

Recipient Committee Campaign Statement -- Short Form

SEE INSTRUCTIONS ON REVERSE

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

Statement covers period from January 1, 2021 through June 30, 2021

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

Date Stamp
FILED
REGISTRAR OF VOTERS
FEB 01 2022
BY DONNA M. JOHNSTON
DEPUTY CLERK

CALIFORNIA FORM **450**
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For Official Use Only

1. Type of Recipient Committee:

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

2. Type of Statement:

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

3. Committee Information

COMMITTEE NAME _____ I.D. NUMBER 1032267

Live Oak Teachers Association Education Improvement Fund

Treasurer(s)

NAME OF TREASURER
Jill Wilhelm
MAILING ADDRESS _____

STREET ADDRESS (NO P.O. BOX) _____

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

Sutter CA 95982 5307015797

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

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

OPTIONAL: FAX / E-MAIL ADDRESS _____

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

Sutter CA 95982 5307015797

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 the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true, and correct.

Executed on 1/16/2022 DATE

By Jill Wilhelm SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____ DATE

By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ DATE

By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ DATE

By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

NAME OF COMMITTEE

Live Oak Teachers Association Education Improvement Fund

Statement covers period
from January 1, 2021
through June 30, 2021

**CALIFORNIA
FORM 450**

SHORT FORM

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I.D. NUMBER
1302267

Expenditures Made

1. Expenditures of \$100 or more made this period \$ 0
2. Expenditures under \$100 made this period (Not itemized.) 0
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD \$ 0
Add Lines 1 + 2
4. Nonmonetary Adjustment 0
From Line 8 Below
5. Total expenditures made from previous statement \$ 0
(If this is the first statement for the calendar year, enter zero.)
Previous Summary Page, Line 6
6. TOTAL EXPENDITURES MADE TO DATE \$ 0
Add Lines 3 + 4 + 5

Contributions Received

7. Monetary contributions received this period \$ 0
8. Non-monetary contributions received this period 0
9. Total contributions received from previous statement \$ 0
(If this is the first statement for the calendar year, enter zero.)
Previous Summary Page, Line 10
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE \$ 0
Add Lines 7 + 8 + 9

Current Cash Statement

11. Beginning cash balance \$ 4779
Previous Summary Page, Line 15
12. Cash receipts this period 0
Line 7 above
13. Miscellaneous increases to cash \$ 0
14. Cash expenditures this period 0
Line 3 above
15. ENDING CASH BALANCE THIS PERIOD \$ 4779
Add Lines 11 + 12 + 13, then subtract Line 14