES COUNTY 2023 JAN 23 PH 3:30 CAMPAIGN FINANCE	

1. Committee Information

I.D. NUMBER
13661970

COMMITTEE NAME

Teachers Association of South Pasadena-Candidate

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Monterey Park	CA	91754	(323)253-0462

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

twong@spusd.net

Treasurer(s)

NAME OF TREASURER

Tammy Wong

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Monterey Park	CA	91754	(323)253-0462

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

2. Period of No Activity

No contributions have been received and no expenditures have been made during the period covering the dates below:

Check one of the following boxes and complete the year. January 1, through June 30, 20__ July 1, through December 31, 20__

22
TW

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 Calif

Executed on 1/10/23
DATE

By _____

TREASURER

Clear Form Print Form