

Recipient Committee Campaign Statement Cover Page

1/21/21
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LOS ANGELES COUNTY
2021 JAN 27 PM 3:41
CAMPAIGN FINANCE

CALIFORNIA FORM 460

Page 1 of 4

For Official Use Only

G 06612

Statement covers period
from 10-20-20
through 12/31-20

Date of election if applicable:
(Month, Day, Year)
11/03/20

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
 - (Also Complete Part 5)
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
 - (Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee
 - (Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report

3. Committee Information

I.D. NUMBER

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
*Temple City Education Association Fund
For Quality Schools*

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
DUARTE CA 91010 6263407167

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Ellen Laughlin

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
DUARTE CA 91010 6263407167

NAME OF ASSISTANT TREASURER, IF ANY
SAMANTHA JENNINGS

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
AZUSA CA 91772 6266099981

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 and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Executed on 1-18-21
Date

Executed on _____
Date

Executed on _____
Date

Executed on _____
Date

By _____

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

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

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

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Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10-20-20</u> through <u>12-31-20</u>	CALIFORNIA FORM 460
	Page <u>2</u> of <u>4</u>
	I.D. NUMBER <u>990765</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

TEMPLE CITY EDUCATION 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>1032.-</u>	\$ <u>2936.-</u>
2. Loans Received..... Schedule B, Line 3	_____	_____
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>1032.-</u>	\$ <u>2936.-</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	_____	_____
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>1032.-</u>	\$ <u>2936.-</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	\$ <u>0</u>	\$ <u>0</u>
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>400.-</u>	\$ <u>1,500.-</u>
7. Loans Made..... Schedule H, Line 3	_____	_____
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>400.-</u>	\$ <u>1,500.-</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	_____	_____
10. Nonmonetary Adjustment..... Schedule C, Line 3	_____	_____
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>400.-</u>	\$ <u>1,500.-</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
<u>1 / 1</u>	\$ _____
<u>1 / 1</u>	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>8355.78</u>
13. Cash Receipts..... Column A, Line 3 above	_____
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	<u>1032.-</u>
15. Cash Payments..... Column A, Line 8 above	<u>400.-</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>8,987.78</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.

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	\$ _____
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ _____

**Schedule E
Payments Made**

Amounts may be rounded to whole dollars.

Statement covers period from <u>10-17-20</u> through <u>12-31-20</u>	CALIFORNIA FORM 460
Page <u>3</u> of <u>4</u>	I.D. NUMBER <u>990765</u>

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

TEMPLE CITY EDUCATION 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
<u>Ellen Laughlin</u> <u>Duarte, CA 91010</u>	<u>MTG</u>	<u>Arrange interview 2/15, arrange interviews, coordinate meeting attend 3 interviews, lead deliberation and discussion of endorsement of S.B. candidates</u>	<u>150.-</u>
<u>Kula Hiertstedt</u> <u>Temple City, CA 91720</u>	<u>MTG</u>	<u>Meet - interview school board candidate 9/2, 9/4, 9/3 Deliberate and determine candidates to endorse</u>	<u>50.-</u>
<u>Christa (Marie) Taylor</u> <u>San Dimas, CA 91773</u>	<u>MTG</u>	<u>11</u>	<u>50.-</u>

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

SUBTOTAL \$ 2500.-

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ <u>400.00</u>
2. Unitemized payments made this period of under \$100	\$ <u>0</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>0</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ <u>400.00</u>

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>10-17-20</u> through <u>12-31-20</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>4</u>
	I.D. NUMBER <u>990765</u>

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NAME OF FILER

TEMPLE CITY EDUCATION ASSOCIATION FUND FOR QUALITY SCHOOLS

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| 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 |
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| 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
<u>Leila Herman</u> <u>Monrovia, CA 91016</u>	<u>MTG</u>	<u>Meet - interview school board candidates 9/2, 9/3, 9/4</u> <u>Deliberate and determine candidacy to endorse.</u>	<u>50. -</u>
<u>Lisa Hoiby</u> <u>ALHAMBRA, CA 91801</u>	<u>MTG.</u>	<u>"</u>	<u>50. -</u>
<u>Shelley Scanlan</u> <u>Temple City, CA 91780</u>	<u>MTG</u>	<u>"</u>	<u>50. -</u>

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

SUBTOTAL \$ 150. -

