



# UNITED TEACHERS LOS ANGELES

## Financial Disclosure Report

Statement covers period \_\_\_\_\_ through \_\_\_\_\_

Name of Candidate or committee \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Office or offices being sought \_\_\_\_\_

Income:

**I. CONTRIBUTIONS:**

**A. Monetary Contributions:**

Full name and address of individual contributor if amount over \$25.00

If committee, full name and address of committee

Name	Address	Amount	Cumulative Amount

If necessary, attach an additional sheet

**B. Total non-itemized monetary contributions:**

**II. LOANS RECEIVED:**

A. Full name and address of individual lender if amount over \$25.00

If committee, full name and address of committee

Name	Address	Amount	Cumulative Amount

**B. Total non-itemized loans:**

Total Contributions Received \_\_\_\_\_

Total Loans Received \_\_\_\_\_

Total Non-Monetary Contributions \_\_\_\_\_

Total Pledges \_\_\_\_\_

Total Fundraisers \_\_\_\_\_

**Total Income** \_\_\_\_\_

III. **EXPENSES:**

I. Loans Repaid

Name	Address	Amount	Cumulative Amount

II. Telephone

III. Postage

IV. Printing

V. Receptionists, Entertainment, etc.

VI. Accrued Expenses

VII. Estimate of Bills not received (Specify)

VIII. Other


Total Exp. \_\_\_\_\_

Total Inc. \_\_\_\_\_

**Non-Monetary contributions:**

Name and address of contributor

Description of goods and/or services if fair market value is over \$25.00

Fair market value (estimate)

Name & Address	Description	Net Value	Cumulative Amount

IV. **FUNDRAISERS** – raising \$25.00 or more

Name (Individual or Committee)	Address	Amount	Cumulative Amount

*"I affirm under penalty of perjury that all of the information provided by me in this form is correct to the best of my knowledge."*

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature.