

**Recipient Committee
Campaign Statement
Cover Page**

405 0218-1

COVER PAGE

Date Stamp RECEIVED BY: LOS ANGELES COUNTY no postmark 2022 NOV 18 PM 2:10 CAMPAIGN FINANCE	CALIFORNIA FORM 460 Page 1 of 4 For Official Use Only G07110
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Statement covers period
from 07-01-2022
through 09/24/2022

Date of election if applicable:
(Month, Day, Year)
11/08/2022

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|---|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee |
| <input type="checkbox"/> State Candidate Election Committee | <input type="checkbox"/> Controlled |
| <input type="checkbox"/> Recall
<i>(Also Complete Part 5)</i> | <input type="checkbox"/> Sponsored
<i>(Also Complete Part 5)</i> |
| <input checked="" type="checkbox"/> General Purpose Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |
| <input checked="" type="radio"/> Sponsored | |
| <input type="radio"/> Small Contributor Committee | |
| <input type="radio"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | |
| <input checked="" type="checkbox"/> Amendment (Explain below) | |
| Correction to account balance - Interest added at semi-annual statement
changed all number going forward. | |

3. Committee Information

I.D. NUMBER
1236020

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Bellflower Teachers Association Fund for Quality Schools

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Cerritos	CA	90703	562 924 9311

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

voiceofbta@gmail.com

Treasurer(s)

NAME OF TREASURER

Carol Fullam

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Cerritos	CA	90703	562 924 9311

NAME OF ASSISTANT TREASURER, IF ANY

Linda Adkins-Arndt

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Cerritos	CA	90703	562 924 9311

OPTIONAL: FAX / E-MAIL ADDRESS

voiceofbta@gmail.com

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and certify under penalty of perjury under the laws of the State of California that the fo

re in and in the attached schedules is true and complete. I

Executed on 10-18-22
Date

Executed on 10-18-22
Date

Executed on _____
Date

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>07/1/2022</u>	CALIFORNIA FORM 460
through <u>9/24/2022</u>	
Page <u>2</u> of <u>4</u>	I.D. NUMBER <u>1236020</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bellflower Teachers Association Fund for Quality Schools

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ <u>5523.83</u>	\$ <u>5523.83</u>
2. Loans Received..... Schedule B, Line 3	<u>0</u>	<u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>5523.83</u>	\$ <u>5523.83</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	<u>0</u>	<u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>5523.83</u>	\$ <u>5523.83</u>

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

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... Schedule E, Line 4	\$ <u>4870.00</u>	\$ <u>4870.00</u>
7. Loans Made..... Schedule H, Line 3	<u>0</u>	<u>0</u>
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>4870.00</u>	\$ <u>4870.00</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	<u>0</u>	<u>0</u>
10. Nonmonetary Adjustment..... Schedule C, Line 3	<u>0</u>	<u>0</u>
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>4870.00</u>	\$ <u>4870.00</u>

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>19230.10</u>
13. Cash Receipts..... Column A, Line 3 above	<u>5523.83</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	<u>0</u>
15. Cash Payments..... Column A, Line 8 above	<u>4870.00</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>19883.93</u>

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$ <u>0</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$ <u>0</u>
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ <u>0</u>

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.

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/2022</u> through <u>9/24/2022</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>4</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Bellflower Teachers Association Fund for Quality Schools	I.D. NUMBER
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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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/19/22	Bellflower Teachers Association Cerritos, CA 90706	<input checked="" type="checkbox"/> IND. <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,523.83		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$ 5,523.83

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 0
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 5,523.83
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 5,523.83

*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 E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>7/01/2022</u> through <u>9/24/2022</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>4</u>
	I.D. NUMBER 1236020

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Bellflower Teachers Association Fund for Quality Schools

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB 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 |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT 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
California Teachers Association Burlingame, CA 94010		Campaign Data	600.00
California Teachers Association Burlingame, CA 94010		CTA Joint Campaign Mailer	4200.00
LA County Registrar-Recorder/County Clerk Campaign Finance Section, Room 2003 Norwalk, CA 90650		Penalty Assessed 01-06 2022 Semi-Annual Report late	70.00

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

SUBTOTAL \$ 4870.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	4870.00
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.).....	TOTAL \$	4870.00



**LOS ANGELES COUNTY
REGISTRAR-RECORDER/COUNTY CLERK**

DEAN C. LOGAN
Registrar-Recorder/County Clerk

09/16/2022

Carol Fullam
17434 Studebaker Road
Cerritos, California 90703

RE: Penalty Payment Received

Dear Ms. Fullam,

Thank you for your payment of \$70.00. Please find the enclosed receipt for the late filing of Form 460 due 08/01/2022.

If you require further assistance, please contact the Campaign Finance Section at (562) 462-2339 or email cfid@rrcc.lacounty.gov.

Sincerely,

DEAN C. LOGAN
Registrar-Recorder/County Clerk

Campaign Finance Section

REQUEST FOR MEMBER/VOTER DATA

To: (Regional Organizer) Eric Alfaro
 Primary Contact Staff: Salina Joiner
 Phone: 1951 488 6148
 Email: sjoiner@cta.org

NOTE: FEE AND PAC INFO NOT REQUIRED IF DATA USED FOR ORGANIZING / NON-POLITICAL PURPOSES

PAC ID #: 1236020

PAC Name & Address: (Mandatory for release of external data if used for political communications.)

Check all that apply

- Chapter Members ONLY
- CTA Members in Bellflower USD
(list district or county)

Bellflower TA Fund for Quality Schools
17434 Studebaker Rd.
Cerritos, CA
 Request Date: 8-27-22

Voters in 46,802 district(s).

Requested By: Linda Adkins-Arndt
Chapter President

President Signature: Linda Adkins-Arndt

Reg. Manager Approval: _____

Format Requested

- Excel/CSV File
- Mail File - Format _____
- Phone Lists - Format _____
- Other

Description of campaign/use of the data:
BUSD School Board Election

Cost for External Data - MUST BE PAID FOR IN ADVANCE

Check payable to CTA, please include FPPC# on check.

Send data to: Linda Adkins-Arndt

Contact Phone: 562 556-5487

Contact Email: voiceofBTA

Check Received by: _____

(Must be in hand of CTA employee before data can be released; please send an image of check via email with this completed form.)

of Records

- 1 - 1000 records \$25
- 1001 - 2500 records \$50
- 2501 - 5000 records \$100
- 5001 - 25,000 records \$350
- 25,001 - 50,000 records \$600
- 50,001 - 100,000 records \$1,000
- 100,000 and up - \$8.00 per thousand (after first 100k)

Checks made out to the California Teachers Association and mail to:

California Teachers Association
C/O Anna Dilig, Accounting Department
1705 Murchison Dr.
Burlingame, CA 94010

GR Approval: YES NO

Total Amount: \$600.00 Check Number: 304

FOR OFFICE USE ONLY

Charge Item: YES NO

Date Order Received _____

at \$ _____ per _____ \$ _____

Date Order Completed _____

Number run _____
 Authorized by _____ Mail/Del. Chg.\$ _____

Total Charge: \$ _____

CTA and Local Chapter Joint Mail Project

4200.00

For participation in the CTA Local Chapter Joint Mail Project, all project needs, including this form, data request and photographs must be submitted to the Regional Political Organizer by **5:00 PM on Monday, September 12.** Payment must also be received by CTA by the same deadline. **NO EXCEPTIONS.**

FULL NAME OF CHAPTER (no acronyms) Bellflower Teachers Assn.

CTA REGION 3 PRIMARY CONTACT STAFF Salina Joiner

FULL NAME OF DISTRICT Bellflower Unified School District

CHAPTER PAC NAME Bellflower Teachers Assn. Fund for Quality

FPPC # 1236020 COUNTY Los Angeles Schools

Check here if the chapter does not have a PAC and certifies that it will spend less than \$2,000 on elections this calendar year.

NAME of Candidate(s)

Amie Stewart TRUSTEE AREA

Brad Crikfield TRUSTEE AREA

Rev. Tomas Ivens TRUSTEE AREA

TRUSTEE AREA

} at-Large

TITLE AND NUMBER/ LETTER OF LOCAL MEASURE: N/A

DESCRIPTION OF VOTER UNIVERSE _____

TOTAL NUMBER OF HOUSEHOLDS IN TARGET UNIVERSE:

AT LARGE: _____ pieces

TRUSTEE AREA _____: _____ pieces

TRUSTEE AREA _____: _____ pieces

TRUSTEE AREA _____: _____ pieces

TRUSTEE AREA _____: _____ pieces

DISCLAIMER REQUIRED _____

High resolution photographs of each candidate are attached. NOTE: Any missing photographs will be replaced with a check-marked box. Please attach jpg files that are a minimum of 1 MB.

High resolution logos for local ballot measures are attached. NOTE: Any missing logos will be replaced with a check-marked box.

TOTAL FUNDS SUBMITTED: (total number of pieces X 28 cents): _____

SIGNED: Linda Adkins-Andt
(Chapter President)

8-27-22
(Date)

BELLFLOWER EDUCATION ASSOCIATION 90-7728/3222
17434 STUDEBAKER RD. 06-01
CERRITOS, CA 90703-2635

307

DATE 9-8-22

PAY TO
THE ORDER OF

CTA

\$ 4,200.⁰⁰/₁₀₀

four thousand two hundred

FIRST FINANCIAL

CREDIT UNION
P.O. BOX 60048
CITY OF INDUSTRY, CA 91716-0048

PAC 12312020

NO/1005

MEMO

Joint mailer L. Adkins-Orndt

⑆32227728⑆ 000124352308⑆ 0307

SPECIALTY PRINT