| Recipient Committee<br>Campaign Statement<br>Cover Page   |                           |   | 1.0   | Date Stamp                  | BY                      | COVER PAGE LIFORNIA 460 FORM |
|---|---------------------------|---|---|-----------------------------|-------------------------|------------------------------|
|   |                           | Statement covers period from01/01/2021  | (Month, Day, Year)  | JUL 26 PH                   | 12:43                   | For Official Use Only        |
| SEE INSTRUCTIONS ON REVERSE   |                           | through06/30/2021   | -  qa   | MPAIGN FIN                  | ANCE                    |                              |
| 1. Type of Recipient Committee: All Comm  | ittees - Co               | emplete Parts 1, 2, 3, and 4.   | 2. Type of Statement:   |                             |                         |                              |
| Officeholder, Candidate Controlled Committee  ○ State Candidate Election Committee  ○ Recall (Alao Complete Part 5)  ☑ General Purpose Committee  ② Sponsored  ○ Small Contributor Committee  ○ Political Party/Central 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 Term Amendment (Explain below |                             | Quarterly S Special Odd | tatement<br>d-Year Report    |
| 3. Committee Information  |                           | D. NUMBER   | Treasurer(s)  |                             |                         |                              |
| COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COM   |                           | 1301574   | NAME OF TREASURER   |                             |                         |                              |
| Citrus College Faculty Association Poli   | tical Action              | on Committee  | Gerhard Peters MAILING ADDRESS  |                             |                         |                              |
| STREET ADDRESS (NO P.O. BOX)  |                           |   | CITY  | STATE                       | ZIP CODE                | AREA CODE/PHONE              |
|   |                           |   | Glendora  | CA                          | 91741                   | 626-335-4230                 |
| CITY STATE  |                           |   | NAME OF ASSISTANT TREASURER,  | IFANY                       |                         |                              |
| Glendora CA MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OF  | 9174                      | 626-914-8866  | MAILING ADDRESS   |                             |                         |                              |
| MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OF  | I.O. BOX                  |   | MAILING ADDRESS   |                             |                         |                              |
| CITY STATE  | ZIP CC                    | DDE AREA CODE/PHONE   | CITY  | STATE                       | ZIP CODE                | AREA CODE/PHONE              |
| Azusa CA  | 9170                      | 2 626-335-4230  |   |                             |                         |                              |
| OPTIONAL: FAX / E-MAIL ADDRESS  |                           |   | OPTIONAL: FAX / E-MAIL ADDRESS  |                             |                         |                              |
| gerhard71@gmail.com   |                           |   | gerhard71@gmail.com   |                             |                         |                              |
| I. Verification I have used all reasonable diligence in preparing a certify under penalty of perjury under the laws of the control of the laws of the certify under the laws of the certify under the laws of the certification.  | ind review<br>ne State of | ing this statement and to tl<br>f California that the foregoi   | nformation contained h  | erein and in the atta       | ched schedules          | s is true and complete.      |
| Executed on   | _                         | Ву  | re of Treasurer or Assistant Tr   | easurer                     |                         |                              |
| Executed on   |                           | BySignature of Co   | introlling Officeholder, Candidate, State Measure Propi   | onent or Responsible Office | er of Spansor           |                              |
| Executed onDate   | _                         | Ву  | Signature of Controlling Officeholder, Candidate, Sta   | ite Measure Proponent       |                         |                              |
| Executed on   |                           | Ву  |   | to Manager                  |                         |                              |

## Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

|                                    |            | SUMMARY PAGE           |
|------------------------------------|------------|------------------------|
| Statement covers period 01/01/2021 |            | CALIFORNIA 460         |
| through _                          | 06/30/2021 | Page 2 of 4            |
|                                    |            | I.D. NUMBER<br>1301574 |

| NAME OF FILER Citrus College Faculty Association Political Action Committee |      |  |      |  |   | 1.D. NUMBER<br>1301574         |  |  |
|---|------|--|------|--|---|--------------------------------|--|--|
| Contributions Received  |      | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) |      | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE   | Calendar Year Summary for Candidates<br>Running in Both the State Primary and |                                |  |  |
| Monetary Contributions  | \$   | 965.40   | \$   | 965.40   | General Elections   |                                |  |  |
| Loans Received  |      | 0.00   |      | 0.00   | 1/1 t   | hrough 6/30 7/1 to Date        |  |  |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2                              | \$   | 965.40   | s    | 965.40   | 20. Contributions Received \$   | \$                             |  |  |
| 4. Nonmonetary Contributions  | 1150 | 0.00   |      | 0.00   | 21 Expenditures   |                                |  |  |
| 5. TOTAL CONTRIBUTIONS RECEIVED   | \$   | 965.40   | \$   | 965.40   | Made \$   | s                              |  |  |
| Expenditures Made   |      |  |      |  | Expenditure Limit   | Summary for State              |  |  |
| 6. Payments Made Schedule E, Line 4   | \$   |  | \$   | 0.00   | Candidates  |                                |  |  |
| 7. Loans Made Schedule H, Line 3  |      | 0.00   |      | 0.00   | 22 Cumulati   | ve Expenditures Made*          |  |  |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7                                   | \$   | 0.00   | \$   | 0.00   | (If Subject to  | Voluntary Expenditure Limit)   |  |  |
| 9. Accrued Expenses (Unpaid Bills)  |      | 0.00   |      | 0.00   | Date of Election  | Total to Date                  |  |  |
| 10. Nonmonetary AdjustmentSchedule C, Line 3                                |      | 0.00   |      | 0.00   | (mm/dd/yy)  |                                |  |  |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10                            | \$   | 0.00   | \$   | 0.00   |   | \$                             |  |  |
| Current Cash Statement  |      |  | Γ    |  |   | _ \$                           |  |  |
| 12. Beginning Cash Balance Previous Summary Page, Line 16                   | \$   | 16,263.45  | То   | calculate Column B,  | 1   |                                |  |  |
| 13. Cash Receipts Column A, Line 3 above                                    |      | 965.40   |      | d amounts in Column to the corresponding   | l   |                                |  |  |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4                      |      | 0.00   | an   | nounts from Column B   | reported in Column B.   | may be different from amounts  |  |  |
| 15. Cash Payments   |      | 0.00   |      | your last report. Some nounts in Column A may  |   |                                |  |  |
| 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15        | \$   | 17,228.85  | be   | negative figures that  |   |                                |  |  |
| If this is a termination statement, Line 16 must be zero.                   |      |  | pre  | ould be subtracted from<br>evious period amounts. If<br>is is the first report being |   |                                |  |  |
| 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2                             | \$   | 0.00   | file | ed for this calendar year,<br>ally carry over the amounts                            |   |                                |  |  |
| Cash Equivalents and Outstanding Debts                                      |      |  |      | om Lines 2, 7, and 9 (if   | Į.  |                                |  |  |
| 18. Cash Equivalents See instructions on reverse                            | \$   | 0.00   |      | 71.  |   |                                |  |  |
| 19. Outstanding Debts Add Line 2 + Line 9 in Column B above                 | \$   | 0.00   | 1    |  |   | FPPC Form 460 (Jan/2016        |  |  |
|   |      |  | l    |  | FPPC Advice: adv  | vice@fppc.ca.gov (866/275-3772 |  |  |
|   |      |  |      |  |   | www.fppc.ca.go                 |  |  |

| scredule A  | Amounts may be rounded |  |            |                      | St      | CHEDULE | A   |
|---|------------------------|--|------------|----------------------|---------|---------|-----|
| Monetary Contributions Received                               | to whole dollars.      | Statement covers period from01/01/2021 |            | CALIFORNIA Z<br>FORM |         | 460     | 160 |
| EE INSTRUCTIONS ON REVERSE                                    |                        | through _                              | 06/30/2021 | Page                 | 3 of    | 4       |     |
| AME OF FILER  |                        |  |            | I.D. NUMBE           | R       |         | ٦   |
| Citrus College Faculty Association Political Action Committee |                        |  |            | 1301574              |         |         |     |
|   |                        | 11101                                  |            |                      | 250 516 | COTION  | _   |

|                  |   |                               | the state of the s |                                   |   |  |
|------------------|---|-------------------------------|--|-----------------------------------|---|--|
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) | CONTRIBUTOR<br>CODE #         | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)   | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
| 01/25/2021       | Citrus College Faculty Association Glendora, CA 91741                                       | ☐ IND ☐ COM Ø OTH ☐ PTY ☐ SCC |  | 160.90                            | 160.90  |  |
| 02/19/2021       | Citrus College Faculty Association Glendora, CA 91741                                       | ☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC |  | 160.90                            | 321.80  |  |
| 03/19/2021       | Citrus College Faculty Association Glendora, CA 91741                                       | □ IND □ COM ☑ OTH □ PTY □ SCC |  | 160.90                            | 482.70  |  |
| 05/04/2021       | Citrus College Faculty Association Glendora, CA 91741                                       | □IND □COM ☑OTH □PTY □SCC      |  | 160.90                            | 643.60  |  |
| 05/18/2021       | Citrus College Faculty Association Glendora, CA 91741                                       | ☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC |  | 160.90                            | 804.50  |  |
|                  |   |                               | SUBTOTAL \$  | 804.50                            |   |  |

## Schedule A Summary

- 1. Amount received this period itemized monetary contributions. 965.40 (Include all Schedule A subtotals.)
- 0.00 2. Amount received this period - unitemized monetary contributions of less than \$100 ......\$
- 3. Total monetary contributions received this period. 965.40 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)......TOTAL \$

\*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

## Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) **Monetary Contributions Received** to whole dollars. Statement covers period CALIFORNIA FORM 01/01/2021 from 06/30/2021 Page \_\_4 through. NAME OF FILER I.D. NUMBER Citrus College Faculty Association Political Action Committee 1301574 IF AN INDIVIDUAL, ENTER CUMULATIVE TO DATE AMOUNT PER ELECTION CONTRIBUTOR DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE RECEIVED CODE \* (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) ☐ IND Citrus College Faculty Association ☐ COM 06/12/21 160.90 965.40 V OTH Glendora, CA 91741 PTY SCC ☐ IND СОМ OTH ☐ PTY SCC ☐ IND □ COM OTH PTY SCC □ IND □сом □отн ☐ PTY SCC DIND СОМ

SUBTOTAL \$

160.90

□OTH □PTY □SCC

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