Recipient Committee Campaign Statement Cover Page			Date Stamp  RECEIVED  LOS ANGELES	2011	COVER PAGE ALIFORNIA 460 FORM	
	Statement covers period from January 1, 2021	Date of election if applicable: (Month, Day, Year)	2021 JUL 12 PI	M 5: 02	ge 1 of 4 For Official Use Only	
SEE INSTRUCTIONS ON REVERSE	through June 30, 2021		CAMPAIGN FI		G11256	
1. Type of Recipient Committee: All Committees - Co	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:				
State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	ermination)	Quarterly Special Oc	Statement dd-Year Report	
3 Committee Information	D. NUMBER 1420436	Treasurer(s)  NAME OF TREASURER				
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	420430					
SOUTH WHITTIER TEACHERS ASSOCIATION F	POLITICAL COMMITTEE	LUCILLA GUTIERREZ MAILING ADDRESS				
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE	
		WHITTIER	CA	90603	951-205-5965	
CITY STATE ZIP C		NAME OF ASSISTANT TREASUR	RER, IF ANY			
WHITTIER CA 9060 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		MAILING ADDRESS				
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE	
OPTIONAL: FAX/E-MAIL ADDRESS swtapres@gmail.com		OPTIONAL: FAX / E-MAIL ADDR	ESS			
4. Verification I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State or		knowledge the information contained	d herein and in the attac	ched schedule	es is true and complete, I	
Executed on July 12, 2021	By.		nt Treasurer			
Executed on	By Signature of Con	trolling Officeholder, Candidate, State Measure P	roponent or Responsible Office	r of Sponsor		

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on.

Executed on \_

Date

FPPC Form 460 (Jan/2016))

SS

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

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Statement covers period from January 1, 2021	FORM 460				
through June 30, 2021	Page 2 of 4				
	I.D. NUMBER 1420436				

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

SOUTH WHITTIER TEACHERS ASSOCIATION POLITICAL COMMITTEE

Contributions Received  1. Monetary Contributions	**Example 1.105**  \$ 1,105**  0 1,105**  0 1,105**  0 1,105**  0 1,105**  1,105**  0 1,105**  1,105**	\$\$  1,105	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections  1/1 through 6/30 7/1 to Date  20. Contributions Received \$ \$  21. Expenditures Made \$ \$
Expenditures Made  6. Payments Made  7. Loans Made  8. SUBTOTAL CASH PAYMENTS  9. Accrued Expenses (Unpaid Bills)  10. Nonmonetary Adjustment  11. TOTAL EXPENDITURES MADE  Schedule E, Line 3  Add Lines 8 + 9 + 10	\$\frac{100}{0}\$ \$\frac{100}{0}\$ 0 0 0 100 \$	\$ \$ \$	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)
Current Cash Statement  12. Beginning Cash Balance	\$\frac{14,131}{1,105}\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	*Amounts in this section may be different from amounts reported in Column B.  FPPC Form 460 (Jan/2016))  FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Schedule A Monetary Contributions Received			s may be rounded whole dollars.	Statement covers period from January 1, 2021 through June 30, 2021		CALIFORNIA 460 FORM	
SEE INSTRUCTI	IONS ON REVERSE						
NAME OF FILER SOUTH WH	HITTIER TEACHERS ASSOCIATIONS POLITICAL CO	OMMITTEE				1.D. NUN 1420436	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
6/8/2021	SOUTH WHITTIER TEACHERS ASSOCIATION WHITTIER, CA 90603 #95-3105470	□IND □COM ☑OTH □PTY □SCC		1,105	1,105		
		OTH PTY SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 1,105			
Amount re (Include a	A Summary eceived this period – itemized monetary contribution all Schedule A subtotals.)			105	OTH PTY	(other to H – Other (e Y – Political	al ent Committee than PTY or SCC) e.g., business entity)

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$ 1,105

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## Schedule E Payments Made

Amounts may be rounded to whole dollars.

	SCHEDULE E			
Statement covers period from January 1, 2021	california 460			
through June 30, 2021	Page 4 of 4			
	I.D. NUMBER 1420436			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

SOUTH WHITTIER TEACHERS ASSOCIATION POLITICAL COMMITTEE

OL	ES: If one of the following codes accurately	describes the	payment, you may enter the code	. Otherwise,	describe the payment.
MP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
NS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
TB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
IL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
ND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (expl	ain)* POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
EG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
IT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
SECRETARY OF STATE / STATE OF CALIFORNIA POLITICAL REFORM DIVISION SACRAMENTO, CA 95814	ANNUAL FEE: FOR THE YEAR 2021 Payable to: Secretary of State CK#110 (dated 12/21/2020), Check cleared 2/8/2021	\$50
SECRETARY OF STATE / STATE OF CALIFORNIA POLITICAL REFORM DIVISION SACRAMENTO, CA 95814	ANNUAL FEE: FOR THE YEAR 2019 Payable to: Secretary of State CK#113 (dated 1/10/2021), Check cleared 3/16/2021	\$50

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 100

## Schedule E Summary

1.	Itemized payments made this period. (Include all Schedule E subtotals.)\$	100
2.	Unitemized payments made this period of under \$100\$	0
3.	Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	0
4.	Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	100