Recipi Committee Campaign Statement Cover Page	. ()	En .	Date Stamp	TED FO	COVER PAGE FORNIA 460
*	Statement covers period	Date of election if applicable: (Month, Day, Year)		Page _	
* :	from <u>1/1/2022</u>	(World), Day, Teary	APR 27 20	122	or Official Use Only
SEE INSTRUCTIONS ON REVERSE	through <u>4/23/2022</u>	06/7/2022	У		
1. Type of Recipient Committee: All Committees - Con	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:			
State Candidate Election Committee Recall (Also Complete Pert 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure ommittee Controlled Sponsored so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee so Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termi Amendment (Explain below	nation)	Quarterly Stater Special Odd-Ye	nent ar Report
	NUMBER 45344	Treasurer(s)			WII
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	10011	NAME OF TREASURER			
COMMITTEE TO ELECT RICARDO AVILA COUNTY ASSESSOR, 2022		Ricardo Avila MAILING ADDRESS			
ATTICLET ADDRESS AND DO DOWN		713 South "E" St.			
STREET ADDRESS (NO P.O. BOX) 713 South "E" St.		СПҮ	STATE	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP COD	DE AREA CODE/PHONE	Imperial NAME OF ASSISTANT TREASURER,	CA	92251	(760)791-1021
Imperial CA 92251		NAME OF ASSISTANT TREASURER,	FANY		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	(700)791-1021	MAILING ADDRESS			
CITY STATE ZIP COD	E AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	· · · · · · · · · · · · · · · · · · ·	OPTIONAL: FAX/E-MAIL ADDRESS			
odracir0072@hotmail.com		odracir0072@hotmail.com			
I. Verification		out the second second			
I have used all reasonable diligence in preparing and reviewing	g this statement and to the best of my kr	nowledge the information contained her	ein and in the attacl	hed schedules is tr	ue and complete. I
certify under penalty of perjury under the laws of the State of C	California that the foregoing is true and c	orrect.	×.		
Executed on 4/26/2022	Ву			=======================================	
4/26/2022		Signature of Treasurer or Assistant Treas	surer		
Executed on Date	Signature of Control	ing Officeholder, Candidate, State Measure Propone	nt or Responsible Officer	of Sponsor	
Executed on	BySig	nature of Controlling Officeholder, Candidate, State I	Measure Proponent		
Executed on	By ————————————————————————————————————	nature of Controlling Officeholder, Candidate, State I	Measure Proponent		

california 460

Page 2 of 14

. Officeholder or Candidate Contro	olled Committee	6.	Primarily Formed Ballet	t Magazza	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE		0.	Primarily Formed Ballo	weasure	Committee	.	
Ricardo Avila			NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCAL	TION AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON		
Imperial County Assessor	Section 1.		BALLST NO. ON ELITER	SOMISDICTI	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AN	ND STREET) CITY STATE ZIP						
713 South "E" St	Imperial CA 92251		identify the controlling office	holder, candl	date, or state	measure prop	onent, if any.
			NAME OF OFFICEHOLDER, CAN	IDIDATE, OR F	PROPONENT		
Related Committees Not Included not included in this statement that are contributions or make expenditures on behaviors.	d in this Statement: List any committees folled by you or are primarily formed to receive alf of your candidacy.		OFFICE SOUGHT OR HELD			DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER						
	iis. Nowbert			98			7
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s) is	idate/Offic for which this	eholder Co committee is	ommittee Li primarily forme	st names of ed.
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELD	☐ SUPPORT
Uest U	TATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE COL	IOUT OF USER	OPPOSE
V			NAME OF OFFICEROEDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELD	☐ SUPPORT☐ OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDR	CONTROLLED COMMITTEE? YES NO ESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
The second secon	ATE ZIP CODE AREA CODE/PHONE		Attac	h continuatio	on sheets if n	ecessarv	1 3 3 3 3 3

Campaign Disclosure Statement **Summary Page**

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 1/1/2022	california 460
through <u>4/23/2022</u>	Page 3 of 14
•	I.D. NUMBER
	1445944

NAME OF FILER			
Ricardo Avila			I.D. NUMBER 1445344
Contributions Received 1. Monetary Contributions	**Example 1.5	Column B CALENDAR YEAR TOTAL TO DATE \$ 10,149 \$	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 Schedule E, Line 4 6. Payments Made Schedule E, Line 4 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 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	\$\frac{12,557}{0}\$ \$\frac{12,557}{0}\$ \frac{0}{0}\$ \frac{0}{12,557}\$	\$ <u>0</u> \$ <u>0</u> \$	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{16,499}{0} \frac{12,557}{3,942} \$\frac{0}{10,149}	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.

Schedul	A	
Monetary	Contributions	Received

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80	HED	NH	۸
00		/ U L	 \sim

		to	whole dollars.	SCHEDULE				
Monetary	y Contributions Received		whole defined.	Statement covers period CALIFORNIA 46				
i:				from <u>1/1/2022</u>		FC	RM 400	
SEE INSTRUCT	TIONS ON REVERSE			through 4/23/202	22	Page _	4 of	
NAME OF FILER Ricardo Avi			1			1.D. NUI		
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 OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)	
3/3/2022	Janella Quintanilla 340 San Diego Ave. El Centro, CA 92243	☑IND □COM □OTH □PTY □SCC	Appraiser County of Imperial	\$ 100	\$ 100			
3/25/2022	John Wadell 142 East St. Brawley, CA 92227	IND COM OTH PTY SCC	Maintenance Calipatria State Prison	\$ 200	\$ 200			
4/14/2022	Luis Zendejas 6512 Riley Rd. Calipatria, CA 92233	☑IND □COM □OTH □PTY □SCC	Retired	\$ 500	\$ 500			
4/14/2022	Salvador Avila 1773 Franklin Chase Terrace Henderson, NV 89012	☑IND □COM □OTH □PTY □SCC	Retired	\$1,500	\$2,000			
4/14/2022	Madjac Farms Inc. PO Box 2135 El Centro, CA 92243	☐IND ☐COM ØOTH ☐PTY ☐SCC		\$ 2,500	\$ 2,500		(10)	
			SUBTOTAL \$	6 4,800		A Property of		
Amount re (Include al Amount re	A Summary ceived this period – itemized monetary contributions. Il Schedule A subtotals.) ceived this period – unitemized monetary contribution etary contributions received this period.				IND - COM OTH PTY	(other th - Other (e - Political	nt Committee nan PTY or SCC) .g., business entity)	
(Add Lines	s 1 and 2. Enter here and on the Summary Page, Col	umn A, Line 1	.)TOTAL \$ 6,3	50		FPPC	Form 460 (Jan/2016))	

Schedule	Á (Continuatio	n Sheet)
	Contributions	

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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inonetary	Contributions Neceived			from <u>1/1/2022</u>	ers period	CALIF FO	ornia 460
* · ·				through <u>4/23/202</u>	2	Page _5	of 14 167
NAME OF FILER Ricardo Avil						1.D. NUN 1445344	MBER
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) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
4/14/2022	Timco Hay & Straw Sales PO Box 772 Calipatria, CA 92233	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		\$ 1,000	\$ 1,000		
4/23/2022	Gibi Trucking, LLC PO Box 1927 El Centro, CA 92243	☐IND ☐COM ØOTH ☐PTY ☐SCC		\$ 500	\$ 500		
£		□IND □COM □OTH □PTY □SCC					
24		□IND □COM □OTH □PTY □SCC					1.63 1.63
		□IND □COM □OTH □PTY □SCC		\$	\$		
			SUBTOTAL \$	1,500			

*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

** If required.

Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1

Statement covers period

Loans Received				2.5	from <u>1/1/2022</u>		FORM	"^ 4 60
SEE INSTRUCTIONS ON REVERSE					through <u>4/23/20</u>	22	Page 6	of_14
NAME OF FILER							I.D. NUMBER	
Ricardo Avila							1445344	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIE OR FORGIVEN THIS PERIOD	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Ricardo Avila	Appraiser			PAID	1.090	0	1.000	CALENDAR YEAR
713 South "E" St.	County of Imperial			\$ ———	\$ <u>1,029</u>	0 %	\$ <u>1,029</u>	\$ <u>1,029</u>
Imperial, CA 92251				☐ FORGIVEN		RATE		PER ELECTION**
		\$	s_1,029	\$	<i></i>	\$	3/10/2022	
TIND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED	
Ricardo Avila	Appraiser			PAID	400		400	CALENDAR YEAR
713 South "E" St.	County of Imperial			\$	\$ <u>400</u>	0%	\$_ 400	s_1,429
Imperial, CA 92251	- County of Importan			FORGIVEN		RATE		PER ELECTION**
			400	\$		\$	3/11/2022	e
TO IND COM OTH PTY SCC		\$	\$		DATE DUE		DATE INCURRED	· · · · · · · · · · · · · · · · · · ·
Ricardo Avila	Appraiser			☐ PAID	000			CALENDAR YEAR
713 South "E" St.	County of Imperial			\$	\$ <u>900</u>	0%	ş <u>900</u>	\$ 2,329
Imperial, CA 92251				☐ FORGIVEN	1	RATE		PER ELECTION**
		•	900	s			3/19/2022	
TIND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED	,
	S	SUBTOTALS \$	2,329	0	\$ 2,329	\$ 0		
Schedule B Summary						(Enter (e) on Sched	ule E, Line 3)	
Loans received this period		paliticada Saba alexenda meneroles de com		s 10,	149			
(Total Column (b) plus unitemized loar	s of less than \$100.)					_		
2. Loans paid or forgiven this period				\$ <u>0</u>			Contributor Codes ID – Individual	1
(Total Column (c) plus loans under \$100 paid or forgiven.)						OM – Recipient C	ommittee	
(Include loans paid by a third party tha 3. Net change this period. (Subtract Lin	it are also itemized on Sche	edule A.)		NET . 10,	149			PTY or SCC)
Enter the net here and on the Summar	ry Page, Column A, Line 2.		***********************	NEI \$		P	TH – Other (e.g., l TY – Political Part CC – Small Contri	y
				(M	ay be a negative number)			
*Amounts forgiven or paid by another party also m	ust be reported on Schedule A.	1						

nts may be .Junded whole dollars.

chedule B – Part 1	Amou
oans Received	

Statement covers period from 1/1/2022	california 460
through <u>4/23/2022</u>	Page 7 of 14
	I.D. NUMBER
	1445044

SEE INSTRUCTIONS ON REVERSE					through $\frac{4/23/202}{2}$	22	Page 7	of_14
NAME OF FILER							I.D. NUMBER	
Ricardo Avila							1445344	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Ricardo Avila 713 South "E" St. Imperial, CA 92251 M IND COM OTH PTY SCC	Appraiser County of Imperial	\$	\$ <u>1,100</u>	\$ ————————————————————————————————————	\$ 1,100 DATE DUE	O %	\$ 1,100 3/26/2022 DATE INCURRED	S 3,429 PER ELECTION** \$
Ricardo Avila 713 South "E" St. Imperial, CA 92251	Appraiser County of Imperial	\$	2,800 \$	\$ PAID \$ FORGIVEN	\$ 2,800	0 % RATE	\$ 2,800 4/5/2022 DATE INCURRED	\$ 6,229 PER ELECTION**
Ricardo Avila 713 South "E" St. Imperial, CA 92251	Appraiser County of Imperial	\$	_{\$_} 680	\$ PAID \$ FORGIVEN	\$ 680	%%%	\$ 680 \$ 4/6/2022 DATE INCURRED	CALENDAR YEAR \$ 6,909 PER ELECTION**
		SUBTOTALS \$	4,580	5 0	\$ 4,580	\$ 0	A STORE	
Schedule B Summary						(Enter (e) on Sched	ule E, Line 3)	

1.	Loans received this period	\$
	(Total Column (b) plus unitemized loans of less than \$100.)	
2.	Loans paid or forgiven this period	\$
	(Total Column (c) plus loans under \$100 paid or forgiven.)	
	(Include loans paid by a third party that are also itemized on Schedule A.)	
3.	Net change this period. (Subtract Line 2 from Line 1.)	\$
	Enter the net here and on the Summary Page, Column A. Line 2	

†Contributor Codes

IND - Individual

(May be a negative number)

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Sched	ule B	- Part	1
Loans	Rece	ived	

** If required.

Amounts may be rounded

SCHEDULE B - PART 1

Loans Received		to whole dollars, Statement covers				ers period	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through <u>4/23/20</u>	22	Page 8	of <u>14</u>	
Ricardo Avila							1445344		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIE OR FORGIVEN THIS PERIOD	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE:	
Ricardo Avila 713 South "E" St. Imperial, CA 92251	Appraiser County of Imperial		140	PAID \$ FORGIVEN	ş <u>140</u>	0 %	\$ 140 4/11/2022	\$ 7,049 PER ELECTION**	
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
Ricardo Avila 713 South "E" St. Imperial, CA 92251	Appraiser County of Imperial		250	PAID FORGIVEN	ş <u>250</u>	O %	\$ 250 4/12/2022	\$\frac{7,299}{PER ELECTION**	
TIND □ COM □ OTH □ PTY □ SCC Ricardo Avila 713 South "E" St. Imperial, CA 92251 TIME IND □ COM □ OTH □ PTY □ SCC	Appraiser County of Imperial	\$	\$ \$_2,830	PAID FORGIVEN \$	\$ 2,830	0%	\$ 2,830 4/14/2022 DATE INCURRED	CALENDAR YEAR \$ 10,129 PER ELECTION** \$	
	S	UBTOTALS \$	3,220	5 0	\$ 3,220	\$ 0			
Schedule B Summary 1. Loans received this period	s of less than \$100.) 0 paid or forgiven.) t are also itemized on Sche	dule A,)		\$		O P	Contributor Codes D – Individual DM – Recipient Co	PTY or SCC) pusiness entity)	
*Amounts forgiven or paid by another party also me	ust be reported on Schedule A.)		(M	ay be a negative number)	_			

Schedule C **Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

Statement covers period from $\frac{1/1/2022}{}$	CALIFORNIA 460					
through	Page 9	of				
Y	I.D. NUMBE	R				

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Ricardo Avila 1445344 IF AN INDIVIDUAL, ENTER CUMULATIVE TO FULL NAME, STREET ADDRESS AND DATE AMOUNT/ PER ELECTION CONTRIBUTOR OCCUPATION AND EMPLOYER **DESCRIPTION OF** ZIP CODE OF CONTRIBUTOR DATE RECEIVED FAIR MARKET TO DATE CODE* (IF SELF-EMPLOYED, ENTER GOODS OR SERVICES CALENDAR YEAR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) VALUE (IF REQUIRED) NAME OF BUSINESS) (JAN 1 - DEC 31) **IND** 3/14/22 Norma Ruiz Appraiser Banners and \$ 380 \$ 380 □сом 1654 Driftwood County of Imperial stickers □ OTH El Centro, CA 92243 ☐ PTY □ scc **IND** 3/21/22 Maria Hernandez de Avila Homemaker Car magnets \$ 150 \$ 150 □сом 545 E. Elder St. □отн Calipatria, CA 92233-0265 □ PTY □ scc **Z** IND 3/25/22 Norma Ruiz Appraiser Cups and car \$ 292 \$ 672 □сом 1654 Driftwood County of Imperial magnets □отн El Centro, CA 92243 PTY □scc **IND** 4/2/22 Beatriz Avila **Academic Counselor Bubbles** and \$390 \$ 390 □сом 1194 Chestnut Ave. Imperial Valley College helium balloon kit □отн Brawley, CA 92227 □ PTY □ scc Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 1,212 Schedule C Summary *Contributor Codes 1. Amount received this period - itemized nonmonetary contributions. IND - Individual (Include all Schedule C subtotals.).....\$COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee 3. Total nonmonetary contributions received this period.

Schedule C Nonmonetary Contributions Received

3. Total nonmonetary contributions received this period.

Amounts may be rounded to whole dollars.

	SCHEDULE C
Statement covers period from $\frac{1/1/2022}{}$	CALIFORNIA 460
through <u>4/23/2022</u>	Page 10 of 14
	I.D. NUMBER

SEÉ INSTRUCTIONS ON REVERSE						ough $\frac{4/23/2022}{}$		Page 10	of
Ricardo Av								I.D. NUME 1445344	
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)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULAT DAT CALENDA (JAN 1 - I	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
4/10/22	Beatriz Avila 1194 Chestnut Ave. Brawley, CA 92227	☑IND □COM □OTH □PTY □SCC	Academic Counselor Imperial Valley College	Banners		\$ 2,800	3,190		
4/11/22	Maria Hernandez de Avila 545 E. Elder St. Calipatria, CA 92233-0265	☑ IND □ COM □ OTH □ PTY □ SCC	Homemaker	Tees		\$ 133	\$ 283		14
4/12/22	Maria Hernandez de Avila 545 E. Elder St. Calipatria, CA 92233-0265	☑IND □COM □OTH □PTY □SCC	Homemaker	Caps		\$ 468	\$ 751		
4/18/22	SalvadorAvila 1773 Franklin Chase Terrace Henderson, NV 89012	☑IND □COM □OTH □PTY □SCC	Retired	Pens		\$ 500	\$ 2,000		
Attach add	litional information on appropriately labeled	continuation	sheets.	SUBTO	TAL S	\$ 3,901		2574 July	
1. Amount (Include	e C Summary received this period – itemized nonmonetary all Schedule C subtotals.) received this period – unitemized nonmonet						- IND - COM OTH PTY	other that Other (e.g. Political F	t Committee an PTY or SCC) g., business entity)

Schedule C Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

	SCHEDULE C
Statement covers period from 1/1/2022	CALIFORNIA 460
through	Page 11 of 14
	I.D. NUMBER
	1445944

					iron			10	XW.
SEE INSTRUC	CTIONS ON REVERSE				thro	ugh <u>4/23/2022</u>	-	Page 11	of
Ricardo Av								1.D. NUME 1445344	
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)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
4/21/22	Beatriz Avila 1194 Chestnut Ave. Brawley, CA 92227	☑ IND □ COM □ OTH □ PTY □ SCC	Academic Counselor Imperial Valley College	Pens		\$ 200	\$ 3,390		.51)
4/23/22	Maria Hernandez de Avila 545 E. Elder St. Calipatria, CA 92233-0265	☑IND □COM □OTH □PTY □SCC	Homemaker	Drawing prizes		\$ 160	\$ 911		
		□IND □COM □OTH □PTY □SCC	ı.						
		□IND □COM □OTH □PTY □SCC							
Attach add	litional information on appropriately labeled	continuation :	sheets.	SUBTO	TAL \$	360	Ling Ure		
1. Amount (Include 2. Amount	received this period – itemized nonmonetary all Schedule C subtotals.)received this period – unitemized nonmonet	ary contributi					— IND - COM OTH — PTY	(other the – Other (e. – Political F	t Committee an PTY or SCC) g., business entity)

3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....TOTAL \$_

Schedule É	
Payments Made	

Amounts may be rounded

SCHEDULE E

Payments Made	to whole dollars.	from 1/1/2022	FORM 460
SEE JNSTRUCTIONS ON REVERSE		through <u>4/23/2022</u>	Page of
NAME OF FILER			I.D. NUMBER
Ricardo Avila			1445344
CODES: If one of the following codes accurately CMP campaign paraphernalia/misc.	describes the payment, you may enter the code. Othe	erwise, describe the payment.	

CODE	5: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise,	describe the payment.
CMP ca CNS ca CTB co CVC civ FIL ca FND fur IND inc	S: If one of the following codes accurately describe mpaign paraphernalia/misc, mpaign consultants ntribution (explain nonmonetary)* vic donations ndidate filing/ballot fees ndraising events dependent expenditure supporting/opposing others (explain)* and defense	MBR MTG OFC PET PHO POL POS	member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services	RAD RFD SAL TEL TRC TRS TSF	radio airtime and production costs returned contributions campalgn workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor
	gal defense mpaign literature and mailings		professional services (legal, accounting) print ads	VOT WEB	voter registration 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
Imperial County Elections Department 940 W. Main El Centro, CA 92243	FIL		\$ 1,029
Driscoll's 1470 W. State St. El Centro, CA 92243	СМР	5	\$ 393
All Sports International 317 Heffernan Ave. Calexico, CA 92231	СМР		\$ 1,960

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

SUBTOTAL \$ 3,382

Schedule E Summary

1.	Itemized payments made this period. (Include all Schedule E subtotals.)\$	12,557
2.	Unitemized payments made this period of under \$100\$	
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.)	12,557

Schedu E
(Continuation Sheet)
Payments Made

Amounts may be is inded

- /		
SC	JULE E	(CONT.

(Continuation Sheet) Payments Made	to whole dollars.	from	CALIFORNIA FORM	460
SEE INSTRUCTIONS ON REVERSE		through <u>4/23/2022</u>	Page	of
NAME OF FILER			I.D. NUMBER	1.0
Ricardo Avila			1445344	
CODES: If one of the following codes accurately	ly describes the payment, you may enter the code. Ot	herwise, 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 TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals petition circulating PET FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services POS transfer between committees of the same candidate/sponsor TSF LEG legal defense professional services (legal, accounting) VOT voter registration 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 O	PR DESCRIPTION OF PAYMENT	AMOUNT PAID
Children & Parents Council 563 W. Main St, El Centro, CA 92243	СМР		\$ 150
Hechos y Opinion 2472 H. Najera Ave. Calexico, CA 92231	LIT		\$ 680
Gerald Gauna 1110 Magnolia Brawley, CA 92227	CMP		\$ 2,800
Driscoll's 1470 W. State St. El Centro, CA 92243	СМР		\$ 140
All Sports International 317 Heffernan Ave. Calexico, CA 92231	CMP		\$ 250

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

SUBTOTAL \$ 4,020

Schedu	
(Continuation	Sheet)
Payments Mad	de

1		150
SC	ULEE	(CONT.)
		F

	CALIFORNIA 460 FORM Page 14 of 14 I.D. NUMBER
radio airtime and production of returned contributions L campaign workers' salarles L t.v. or cable airtime and production of candidate travel, lodging, and staff/spouse travel, lodging, a transfer between committees of voter registration	uction costs I meals and meals of the same candidate/sponsor
TION OF PAYMENT	AMOUNT PAID
· · · · · · · · · · · · · · · · · · ·	\$ 4,830
	\$ 325
	ie, describe the payment. Tadio airtime and production or returned contributions campaign workers' salarles t.v. or cable airtime and productions candidate travel, lodging, and staff/spouse travel, lodging, and staff/spouse travel, lodging, and transfer between committees or voter registration

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

SUBTOTAL \$ 5,155