



STATE OF CALIFORNIA
FAIR POLITICAL PRACTICES COMMISSION
1102 Q Street • Suite 3000 • Sacramento, CA 95811

September 15, 2020

Richard Martinez
[REDACTED]
[REDACTED]

Via email: [REDACTED]

Re: Complaint No. COM-09142020-01691; Richard Martinez

Dear Mr. Martinez:

The Enforcement Division of the Fair Political Practices Commission has received a sworn complaint against you. It appears the complainant is alleging you have violated the Political Reform Act's¹ campaign disclosure provisions.² The information filed in the complaint is below and any attachments filed are enclosed.

The person filing the Complaint is:

Emily Cameron
[REDACTED]
[REDACTED]
[REDACTED]

The violations alleged are:

Campaign Statements Not Filed

Mr. Richard Martinez, also on some campaign records as Richard Martinez Jr., received a cumulative total of \$8,028.22 in nonmonetary contributions from the Central Unified Teachers Association PAC (FPPC ID 2930305) during his 2016 campaign for Central Unified School District Trustee Area 6. Mr. Martinez did not report any financial information for his 2016 campaign.

Central Unified Teachers Association PAC reported several nonmonetary contributions to Mr. Martinez's campaign. Per the CUTA PAC reports, Mr. Martinez received \$5,726.19 in nonmonetary contributions during the 10/23/2016 - 12/31/2016 reporting period and \$2,302.03 during the 7/01/2016 - 10/22/2016 reporting period.

On July 25, 2016, Mr. Martinez filed a Form 470, declaring under penalty of perjury that he would raise and spend less than \$2,000 for his campaign.

¹ The Political Reform Act is contained in Government Code sections 81000 through 91014, and all statutory references are to this code. The regulations of the Fair Political Practices Commission are contained in Sections 18110 through 18997 of Title 2 of the California Code of Regulations, and all regulatory references are to this source.

² Please note that under the Act, you are required to retain accounts, records, bills, receipts and other original source documentation. These records should be readily available for any audit or investigation conducted by the Fair Political Practices Commission. (GC §§ 84104, 86110 and 90003; Regulations 18401, 18401.1.)

Any attempt by Central Unified Teachers Association PAC to retroactively claim this as a mistake when they meant to file an independent expenditure should be rejected as false. Mr. Martinez's wife, Judee Martinez, is president of the Central Unified Teachers Association (see evidence documentation). Pursuant to Regulations of the Fair Political Practices Commission, Title 2, Division 6, California Code of Regulations § 18225.7, "there is a rebuttable presumption that an expenditure funding a communication is made at the behest of a candidate or committee and not independent of the candidate or committee on whose behalf, or for whose benefit, the expenditure is made, under any of the following circumstances...(7) Candidate's Family. The person making the expenditure is established, run, staffed in a leadership role, or principally funded by an individual who is an immediate family member of the candidate."

Mr. Martinez is running for the same Central Unified School District Trustee seat once again in 2020, and has been endorsed again by the Central Unified Teachers Association. For his 2020 campaign, Mr. Martinez filed a Form 470 declaring that he would not receive nor spend more than \$2,000. It is imperative that the FPPC warn Mr. Martinez not to violate this protocol again for the 2020 campaign.

At this time, we have not made any determination about the allegation(s) made in the complaint. Within 14 days, the complainant will be notified of our intent to:

- investigate the allegations of the complaint;
- refer the complaint to another governmental agency;
- take no action on the complaint because, on the basis of the information provided, the Commission does not appear to have jurisdiction to investigate; or
- take no action on the complaint because the allegations of the complaint do not warrant the Commission's further action.

A copy of that letter will be forwarded to you. If you have any comments on the allegation(s), your comments must be submitted in writing directed to Tara Stock at the address shown above or by email to tstock@fppc.ca.gov. Please include the complaint number referenced above in your response.

Sincerely,



Galena West
Chief, Enforcement Division

GW:ts

Links showing Judee Martinez's role as president of Central Unified Teachers Association

1. LinkedIn page (<https://www.linkedin.com/in/judee-martinez-61ab147b/>)
2. ABC30 news article from 2016
(<https://abc30.com/central-unified-school-district-boundary-changes/1332846/>)
3. Fresno Bee news article from 2020
(<https://www.fresnobee.com/news/coronavirus/article244561002.html>)
4. Central Unified board meeting minutes from 2019
(<https://central.agendaonline.net/public/Meeting/Attachments/DisplayAttachment.aspx?AttachmentID=363792&IsArchive=1>)

**Officeholder and Candidate
Campaign Statement –
Short Form**

Date of election if applicable: (Month, Day, Year) <u>11-3-20</u>	<input type="checkbox"/> Amendment (Explain Below) _____ _____ By _____	Date Stamp FILED AUG 06 2020 FRESNO COUNTY CLERK _____ DEPUTY	CALIFORNIA FORM 470 For Official Use Only
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1. Statement Covers Calendar Year 20 20.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Richard Martinez,
 STREET ADDRESS _____

 CITY Fresno STATE CA ZIP CODE 93722
 AREA CODE/DAYTIME PHONE NUMBER _____ OPTIONAL: FAX / E-MAIL ADDRESS _____

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Central Unified School District Area 6
 JURISDICTION (LOCATION) Fresno County DISTRICT NUMBER (IF APPLICABLE) 6

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of th

Executed on 8-6-20 DATE

By _____

**Officeholder and Candidate
Campaign Statement -
Short Form**

FILED

Date Stamp
JUL 25 2016

By Q. Morales DEPUTY

FRESNO COUNTY CLERK

CALIFORNIA FORM 470

For Official Use Only

Date of election if applicable:
(Month, Day, Year)
11-8-16

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 16.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Richard Martinez, Jr

STREET ADDRESS

CITY: Fresno STATE: CA ZIP CODE: 93722

AREA CODE/DAYTIME PHONE NUMBER: 559 906-5399 OPTIONAL: FAX / E-MAIL ADDRESS: N/A

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Central Unified School District

JURISDICTION (LOCATION): Area 6 DISTRICT NUMBER (IF APPLICABLE): 6 Trustee

Board Member

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
<u>N/A</u>		
<u>N/A</u>		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the law

Executed on 7-25-16 DATE

**Recipient Committee
Campaign Statement – Short Form**

Type or print in ink.

SHORT FORM

FILED
Date Stamp
JUL 22 2016

CALIFORNIA FORM **450**

Page 1 of 2

For Official Use Only

By FRESNO COUNTY CLERK
D. [Signature]
DEPUTY

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.

Statement covers period
from 1-1-16
through 6-30-16

Date of election if applicable:
(Month, Day, Year)

1. Type of Recipient Committee:

- Ballot Measure Committee
- Primarily Formed
- Controlled
- Sponsored
- Primarily Formed Candidate/ Officeholder Committee
- General Purpose Committee
- Sponsored
- Small Contributor 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
- Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
2930305

COMMITTEE NAME
Central Unified Teachers Assn., PAC

CITY STATE ZIP CODE AREA CODE/PHONE
Fresno, CA 93722 559-349-7055

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) Julianna Stevens

NAME OF TREASURER

MAILING ADDRESS
Fresno CA 93723 559-349-7055

NAME OF ASSISTANT TREASURER, IF ANY
Laura Bolton

CITY STATE ZIP CODE AREA CODE/PHONE
Fresno CA 93722 559-285-3762

OPTIONAL: FAX / E-MAIL ADDRESS
julistevens@yahoo.com laura db17@sbcglobal.net

4. Verification

I have used all reasonable diligence in preparing and reviewing this under penalty of perjury under the laws of the State of California that

information herein is true and complete. I certify

Executed on 7-19-16
DATE

Executed on 7/19/16
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

**Recipient Committee
Campaign Statement
Summary Page**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SHORT FORM

Statement covers period
from 1/1/16
through 6/30/16

CALIFORNIA
FORM **450**

Page 2 of 2

NAME OF COMMITTEE

Central Unified Teachers Assn, PAC

I.D. NUMBER

2930305

Expenditures Made

1. Expenditures of \$100 or more made this period \$ Ø
2. Expenditures under \$100 made this period (Not itemized.) \$ 50.00
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD Add Lines 1 + 2 \$ \$ 50.00
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 \$ 50.00

Contributions Received

7. Monetary contributions received this period \$ Ø
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.)
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE Add Lines 7 + 8 + 9 \$ Ø

Current Cash Statement

11. Beginning cash balance Previous Summary Page, Line 15 \$ 330.06
12. Cash receipts this period Line 7 above Ø
13. Miscellaneous increases to cash \$ _____
14. Cash expenditures this period Line 3 above \$ 50.00
15. ENDING CASH BALANCE THIS PERIOD Add Lines 11 + 12 + 13, then subtract Line 14 \$ 280.06

**Recipient Committee
Campaign Statement
Cover Page**

DEPUTY *Stevens* COVER PAGE

DATE STAMP
NOV 10 2016
FRESNO, CA

CALIFORNIA
FORM **460**
of 8
For Official Use Only

DECLERED

Statement covers period
from 7/1/2013
through 10/22/2016

Date of election if applicable:
(Month, Day, Year)
11/8/2014

SEE INSTRUCTIONS ON REVERSE

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

- | | |
|--|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee |
| <input type="checkbox"/> State Candidate Election Committee | <input type="checkbox"/> Controlled |
| <input type="checkbox"/> Recall
<small>(Also Complete Part 5)</small> | <input type="checkbox"/> Sponsored
<small>(Also Complete Part 6)</small> |
| <input checked="" type="checkbox"/> General Purpose Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<small>(Also Complete Part 7)</small> |
| <input checked="" type="checkbox"/> Sponsored | |
| <input type="checkbox"/> Small Contributor Committee | |
| <input type="checkbox"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Pre-election Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<small>(Also file a Form 410 Termination)</small> | |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER 1293035

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Central Unified Teachers
Assn / PAC

CITY Fresno, CA STATE CA ZIP CODE 93722 AREA CODE/PHONE (559) 349-7055
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
julstevens@yahoo.com

Treasurer(s)

NAME OF TREASURER
Julianna Stevens

MAILR _____

CITY Fresno, CA STATE CA ZIP CODE 93722 AREA CODE/PHONE (559) 349-7055

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
julstevens@yahoo.com

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 correct.

Executed on 11/4/2016
Date _____

Executed on _____
Date _____

Executed on _____
Date _____

Executed on _____
Date _____

By _____
Signature of Treasurer or Assistant Treasurer

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

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period
from July 1, 2016
through 10/22/2016

CALIFORNIA
FORM **460**

Page 2 of 8

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Central Unified Teachers Assn/PAC

I.D. NUMBER
1293035

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>8,310.00</u>	\$ <u>280.06</u>
2. Loans Received.....	Schedule B, Line 3	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2	\$ <u>8,310.00</u>	\$ _____
4. Nonmonetary Contributions.....	Schedule C, Line 3	\$ <u>0</u>	\$ _____
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4	\$ <u>8,310.00</u>	\$ <u>280.06</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	\$ _____	\$ _____
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>2,564.87</u>	\$ <u>2,564.87</u>
7. Loans Made.....	Schedule H, Line 3	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS.....	Add Lines 6 + 7	\$ <u>2,564.87</u>	\$ <u>2,564.87</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>2,564.87</u>	\$ <u>2,564.87</u>

**Expenditure Limit Summary for State
Candidates**

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance.....	Previous Summary Page, Line 16	\$ <u>280.06</u>
13. Cash Receipts.....	Column A, Line 3 above	\$ <u>8,310.00</u>
14. Miscellaneous Increases to Cash.....	Schedule I, Line 4	\$ <u>61</u>
15. Cash Payments.....	Column A, Line 8 above	\$ <u>2,564.87</u>
16. ENDING CASH BALANCE.....	Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>6,025.80</u>

If this is a termination statement, Line 16 must be zero.

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.

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$ _____

Cash Equivalents and Outstanding Debts

18. Cash Equivalents.....	See instructions on reverse	\$ <u>0</u>
19. Outstanding Debts.....	Add Line 2 + Line 9 in Column B above	\$ <u>0</u>

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/16</u> through <u>10/20/16</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>8</u>
	I.D. NUMBER <u>1293035</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Assoc/PAC

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/8/16	CIA - Assn for better citizenship	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
	FPPC # 741941 TUVU	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,900		1,900 -
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$					<u>1,900</u>	

Schedule A Summary

- Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) \$ 1,900
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 6,410
- Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 8,300

*Contributor Codes
 IND – Individual
 COM – Recipient Committee (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period from <u>7/1/16</u> through <u>10/24/16</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>8</u>
I.D. NUMBER 1293035	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Central Unified Teachers Assn / PAC

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	<i>Richard Martine Z Central Unified Trustee board Area 6</i>	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	<i>signs, voter data, phones workpieces.</i>	<i>1,964.02</i>	<i>1,964.02</i>	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
	<i>Phillip Cervantes Central Unified Trustee board Area 3</i>	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	<i>voter data, phones,</i>	<i>512.84</i>	<i>512.84</i>	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$					<i>2,476.87</i>	

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$ 2,476.87
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 88.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)..... TOTAL... \$ 2564.87

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>July 1, 2016</u> through <u>Oct. 22, 2016</u>	CALIFORNIA FORM 460
	Page <u>5</u> of <u>8</u>
	I.D. NUMBER <u>1293035</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central United Teachers Assn / PAC

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>Fresno Alerts</u>			
<u>Express Graphics</u> <u>Fresno, CA 93711</u>	<u>CMP</u>	<u>Signs; Web Pages</u>	<u>1,000.00</u>
<u>CTA</u> <u>Sacramento, CA 95834-3757</u>		<u>CTA voter data</u>	<u>210.00</u>

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

SUBTOTAL \$ 1,210.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ <u>2,476.87</u>
2. Unitemized payments made this period of under \$100	\$ <u>88.00</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>2,564.87</u>

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

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period
from Ville
through 10/22/16

CALIFORNIA FORM **460**

Page 6 of 8

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Assn/PAC

I.D. NUMBER
1293035

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/balot 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>CTA</u> <u>Sacramento, CA 95834 - 3757</u>	<u>PHO</u>	<u>phone bank phones</u>	<u>450.00</u>
<u>Express Graphics</u> <u>Fresno, CA 93711</u>	<u>LIT</u>	<u>Walk pieces.</u>	<u>451.18</u>
<u>Peerless Print & Graphics</u> <u>Clarks, CA</u>	<u>LIT</u>	<u>Mailers</u>	<u>1,056.31</u>
<u>Jude Martinez</u>	<u>CMP</u>	<u>food for precinct walk</u> <u>materials for walk kits</u>	<u>365.69</u>
			<u>1,266.87</u>

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

SUBTOTAL \$ ~~1,056.31~~

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period from <u>7/1/16</u> through <u>10/22/16</u>	CALIFORNIA FORM 460
	Page <u>7</u> of <u>8</u>
	I.D. NUMBER <u>1293035</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central United Teacher's Assn/PA

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Judee Martinez

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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<u>Judee Martinez</u> <u>Fresno, Ca 93722</u>	<u>CMP</u>	<u>food for precinct walk,</u> <u>materials for walk kits</u>	<u>365.69</u>

Attach additional information on appropriately labeled continuation sheets.

TOTAL * \$ 365.69

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period
from 7/1/16
through 10/22/16

CALIFORNIA FORM **460**
Page 8 of 8
I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
8/31	ECCU Dividend	Interest	1.11
9/30	ECCU - Dividend	Interest	0.50

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

1.61

Schedule I Summary

- 1. Itemized increases to cash this period. \$ 0
- 2. Unitemized increases to cash of under \$100 this period. \$ 0.61
- 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0
- 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) TOTAL \$ 0.61

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Central Unified Teachers Assn/PAC		Date of This Filing 11/7/16	FILE	Date Stamp NOV 08 2016	CALIFORNIA FORM 497 <input checked="" type="checkbox"/> For Official Use Only
AREA CODE/PHONE NUMBER (559) 349-7055	I.D. NUMBER (if applicable) 1293035	Report No. 1			
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	FRESNO COUNTY CLERK		
CITY Fresno	STATE CA	ZIP CODE 93722	By <i>Manick</i>		DEPUTY
		No. of Pages _____			

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
11/4/16	Express Graphics	Richard Martinez Board Trustee Area 6	\$ 1,000	11/8/16
11/7/16	Art-Trio Signs Fresno, CA 93722-5072	Phillip Cervantes Board Trustee Area 3	\$ 1,000	11/8/16

Reason for Amendment: _____

**Recipient Committee
Campaign Statement
Cover Page**

FILED

COVER PAGE

CALIFORNIA FORM **460**

Date Stamp
JAN 24 2017

Page 1 of 9

For Official Use Only

Statement covers period
from 10/23/16
through 12/31/16

Date of election if applicable:
(Month, Day, Year)
11/8/16 By Shanick

FRESNO COUNTY CLERK
DEPUTY

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
 - Primary Formed Ballot Measure Committee
 - Controlled
 - Sponsored (Also Complete Part 5)
 - Primary Formed Candidate/Officeholder Committee (Also Complete Part 7)

- 2. Type of Statement:**
- Protection 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: 1293030

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE):
Central United Teachers Assn / PAC

CITY: Fresno STATE: CA ZIP CODE: 93722 AREA CODE/PHONE: (559)

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX:
349-7055

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

OPTIONAL FAX/E-MAIL ADDRESS:
julistevens@yahoo.com

Treasurer(s)

NAME OF TREASURER:
Julianna Stevens

CITY: Fresno STATE: CA ZIP CODE: 93723 AREA CODE/PHONE: (559)

NAME OF ASSISTANT TREASURER, IF ANY:
349-7055

MAILING ADDRESS:

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

OPTIONAL FAX/E-MAIL ADDRESS:
julistevens@yahoo.com

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to it certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Executed on 1/22/17

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

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/23/16</u> through <u>12/31/16</u>	CALIFORNIA FORM 460
	Page <u>2</u> of <u>9</u>
ID NUMBER 1293035	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Assn/PAC

Contributions Received

	Column A TOTAL THIS PERIOD FROM APPROVED CONTRIBUTOR	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ <u>7180.00</u>	\$ <u>15,490.00</u>
2. Loans Received Schedule B, Line 3	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>7180.00</u>	\$ <u>15,490.00</u>
4. Nonmonetary Contributions Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>7180.00</u>	\$ <u>15,490.00</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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A	Column B
6. Payments Made Schedule E, Line 4	\$ <u>100.00</u>	\$ <u>2,714.87</u>
7. Loans Made Schedule H, Line 3	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>100.00</u>	\$ <u>2,714.87</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment Schedule G, Line 3	\$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>100.00</u>	\$ <u>2,714.87</u>

**Expenditure Limit Summary for State
Candidates**

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yyyy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ <u>6,035.80</u>
13. Cash Receipts Column A, Line 3 above	\$ <u>1,180.00</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$ <u>1.91</u>
15. Cash Payments Column A, Line 8 above	\$ <u>100.00</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14. Also deduct Line 15	\$ <u>13,107.71</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 summary statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ <u>NA</u>
---	--------------

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>NA</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>NA</u>

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>10/23/14</u> through <u>12/31/14</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>9</u>
I.D. NUMBER <u>1293035</u>	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Central Unified Teachers Assn / PAC

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$						

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 7,180.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 7,180.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 7,180.00

*Contributor Codes
 IND – Individual
 COM – Recipient Committee
 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period from <u>10/23/16</u> through <u>12/31/16</u>	CALIFORNIA FORM 460 Page <u>4</u> of <u>9</u> I.D. NUMBER <u>1293035</u>
--	---

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central United Teachers Assn / PAC

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
<u>12/17/16</u>	<u>Richard Martinez</u> <u>Central United Trustee</u> <u>Board Area 6</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	<u>sign frames labor</u>	<u>200.00</u>	<u>200.00</u>	
<u>12/30/16</u>	<u>Richard Martinez</u> <u>Central United Trustee</u> <u>Board Area 6</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	<u>sign frames labor</u>	<u>200.00</u>	<u>200.00</u>	
<u>11/1/16</u>	<u>Phillip Cervantes</u> <u>Central United Trustee</u> <u>Board Area 3</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	<u>signs - campaign literature</u>	<u>1000.00</u>	<u>1000.00</u>	
SUBTOTAL \$					<u>1400.00</u>	

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ _____
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ _____
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)..... TOTAL.. \$ _____

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCH

Statement covers period from <u>10/23/16</u> through <u>12/31/16</u>	CALIFORNIA FORM 4
Page <u>5</u> of <u>6</u>	I.D. NUMBER <u>129302</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Assn/PAC

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELEC TO DA (IF REQD)
<u>12/21/16</u>	<u>Richard Martinez</u> <u>Central Unified Trustee</u> <u>Board Area 6</u>	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	<u>Mailers</u>	<u>\$2972.50</u>	<u>2972.50</u>	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<u>12/21/16</u>	<u>Phillip Cervantes</u> <u>Central Unified Trustee</u> <u>Board Area 3</u>	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	<u>Mailers</u>	<u>\$2972.50</u>	<u>2972.50</u>	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				

SUBTOTAL \$

5945.00

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 7345
2. Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)..... TOTAL.. \$ 7345

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/23/10</u> through <u>12/31/10</u>	CALIFORNIA FORM 460
	Page <u>6</u> of <u>9</u>
	I.D. NUMBER <u>1293035</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Assn/PAC

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>Fresno County Clerk</u> <u>Fresno, CA 9372</u>		<u>Late Filing Fee</u>	<u>100.00</u>

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

SUBTOTAL \$ 100.00

Schedule E Summary

- | | | |
|---|-----------------|---------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals)..... | \$ | <u>100.00</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>100.00</u> |

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period
 from 10/23/10
 through 12/31/10

SCHEDULE G
 CALIFORNIA FORM **460**

Page 7 of 9

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Assn/PAC

I.D. NUMBER

1293035

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Judee Martinez

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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<u>Judee Martinez</u> <u>FRESNO, CA 93128</u>	<u>CMP</u>	<u>Get out the Vote Food</u>	<u>196.12</u>
<u>"</u>	<u>"</u>	<u>Food and Drink</u>	<u>244.53</u>
<u>"</u>	<u>"</u>	<u>Food and Drink Postage</u>	<u>1373.84</u>

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period
 from 10/23/16
 through 12/31/16

SCHEDULE G
 CALIFORNIA FORM **460**
 Page 8 of 9
 I.D. NUMBER
1293035

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Assn / PAC

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Laura Bolton

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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<u>Laura Bolton</u> <u>Fresno, CA 93722</u>	<u>CMP</u>	<u>Campaign Help Incentives</u>	<u>250.00</u>

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or

**Recipient Committee
Campaign Statement
Cover Page**

<p>FILE</p> <p>Date Stamp</p> <p>OCT 24 2017</p> <p>FRESNO COUNTY CLERK</p> <p>By <i>Sharrick</i></p> <p>DEPUTY</p>	<p>CALIFORNIA FORM 460</p>
	<p>Page <u>1</u> of <u>7</u></p> <p>For Official Use Only</p>

Statement covers period
from 7/1/2016
through 10/22/2016

Date of election if applicable:
(Month, Day, Year)
11/8/2016

SEE INSTRUCTIONS ON REVERSE

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

<input type="checkbox"/> Officeholder, Candidate Controlled Committee	<input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="radio"/> State Candidate Election Committee	<input type="radio"/> Controlled
<input type="radio"/> Recall <small>(Also Complete Part 5)</small>	<input type="radio"/> Sponsored <small>(Also Complete Part 6)</small>
<input checked="" type="checkbox"/> General Purpose Committee	<input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee <small>(Also Complete Part 7)</small>
<input checked="" type="radio"/> Sponsored	
<input type="radio"/> Small Contributor Committee	
<input type="radio"/> Political Party/Central Committee	

2. Type of Statement:

<input checked="" type="checkbox"/> Preelection Statement	<input type="checkbox"/> Quarterly Statement
<input checked="" type="checkbox"/> Semi-annual Statement	<input type="checkbox"/> Special Odd-Year Report
<input type="checkbox"/> Termination Statement <small>(Also file a Form 410 Termination)</small>	
<input checked="" type="checkbox"/> Amendment (Explain below) <u>Correction of previous report</u>	

3. Committee Information

I.D. NUMBER _____

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Central Unified Teachers Association Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Fresno</u>	<u>CA</u>	<u>93722</u>	<u>559349-7055</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
_____	_____	_____	_____

OPTIONAL: FAX / E-MAIL ADDRESS
julistevens@yahoo.com

Treasurer(s)

NAME OF TREASURER
Julianna Stevens

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Fresno</u>	<u>CA</u>	<u>93723</u>	<u>5593497055</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
_____	_____	_____	_____

OPTIONAL: FAX / E-MAIL ADDRESS
julistevens@yahoo.com

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 a

Executed on <u>10/22/17</u> Date	By _____
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

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period		CALIFORNIA FORM 460
from	7/1/16	
through		Page <u>2</u> of <u>7</u>
		I.D. NUMBER 1293035

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ 15,490.00	\$ 15,490.00
2. Loans Received..... Schedule B, Line 3	0	0
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ 15,490.00	\$ 15,490.00
4. Nonmonetary Contributions..... Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ 15,490.00	\$ 15,490.00

**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	\$ _____	\$ _____
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	\$ 2814.87	\$ 2864.87
7. Loans Made..... Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ 2814.87	\$ 2864.87
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	0	0
10. Nonmonetary Adjustment..... Schedule C, Line 3	0	0
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ 2814.87	\$ 2864.87

**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
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ 280.06
13. Cash Receipts..... Column A, Line 3 above	15,490.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	.61
15. Cash Payments..... Column A, Line 8 above	2814.87
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 12,955.80

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	\$ 0
--	------

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 A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/16</u> through <u>10/22/16</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>7</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER
1293035

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/8/16	CTA Association for Better Citizenship #741941 Burlingame 94010	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1900.00	1900.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$ 1900.00

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$ <u>1900.00</u>
2. Amount received this period – unitemized monetary contributions of less than \$100	\$ <u>13,590.00</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....	TOTAL \$ <u>15,490.00</u>

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period from <u>7/1/2016</u> through <u>10/22/2016</u>	CALIFORNIA FORM 460
Page <u>4</u> of <u>7</u>	I.D. NUMBER 1293035

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Association PAC

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/17	Richard Martinez Fresno, CA 93722	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Signs, literature, phonebanking, data	2302.03		
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/17	Phillip Cervantes Fresno, CA 93722	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Phonebanking, data	512.84		
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				2814.87		

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 2814.87
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL .. \$ 2814.87**

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/16	
through	10/22/16	Page 5 of 7
NAME OF FILER		I.D. NUMBER 1293035

SEE INSTRUCTIONS ON REVERSE

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
Express Graphics Fresno, CA 93711	CMP		1000.00
California Teachers Association Burlingame, CA 94010		Voter data	210.00
California Teachers Association Burlingame, CA 94010	PHO		450.00

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

SUBTOTAL \$ 1660.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 2690.32
2. Unitemized payments made this period of under \$100	\$ 124.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 2814.87

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/16	
through	10/22/16	Page <u>6</u> of <u>7</u>
NAME OF FILER		I.D. NUMBER 1293035

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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
Express Graphics Fresno, CA 93711	LIT		451.18
Judee Martinez Fresno, CA 93722	CMP		329.14
Laura Bolton Fresno, CA 93722	PHO		250.00

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

SUBTOTAL \$ 1030.32

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period from <u>7/1/16</u> through <u>10/22/16</u>	CALIFORNIA FORM 460
	Page <u>7</u> of <u>7</u>

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

I.D. NUMBER
1293035

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 0.00

Schedule I Summary

1. Itemized increases to cash this period.	\$ 0
2. Unitemized increases to cash of under \$100 this period.	\$.61
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ 0
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$.61

**Recipient Committee
Campaign Statement
Cover Page**

FILE
Date Stamp
NOV 29 2017
FRESNO COUNTY CLERK
Sharrick
DEPUTY

CALIFORNIA FORM **460**

Page 1 of 6
For Official Use Only

Statement covers period
from 10/23/2016
through 12/31/2016

Date of election if applicable:
(Month, Day, Year)
11/08/2016 By _____

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)
Correction of Previous Report
- Quarterly Statement
- Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1293035

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Central Unified Teachers Association Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Fresno CA 93722 559-349-7055

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
julistevens@yahoo.com

Treasurer(s)

NAME OF TREASURER
Julianna Stevens
MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Fresno CA 93723 559-349-7055

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

I declare that this statement is true and complete. I

Executed on 11/27/2017
Date

Executed on _____
Date

Executed on _____
Date

Executed on _____
Date

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

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/23/2016</u>	CALIFORNIA FORM 460
through <u>12/31/2016</u>	
Page <u>2</u> of <u>6</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Association Political Action Committee

I.D. NUMBER

1293035

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>0</u>	\$ <u>15490.00</u>
2. Loans Received..... Schedule B, Line 3	<u>0</u>	<u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>0</u>	\$ <u>15490.00</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	<u>0</u>	<u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>0</u>	\$ <u>15490.00</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	\$ _____	\$ _____
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>7541.12</u>	\$ <u>10405.99</u>
7. Loans Made..... Schedule H, Line 3	<u>0</u>	<u>0</u>
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>7541.12</u>	\$ <u>10405.99</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	<u>0</u>	<u>0</u>
10. Nonmonetary Adjustment..... Schedule C, Line 3	<u>0</u>	<u>0</u>
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>7541.12</u>	\$ <u>10.405.99</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
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>12955.80</u>
13. Cash Receipts..... Column A, Line 3 above	<u>0</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	<u>1.91</u>
15. Cash Payments..... Column A, Line 8 above	<u>7541.12</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>5416.59</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>
--	-------------

Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$ <u>0</u>
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ <u>0</u>

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period from <u>10/23/2016</u> through <u>12/31/2016</u>		CALIFORNIA FORM 460
Page <u>3</u> of <u>6</u>		
NAME OF FILER Central Unified Teachers Association Political Action Committee		I.D. NUMBER 1293035

SEE INSTRUCTIONS ON REVERSE

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2017	Richard Martinez <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	literature mailers	3470.56		
10/22/2017	Phillip Cervantes Fresno, CA 93722 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	signs, literature mailers	4070.56		
	 <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL \$				7541.12		

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 7541.12
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL.. \$ 7541.12**

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	10/23/2016	
through	12/31/2016	Page <u>4</u> of <u>6</u>
I.D. NUMBER		1293035

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Central Unified Teachers Association Political Action Committee

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
Art Trio Fresno, CA 93722	CMP		1000.00
Four Waters Media West Sacramento, CA 95691	CMP		5945.00
Jim Hayes Fresno, Ca 93723	CMP		200.00

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

SUBTOTAL \$ 7145.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	7541.12
2. Unitemized payments made this period of under \$100.....	\$	0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$	7541.12

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>10/23/2016</u> through <u>12/31/2016</u>	CALIFORNIA FORM 460
	Page <u>5</u> of <u>6</u>
	I.D. NUMBER 1293035

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Association Political Action Committee

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
David Fowler Fresno, Ca 93723	CMP		200.00
Judee Martinez Fresno, CA 93722	CMP		196.12

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

SUBTOTAL \$ 396.12

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period
from 10/23/2016
through 12/31/2016

**CALIFORNIA
FORM 460**

Page 6 of 6

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Central Unified Teachers Association Political Action Committee

I.D. NUMBER
1293035

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 0

Schedule I Summary

1. Itemized increases to cash this period.	\$ <u>0</u>
2. Unitemized increases to cash of under \$100 this period.	\$ <u>1.91</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ <u>0</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ <u>1.91</u>

**Recipient Committee
Campaign Statement
Cover Page**

FILED
Date Stamp
MAR 29 2018
COUNTY CLERK

CALIFORNIA FORM 460
Page 1 of 6
For Official Use Only

Statement covers period
from 10/23/16
through 12/31/16

Date of election if applicable:
(Month, Day, Year)
11/8/16 By F

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 5)
- 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)
3rd correction of previous reports
- Quarterly Statement
- Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1293035

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Central Unified Teachers Association Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Fresno</u>	<u>CA</u>	<u>93722</u>	<u>5593497055</u>

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
Julianna Stevens

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Fresno</u>	<u>CA</u>	<u>93723</u>	<u>5593497055</u>

NAME OF ASSISTANT TREASURER, IF ANY

Laura Bolton

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Fresno</u>	<u>CA</u>	<u>93722</u>	<u>5592853762</u>

OPTIONAL: FAX / E-MAIL ADDRESS

julistevens@yahoo.com

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 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.

Executed on 3/28/18
Date

By _____

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

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/23/16</u>	CALIFORNIA FORM 460
through <u>12/31/16</u>	

Page 2 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Central Unified Teachers Association Political Action Committee

I.D. NUMBER
1293035

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>0</u>	\$ <u>15490.00</u>
2. Loans Received..... Schedule B, Line 3	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>0</u>	\$ <u>154990.00</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>0</u>	\$ <u>15490.00</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	\$ _____	\$ _____
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>9259.49</u>	\$ <u>12124.36</u>
7. Loans Made..... Schedule H, Line 3	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>9259.49</u>	\$ <u>12124.36</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>9259.49</u>	\$ <u>12124.36</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
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>12955.80</u>
13. Cash Receipts..... Column A, Line 3 above	\$ <u>0</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$ <u>1.91</u>
15. Cash Payments..... Column A, Line 8 above	\$ <u>9259.49</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>3698.22</u>

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$ <u>0</u>
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ <u>0</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.

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period		CALIFORNIA FORM 460
from	10/23/16	
through	12/31/16	Page <u>3</u> of <u>6</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Association Political Action Committee

I.D. NUMBER

1293035

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
- 12/31/16	Richard Martinez Fresno, CA 93722 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	signs, literature mailers, etc	5726.19		
-12/31/16	Phillip Cervantes (Fresno, CA 93722 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	literature mailers	3533.30		
	 <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL \$				9259.49		

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 9259.49
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL.. \$ 9259.49**

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/23/16	
through	12/31/16	Page <u>4</u> of <u>6</u>
NAME OF FILER		I.D. NUMBER
Central Unified Teachers Association Political Action Committee		1293035

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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
Art Trio Fresno, CA 93722	CMP		1000.00
Four Waters Media West Sacramento, CA 95619	CMP		5945.00
Jim Hayes Fresno, CA 93723	CMP		200.00

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

SUBTOTAL \$ 7145.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	9259.49
2. Unitemized payments made this period of under \$100.....	\$	0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$	9259.49

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/23/16	
through	12/31/16	Page 5 of 6
NAME OF FILER		I.D. NUMBER
Central Unified Teachers Association Political Action Committee		1293035

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Central Unified Teachers Association Political Action Committee

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
David Fowler Fresno, CA 93723	CMP			200.00
Judee Martinez Fresno, CA 93722	CMP			1814.49
Fresno Counto Clerks Office Fresno, CA 93721			Late Filing Fee	100.00

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

SUBTOTAL \$ 2114.49

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period		CALIFORNIA FORM 460
from	10/23/16	
through	12/31/16	Page <u>6</u> of <u>6</u>

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Central Unified Teachers Association Political Action Committee

I.D. NUMBER
1293035

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule I Summary

1. Itemized increases to cash this period.	\$	0
2. Unitemized increases to cash of under \$100 this period.	\$	1.91
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$	0
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$	1.91



STATE OF CALIFORNIA
FAIR POLITICAL PRACTICES COMMISSION
1102 Q Street • Suite 3000 • Sacramento, CA 95811

September 28, 2020

Emily Cameron

Via email: [REDACTED]

RE: FPPC Case No. 2020-00799; Richard Martinez

Dear Ms. Cameron:

This letter is to notify you that the Enforcement Division of the Fair Political Practices Commission will investigate the allegation(s), under the jurisdiction of the Commission, of the sworn complaint you submitted in the above-referenced matter. You will next receive notification from us upon final disposition of the case. However, please be advised that at this time we have not made any determination about the validity of the allegation(s) you have made or about the culpability, if any, of the person(s) you identify in your complaint.

Thank you for taking the time to bring this matter to our attention. If you have any questions regarding this letter, please contact Tara Stock at tstock@fppc.ca.gov.

Sincerely,

Galena West, Chief
Enforcement Division

GW/ts

cc: Richard Martinez