

Semi-Annual Statement of No Activity

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2/8/2021 ①

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STATEMENT OF NO ACTIVITY

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CALIFORNIA FORM 425
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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
1360094

COMMITTEE NAME

Pasadena City College Faculty Association Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Pasadena	CA	91106	626-585-7261

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
facultyassociation@gmail.com

Treasurer(s)

NAME OF TREASURER

Mary-Erin Crook

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Pasadena	CA	91106	626-585-7261

NAME OF ASSISTANT TREASURER, IF ANY

Roger Marheine

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Pasadena	CA	91106	626-585-7261

OPTIONAL: FAX / E-MAIL ADDRESS
facultyassociation@gmail.com

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, 20__

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and the information contained herein 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 1/20/2021
DATE

B

information contained herein

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