Recipient Committee Campaign Statement Cover Page

FORM Cover Page Page _1 Date of election if applicable: Statement covers period (Month, Day, Year) For Official Use Only from 0701/2021 CAMPAIGN FINANCE through _12/31/2021 SEE INSTRUCTIONS ON REVERSE 2. Type of Statement: Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Preelection Statement Officeholder, Candidate Controlled Committee □ Primarily Formed Ballot Measure Quarterly Statement Semi-annual Statement State Candidate Election Committee Committee Special Odd-Year Report Recall Controlled Termination Statement O Sponsored (Also file a Form 410 Termination) (Also Complete Part 5) Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Primarily Formed Candidate/ Sponsored Officeholder Committee Small Contributor Committee Political Party/Central Committee (Also Complete Part 7) I.D. NUMBER 3. Committee Information Treasurer(s) 770021 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Joanne Y. Wendler (Volunteer Treasurer) National Women's Political Caucus San Gabriel Valley (SGV) MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE 91104 626-794-6389 Pasadena CA CITY ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY Mary Ann Lutz (Volunteer Assistant Treasurer) Pasadena CA 91104 626-794-6389 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE CITY ZIP CODE AREA CODE/PHONE CA 91031 South Pasadena Monrovia CA 91016 626-695-6222 OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS nwpcsgv.treasurer@gmail.com maryann@lutz-co.com Verification ached schedules is true and complete. I I have used all reasonable diligence in preparing and reviewing this statement and to the best of my know certify under penalty of perjury under the laws of the State of California that the foregoing is true and corn Executed on __1/23/2022 Executed on _ Executed on _ Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on _ Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

COVER PAGE

CALIFORNIA

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

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period

Summary Page	to whole dollars.		Statement of 107/01/20	covers period	FORM 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER National Women's Political Caucus San Gabriel Valley (SGV)			through 12/31	/2021	Page 2 of 10 I.D. NUMBER 770021		
Contributions Received 1. Monetary Contributions	## Column A	\$\frac{13644.06}{0}\$ \$\frac{13644.06}{0}\$ \$\frac{13644.06}{0}\$	Rur Ger	nning in Both th neral Elections	mary for Candidates e State Primary and hrough 6/30 7/1 to Date \$\$		
Expenditures Made 6. Payments Made	\$\frac{384.67}{0}\$ \$\frac{384.67}{0}\$ 0 0 384.67	\$ \frac{473.59}{0}\$ \$ \frac{473.59}{0}\$ \$ \frac{0}{473.59}\$ \$ \frac{473.59}{0}\$		ndidates 22. Cumulati	Summary for State ve Expenditures Made* Voluntary Expenditure Limit) Total to Date		
Current Cash Statement 12. Beginning Cash Balance	\$\frac{7201.65}{11214.06}\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	To calculate Colui add amounts in C A to the correspor amounts from Col of your last report amounts in Columbe negative figure should be subtract previous period at this is the first repfiled for this calent only carry over the from Lines 2, 7, a any).	olumn Inding Itumn B Itumn B Itumn B Itumn A may Itust that Itest from Item Mounts. If Item	ounts in this section r rted in Column B.	may be different from amounts FPPC Form 460 (Jan/2016))		
*		l	l	FPPC Advice: adv	vice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov		

Schedule	A		its may be rounded				SCHEDULE
	Contributions Received	to	whole dollars.	Statement cov from .7/1/2021	vers period		IFORNIA 460
SEE INSTRUCTION	ONS ON REVERSE			through 12/31/20	21	Page	3of10
NAME OF FILER		,	· · · · · · · · · · · · · · · · · · ·				UMBER
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR . (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
7/30/21	Adele Andrade-Stradler Alhambra, CA 91803	IND COM OTH PTY SCC	Council Member City of Alhambra	100.00	100.00		
8/20/21	Berjouhi Koukeyan Duarte, CA 91010	IND COM OTH PTY SCC	retired	250.00	250.00		
7/30/21	Cindy Wu El Monte, CA 91732	ZIND COM OTH PTY SCC	School Board Member El Monte	100.00	100.00		
7/30/21	Donna Baker Monrovia, CA 91016	IND COM OTH PTY	Realtor Douglass Elliman	500.00	540.00	-	
8/20/21	Ed Chau for Assembly 2022 ID#1434786 Sacramento, CA 95815	☐IND COM ☐OTH ☐PTY ☐SCC	Candidate Committee CA Assembly	100.00	100.00		
			SUBTOTAL S	1050.00			
I. Amount red (Include all	A Summary ceived this period – itemized monetary contributions I Schedule A subtotals.) ceived this period – unitemized monetary contributions				OT PT	othe) H – Other Y – Politic	ual bient Committee r 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 \$ 11214.06

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

from 7/1/2021

SUBTOTAL \$ 3700.00

NAME OF FILER National Wo	of Filer tional Women's Political Caucus San Gabriel Valley (SGV))21	Page	
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 TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/23/21	Umesh Mucchal Monrovia, CA 91016	☑IND □COM □OTH □PTY □SCC	Engineer Zencor	100.00	100.00		
9/25/21	Linda Centell Pasadena, CA 91104	☑IND □COM □OTH □PTY □SCC	City of Pasadena Assistant PIO	250.00	250.00		
11/17/21	Southern California Edison Rosemead, CA 91770	□IND □COM ☑OTH □PTY □SCC	Electric Energy Company	2500.00	2500.00		
7/26/21	Fiesta Taxi Co-Op, Inc. Gardena, CA 90249	□IND □COM ☑OTH □PTY □SCC	Taxi Co-Op, company	750.00	750.00		
7/19/21	Helen Romero Shaw	☑IND □ COM □ OTH □ PTY	So Cal Gas Co. Public Affairs Manager	100.00	100.00		

□scc

*Contributor Codes IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

El Monte, CA 91732

Amounts may be rounded to whole dollars. SCHEDULE A (CONT.)

CALIFORNIA .

FORM

Statement covers period

from _7/1/2021

SUBTOTAL \$ 500.00

NAME OF FILER National Wo	ME OF FILER National Women's Political Caucus San Gabriel Valley (SGV)				21	Page I.D. NU 77002	MBER
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
8/20/21	Elizabeth Burges Kahn Alta Dena, CA 91001	☑ IND □ COM □ OTH □ PTY □ SCC	retired	100.00	100.00		
7/30/21	Jeanne Raya San Gabriel, CA 91776	IND COM OTH PTY	John Raya Insurance Co. Insurance Agent	100.00	100.00		
7/30/21	Jennifer Cobian El Monte, CA 91732	IND COM OTH PTY SCC	El Monte Promise Foundation Executive Director	100.00	100.00		
7/30/21	Jessica Rivas Pasadena, CA 91104	☑ IND □ COM □ OTH □ PTY □ SCC	County of LA Attorney	100.00	100.00		
7/30/21	Joanne Wendler Pasadena, CA 91104	IND COM	Compass Manager	100.00	140.00		

*Contributor Codes IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars. SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from _7/1/2021

				through		Page	6 of 10
NAME OF FILER National Wo	omen's Political Caucus San Gabriel Valley (SGV)					77002	
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 TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/3021	Judy Chu for Congress Monterey Park, CA 91755	☐IND ☐COM ☐OTH ☐PTY ☐SCC	Campaign committee Congressional	500.00	500.00		,
7/30/21	Julie Winkle Giulioni South Pasadena, CA 91030	IND COM	DesignArounds Author	100.00	100.00		
7/30/21	Kim Petulla Monrovia, CA 91016	IND COM OTH PTY	Monrovia Unified School District Teacher	100.00	100.00		
7/30/21	Laura Friedman Glendale, CA 91202	IND COM OTH PTY	State of CA Assembly Member	250.00	250.00		
8/20/21	Laura Friedman For Assembly 2022 ID# 1435032 Encino, CA 91436	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC	Campaign committee CA Assembly	250.00	250.00		
SUBTOTAL \$ 1200.00							

*Contributor Codes

IND - Individual

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OTH - Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from 7/1/2021

				through			7 of <u>10</u>
NAME OF FILER National Wo	men's Political Caucus San Gabriel Valley (SGV)			77002			
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 CUMULATIVE TO DATE RECEIVED THIS CALENDAR YEAR PERIOD (JAN. 1 - DEC. 31)			PER ELECTION TO DATE (IF REQUIRED)
7/30/21	Linda Wah San Marino, CA 91108	IND COM OTH PTY SCC	PCC Board Trustee	250.00	390.00		
11/30/21	Lissa Reynolds South Pasadena, CA	IND COM OTH PTY	Cal Performing Arts Center Artistic Director	100.00	160.00		
8/20/21	Margaret Cooper Pasadena, CA 91101	☑IND □COM □OTH □PTY □SCC	retired	250.00	290.00		
7/30/21	Marina Khubesrian South Pasadena, CA 91030	ZIND COM OTH PTY SCC	Self Physican	250.00	350.00		
7/30/21	Mary Ann Lutz Monrovia, CA 91016	ZIND COM OTH PTY SCC	Lutz & Company, Inc. 500.00 54 Consultant		540.00		
SUBTOTAL \$ 1350.00							

*Contributor Codes

IND - Individual

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OTH – Other (e.g., business entity) PTY – Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from _7/1/2021

				through 12/31/2021			8 of 10	
NAME OF FILER National Wo						I.D. NUMBER 770021		
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 TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
8/20/21	Maria Morales El Monte City Council 2018 ID#1408808 Long Beach, CA 90802	☐IND ☑ COM ☐OTH ☐ PTY ☐ SCC	Campaign Committee El Monte City Council	150.00	150.00			
8/20/21	Olivia Galicia Pasadena, CA 91103	IND COM OTH PTY	Financially Fit Foundation Founder	1000.00	2000.00			
7/30/21	NWPC PIE (Pomona Inland Empire) Pomona, CA 91769	□IND □COM ②OTH □PTY □SCC	NWPC Caucus	100.00	100.00			
7/30/21	Roberta (Bobby) McGowan Temple City, CA 91780	IND COM OTH PTY SCC	retired	100.00	100.00			
8/20/21	Solis for Supervisor 2018 ID #1395229 Encino, CA 91436	□IND COM □OTH □PTY □SCC	Campaign Committee LA Board of Supervisors	500.00	500.00			
SUBTOTAL \$ 1850.00								

*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from <u>7/1/2021</u>		F	ORM 400
	`			through _12/31/20	21	Page _	1
NAME OF FILER National Wo	men's Political Caucus San Gabriel Valley (SGV)					77002	JMBER 1
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER 1.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/30/21	Sylvia Ramos San Gabriel CA 91776	IND COM OTH PTY	Coldwell Banker Dynasty Realtor	100.00	100.00		
8/20/21	Tammy Silver Pasadena, CA 9110	IND COM OTH PTY	PCC Board Trustee	100.00	140.00		
7/30/21	Thomas Wong Monterey Park, CA 91754	IND COM OTH PTY SCC	So Cal Edison Public Affairs Manager	100.00	100.00		
7/30/21	Tracy Van Houten Pasadena, CA 91104	IND COM OTH PTY	JPL Spacecraft Engineer	459.06	1299.06		
8/20/21	WISPPA South Pasadena, CA 91031	□IND □COM ☑OTH □PTY □SCC	Community Group in South Pasadena	100.00	100.00		
			SUBTOTAL	859.06			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party

Payments Made	to whole d			Statement covers period from 07/01/21	FORM 460		
EINSTRUCTIONS ON REVERSE ME OF FILER Vational Women's Political Caucus San Gabriel Valley (SGV)					Page 10 of 10 I.D. NUMBER 770021		
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli	imunications d appearances ses lating urvey researc very and mes	s h	wise, describe the payment. RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, ar TRS staff/spouse travel, lodging, TSF transfer between committee VOT voter registration WEB information technology costs	duction costs and meals and meals s of the sam	ne candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR DESC	CRIPTION OF PAYMENT		AMOUNT PAID	
EventBrite.com		FND	Service Fee for On	line Ticketing for fundraisers		297.27	
* Payments that are contributions or independent expenditures must al	lso be summarized on Scho	edule D.		sı	JBTOTAL	\$ 297.27	
Schedule E Summary							
 Itemized payments made this period. (Include all Sche Unitemized payments made this period of under \$100 					\$ _	297.27 87.40	

SCHEDULE E