

# Recipient Committee Campaign Statement – Short Form

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.

5121-1-

SHORT FORM

Date Stamp  
**1-25-21** ①

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2021 JAN 26 PM 2:33

CAMPAIGN FINANCE

CALIFORNIA FORM **450**

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For Official Use Only

**G10800**

Statement covers period  
from July 1, 2020  
through December 31, 2020

Date of election if applicable  
(Month, Day, Year)  
NA 2021 JAN 26

## 1. Type of Recipient Committee:

- Ballot Measure Committee
- Primarily Formed
- Controlled
- Sponsored
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
- Primarily Formed Candidate/Officeholder Committee

## 2. Type of Statement:

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain) \_\_\_\_\_  
(Also check type of statement you are amending)
- Quarterly Statement
- Special Odd-year Report

## 3. Committee Information

I.D. NUMBER  
910689

COMMITTEE NAME

African American Educators Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Gardena</u>	<u>CA</u>	<u>90249</u>	<u>310-308-9180</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Los Angeles</u>	<u>CA</u>	<u>90056</u>	<u>310-308-9180</u>

OPTIONAL: FAX / E-MAIL ADDRESS  
alicedianne1@aol.com

## Treasurer(s)

NAME OF TREASURER

Alice Turner

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Gardena</u>	<u>CA</u>	<u>90249</u>	<u>310-329-6461</u>

NAME OF ASSISTANT TREASURER, IF ANY

Carolyn Mc Kie

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Paramount</u>	<u>CA</u>	<u>90723</u>	<u>310-749-2521</u>

OPTIONAL: FAX / E-MAIL ADDRESS

## 4. Verification

I have used all reasonable diligence in preparing and reviewing this 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 that the foregoing is true and correct.

Executed on January 25, 2021  
DATE

By \_\_\_\_\_  
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on \_\_\_\_\_  
DATE

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on \_\_\_\_\_  
DATE

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent

Executed on \_\_\_\_\_  
DATE

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent

**MV**

**Recipient Committee  
Campaign Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SHORT FORM

Statement covers period  
from July 1, 2020  
through December 31, 2020

**CALIFORNIA  
FORM 450**

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NAME OF COMMITTEE

African American Educators Political Action Committee

I.D. NUMBER

910689

**Expenditures Made**

- 1. Expenditures of \$100 or more made this period ..... \$ \_\_\_\_\_
- 2. Expenditures under \$100 made this period (Not itemized.) ..... 137
- 3. SUBTOTAL EXPENDITURES MADE THIS PERIOD ..... *Add Lines 1 + 2* \$ 137
- 4. Nonmonetary Adjustment ..... *From Line 8 Below* \_\_\_\_\_
- 5. Total expenditures made from previous statement ..... *Previous Summary Page, Line 6* \$ \_\_\_\_\_  
*(If this is the first statement for the calendar year, enter zero.)*
- 6. TOTAL EXPENDITURES MADE TO DATE ..... *Add Lines 3 + 4 + 5* \$ \_\_\_\_\_

**Contributions Received**

- 7. Monetary contributions received this period ..... \$ \_\_\_\_\_
- 8. Non-monetary contributions received this period ..... \_\_\_\_\_
- 9. Total contributions received from previous statement ..... *Previous Summary Page, Line 10* \$ \_\_\_\_\_  
*(If this is the first statement for the calendar year, enter zero.)*
- TOTAL CONTRIBUTIONS RECEIVED TO DATE ..... *Add Lines 7 + 8 + 9* \$ \_\_\_\_\_

**Current Cash Statement**

- 11. Beginning cash balance ..... *Previous Summary Page, Line 15* \$ 1358.73
- 12. Cash receipts this period ..... *Line 7 above* \_\_\_\_\_
- 13. Miscellaneous increases to cash ..... \$ \_\_\_\_\_
- 14. Cash expenditures this period ..... *Line 3 above* 137
- 15. ENDING CASH BALANCE THIS PERIOD ..... *Add Lines 11 + 12 + 13, then subtract Line 14* \$ 1221.73