Semi-Annual Statement of No Activity	Type or print in ink.	Date Stamp CALIFORNIA 125
For use by recipient committees that have not received any contributions and have not made during the six-month period covered by a semi-annual statement. Candidate controlled con elective office may not use this form.		LOS ANGELES COUNTY For Official Use Only  2021 JUL 30 PM 3: 47 GO7094
See the <u>Information Manual on Campaign Disclosure Provisions of the Political Reform Act</u> fo and information required to be provided to you pursuant to the Information Practices Act of 19		CAMPAIGN FINANCE
1. Committee Information 1.D. NUMBER 0001235455	Treasurer(s)	
stside Union Teachers Association	Dairell	Hrabik
litical Action Committee	MAILING ADDRESS	
STREET ADDRESS (NO P.O. BOX)	city Jano	STATE ZIP CODE AREA CODE/PHONE  (A 935UU 1.61-992-2
Lancaster CA 93536 661-722-0148	NAME OF ASSISTANT T	TREASURER, IF ANY
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET	MAILING ADDRESS	
CITY STATE ZIP CODE AREA CODE/PHONE	CITY	STATE ZIP CODE AREA CODE/PHON
OPTIONAL: FAX / E-MAIL ADDRESS	OPTIONAL: FAX/E-MA	hrabik@yahoo.com
2. Period of No Activity		July 10 to the state of the sta
No contributions have been received and no expenditures have been made during Check one of the following boxes and complete the year.	ng the period covering to , through June 30, 20 9	n 1
3. Verification		
I have used all reasonable diligence in preparing this statement. I have reviewed is true and complete. I certify under penalty of perjury under the laws of the Stat		he hest of my knowledge the information contained herein
Executed on July 38, 2021	By	NATURE OF TREASURER/ASSISTANT TREASURER

Type or print in ink.

FPPC Form 425 (Jan/01) FPPC Toll-Free Helpline: 866/ASK-FPPC