

Semi-Annual Statement of No Activity

Type or print in ink.

STATEMENT OF NO ACTIVITY

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.

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| Date Stamp | CALIFORNIA FORM 425 For Official Use Only G 06673 |
| RECEIVED BY US ANGELES COUNTY ① 1/26/23 2023 JAN 30 PM 4:05 CAMPAIGN FINANCE | |

1. Committee Information

I.D. NUMBER
992229

COMMITTEE NAME

El Monte Elementary Teachers Association Education Improvement Fund

STREET ADDRESS (NO P.O. BOX)

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|-----------|-------|----------|-----------------|
| Irwindale | CA | 91706 | 626-337-7814 |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|
| | | | |

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

MaryEsther Espinosa - PAC Treasurer

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|-----------|-------|----------|-----------------|
| Irwindale | CA | 91706 | 626-337-7814 |

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 correct.

Executed on 01/23/2023
DATE

TREASURER