

**Semi-Annual Statement of No Activity**

Type or print in ink.

STATEMENT OF NO ACTIVITY

Date Stamp	<b>CALIFORNIA FORM 425</b>
RECEIVED BY LOS ANGELES COUNTY ① 211123 2023 FEB -3 PM 12: 07 CAMPAIGN FINANCE	
For Official Use Only	

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.

**1. Committee Information**

I.D. NUMBER  
0001239163

COMMITTEE NAME  
Lennox Teachers Association  
Fund For Quality Education

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE  
Hawthorne CA 90251 310-721-0330

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Justin Catalan

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

Hawthorne CA 90251 310-721-0330

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

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, 20\_\_  July 1, through December 31, 2022

**3. Verification**

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

Executed on 1-31-23  
DATE

By \_\_\_\_\_