

Semi-Annual Statement of No Activity

Type or print in ink.

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
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CAMPAIGN FINANCE**

CALIFORNIA FORM 425
For Official Use Only

1. Committee Information

I.D. NUMBER
1311504

COMMITTEE NAME

Downey Education Association Educational Improvement Fund Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Norwalk	CA	90650	562-868-6251

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

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

aida@tri-cityed.org

Treasurer(s)

NAME OF TREASURER

Kevin Welch

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Norwalk	CA	90650	562-868-6251

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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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, 20²¹ July 1, through December 31, 20__

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the is true and complete. I certify under penalty of perjury under the laws of the State of

contained herein

Executed on 7/27/2021
DATE

By _____