Recipient Committee Campaign Statement Cover Page					Pate Stamp	C/	ALIFORNIA 460
		1	Statement covers period January 1 2020	Date of election if applicable (Month, Day, Year)	JUL 0 8 2020	Pa	For Official Use Only
SEE INSTRUCTIONS ON REVERSE		throu	ugh <u>June 30 2020</u>	Nov 3 2020	ALBANY CITY CLE	RK	
1. Type of Recipient Committee: All Comm	ittees – Coi	nplete F	Parts 1, 2, 3, and 4.	2. Type of Statement:			
Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	(A (A	ommitt Cont Sport So Complete rimarily	rolled isored le Part 6) Formed Candidate/ der Committee	Preelection Statement Semi-annual Statemen Termination Statemen (Also file a Form 4107 Amendment (Explain 8	nt t Termination)	Quarterly Special Oc	Statement Id-Year Report
3. Committee Information	1	NUMBE 60882	R	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO CO	MITTEE)	00002		NAME OF TREASURER			
Albany Teachers Association PAC				Miriam Walden			
				MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)				CITY	STATE Z	P CODE	AREA CODE/PHONE
CITY STATE	ZIP COD		100				
		<u></u>	AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY		
Berkeley CA MAILING ADDRESS (IF DIFFERENT) NO. AND STREET O	94703 R P.O. BOX			MAILING ADDRESS	######################################		
2230 California Street				MAILING ADDINESS			
CITY STATE	ZIP COD	E	AREA CODE/PHONE	CITY	STATE ZI	P CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS				OPTIONAL: FAX / E-MAIL ADDRI	ESS		
					BICUITO TO THE TOTAL THE T		
Verification							
I have used all reasonable diligence in preparing an	d reviewing	this st	atement and to the best of my	knowledge the information contained	I herein and in the attached	schedules	s is true and complete. I
certify under penalty of perjury under the laws of the	State of C	amornia	a that the tokedoling is true and	a collect			
Executed on July 3 2020			E	Sociatore of treasurer or assistant	(TDESITAL		
Executed on			D _v	Constitution (Federal of Massault)	· · · · · · · · · · · · · · · · · · ·		
Date	No.		BySignature of Con	strolling Officeholder, Candidate, State Measure Pri	oponent or Responsible Officer of Sp	consor	
Executed on			Ву	Signature of Controlling Officeholder, Candidate, S	Stata Maggira Propagat		
Executed on			D.,	organization of Controlling Unicertoidel, Carididate, C	этате меазыте пторолеги		
Date Date			Ву	Signature of Controlling Officeholder Candidate S	State Measure Propopert		

FPPC Form 460 (Jan/2016))

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from January 1 2020	california 460					
through June 30 2020	Page 2 of 4					
	I.D. NUMBER					
	1360882					

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Albany Teachers Association PAC

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$\frac{0}{690.00}	\$\frac{690.00}{0}\$ \$\frac{690.00}{0}\$	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions \$ Received \$ 21. Expenditures \$ Made \$
Expenditures Made 6. Payments Made	\$\frac{40.00}{0}\$ \$\frac{40.00}{0}\$ \frac{0}{0}\$ \$\frac{40.00}{0}\$	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$\frac{32.09}{690.00}\frac{0}{0}\frac{40.00}{682.09}\frac{682.09}{0}\frac{682.09}{0}\frac{0}{0}\frac{1}{0}\fra	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. FPPC Form 460 (Jan/2016))
			FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule A Monetary Contributions Received		Amoui to	nts may be rounded o whole dollars.	from January 1 20	1 2020		california 460	
SEE INSTRUCTI	IONS ON REVERSE			through June 30 2	2020	Page	of 4	
NAME OF FILER Albany Teac	thers Association PAC	11.19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		-		I.D. N 13608	UMBER 82	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)	
4/17/20	Miriam Walden	☑ IND □ COM □ OTH □ PTY □ SCC	Teacher, AUSD	\$300.00	300.00		300.00	
5/11/20	Sean Morris	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher, AUSD	\$390.00	390.00		390.00	
		OND COM OTH PTY SCC						
		OTH PTY SCC					,	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
			SUBTOTAL \$					
. Amount red (Include all . Amount red . Total mone!	A Summary ceived this period – itemized monetary contributions Schedule A subtotals.) ceived this period – unitemized monetary contribution tary contributions received this period.	ns of less than	\$100\$ <u>0</u>		IND - COM OTH PTY	other) Other – Politica	ient Committee than PTY or SCC) (e.g., business entity)	
(Add Lines	1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1.) TOTAL \$ ⁶⁹⁰	.00		FPP	C Form 460 (Jan/2016))	

FPPC Form 460 (Jan/2016))
FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Schedule E Payments Made	Amounts may be rounded to whole dollars.				Statement covers per from January 1 2020		california 460		
SEE INSTRUCTIONS ON REVERSE					through June 30 2020	Page	4	of	
NAME OF FILER Albany Teachers Association						I.D. NI 1360	JMBER 882		
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees fND independent expenditure supporting/opposing others (explain)* legal defense LTC campaign literature and mailings	es the payment, y MBR member com MTG meetings and OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli PRO professional PRT print ads	munications d appearance ses lating urvey reseal very and me	es ch ssenger services		rise, describe the payr RAD radio airtime and proc RFD returned contributions SAL campaign workers' sa TEL t.v. or cable airtime at TRC candidate travel, lodg TRS staff/spouse travel, lo TSF transfer between com VOT voter registration WEB	duction costs s alaries nd production cos ging, and meals dging, and meals nmittees of the sa	me cand	idate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER (.D. NUMBER)		CODE	OR	DESCR	IPTION OF PAYMENT		A	MOUNT PAID	
								~	
Payments that are contributions or independent expenditures must also be	summarized on Sched	dule D.				SUBTOTAL	\$		
Schedule E Summary									
. Itemized payments made this period. (Include all Schedule . Unitemized payments made this period of under \$100	•						40.00		
. Total interest paid this period on loans. (Enter amount from . Total payments made this period. (Add Lines 1, 2, and 3. E	Schedule B, Part	1, Colum	n (e).)			\$ _	0	***************************************	