

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.

Date Stamp	CALIFORNIA FORM 450
CITY CLERK OFFICE 2020 AUG -3 P 2:34	
Page <u>1</u> of <u>2</u>	For Official Use Only

Statement covers period from <u>1-1-20</u> through <u>6-30-20</u>	Date of election if applicable: (Month, Day, Year) <u>N/A</u>
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1. Type of Recipient Committee:

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

2. Type of Statement

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

3. Committee Information

COMMITTEE NAME <u>CONCERNED CITIZENS OF MONTEREY PARK</u>		I.D. NUMBER <u>1294816</u>
STREET ADDRESS (NO P.O. BOX) <u>1142 KENTON DR,</u>		
CITY <u>MONTEREY PARK</u>	STATE <u>CA</u>	ZIP CODE <u>91755</u>
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX <u>P.O. Box 633</u>		
CITY <u>MONTEREY PARK</u>	STATE <u>CA</u>	ZIP CODE <u>91754</u>
OPTIONAL: FAX / E-MAIL ADDRESS		

Treasurer(s)

NAME OF TREASURER <u>JEFFERY SU</u>			
MAILING ADDRESS <u>716 CAREZA DR,</u>			
CITY <u>MONTEREY PARK</u>	STATE <u>CA</u>	ZIP CODE <u>91754</u>	AREA CODE/PHONE <u>323-266-6138</u>
NAME OF ASSISTANT TREASURER, IF ANY <u>TILDA DE WOLFE</u>			
MAILING ADDRESS <u>1142 KENTON DR,</u>			
CITY <u>MONTEREY PARK</u>	STATE <u>CA</u>	ZIP CODE <u>91755</u>	AREA CODE/PHONE <u>626-280-0479</u>
OPTIONAL: FAX / E-MAIL ADDRESS			

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7-22-20
DATE

Executed on _____
DATE

Executed on _____
DATE

Executed on _____
DATE

By Tilda De Wolfe, Assistant Treasurer
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

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SHORT FORM

Statement covers period from <u>1-1-20</u> through <u>6-30-20</u>	CALIFORNIA FORM 450
	Page <u>2</u> of <u>2</u>
	I.D. NUMBER <u>1294816</u>

NAME OF COMMITTEE

CONCERNED CITIZENS OF MONTEREY PARK

Expenditures Made

1. Expenditures of \$100 or more made this period	\$ <u>0</u>
2. Expenditures under \$100 made this period (Not itemized.)	<u>80,00</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD..... Add Lines 1 + 2	\$ <u>80,00</u>
4. Nonmonetary Adjustment..... From Line 8 Below	<u>-</u>
5. Total expenditures made from previous statement Previous Summary Page, Line 6 (If this is the first statement for the calendar year, enter zero.)	\$ <u>0</u>
6. TOTAL EXPENDITURES MADE TO DATE Add Lines 3 + 4 + 5	\$ <u>80,00</u>

Contributions Received

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

Current Cash Statement

11. Beginning cash balance Previous Summary Page, Line 15	\$ <u>721,-</u>
12. Cash receipts this period..... Line 7 above	<u>0</u>
13. Miscellaneous increases to cash	\$ <u>0</u>
14. Cash expenditures this period..... Line 3 above	<u>80,-</u>
15. ENDING CASH BALANCE THIS PERIOD Add Lines 11 + 12 + 13, then subtract Line 14	\$ <u>641</u>

Tilda De Wolfe
CCMP
P.O. Box 633
Monterey Park, CA
91754

CITY CLERK OFFICE

2020 AUG - 3 P 2:34

CITY OF MONTEREY PARK

CA Form
450

City Clerk's Office - Mr. Vincent Chang
320 W. Newmark Ave,
Monterey Park, CA
91754-2896

SANTA ANA CA 926

23 JUL 2020 PM 4 L



91754-289699

