

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.

Date Stamp

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CAMPAIGN FINANCE
DISCLOSURE SECTION

CALIFORNIA FORM 425

For Official Use Only

1. Committee Information

I.D. NUMBER
1360094

Treasurer(s)

COMMITTEE NAME

Pasadena City College Faculty Association Political Action Committee

NAME OF TREASURER

Allison Parker

MAILING ADDRESS

STREET ADDRESS (NO P.O. BOX)

CITY

Pasadena

STATE ZIP CODE

CA 91106

AREA CODE/PHONE

626-585-7261

CITY

Pasadena

STATE

CA

ZIP CODE

91106

AREA CODE/PHONE

626-585-7261

NAME OF ASSISTANT TREASURER, IF ANY

Danny Hamman

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

MAILING ADDRESS

CITY

Pasadena

STATE

CA

ZIP CODE

91106

AREA CODE/PHONE

626-585-7261

CITY

Pasadena

STATE ZIP CODE

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OPTIONAL: FAX / E-MAIL ADDRESS

facultyassociation@gmail.com

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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, 20²³ July 1, through December 31, 20__

3. Verification

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

July 19, 2023

Executed on _____ DATE

By _____
