

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp	CALIFORNIA 2001/02 FORM	460
	Page <u>1</u> of <u>21</u>	
	For Official Use Only	

Statement covers period	Date of election if applicable: (Month, Day, Year)
from <u>1/1/2022</u>	<u>6/7/2022</u>
through <u>4/23/2022</u>	

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall
(Also Complete Part 5)
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored
(Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination Amendment (Explain below))
- Amendment (Explain below)
- Omitted Contribution
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1445127

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

STREET ADDRESS (NO P.O. BOX)
1211 LA VALENCIA DR

CITY	STATE	ZIP CODE	AREA CODE/PHONE
BRAWLEY	CA	92227	(760) 344-4618

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
P.O. BOX 701

CITY	STATE	ZIP CODE	AREA CODE/PHONE
BRAWLEY	CA	92227	

OPTIONAL: FAX / E-MAIL ADDRESS
jbjones1997@outlook.com

Treasurer(s)

NAME OF TREASURER
Robert Trimm

MAILING ADDRESS
456 South Rio Vista

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Brawley	CA	92227	(760) 427-2955

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
Treasurer: betnrob@brawleyonline.com

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 and in the attached schedules 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 4/28/2022
Date

By _____
Signature of Treasurer or Assistant Treasurer

Executed on 4/28/2022
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 Cover Page - Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Jeffrey Jones

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Other: Judge, Superior Court

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
1211 La Valencia Drive Brawley CA 92227

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>21</u>
I.D. NUMBER 1445127	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$19,148.99	\$19,148.99
2. Loans Received <i>Schedule B, Line 3</i>	\$15,500.00	\$15,500.00
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$34,648.99	\$34,648.99
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	\$1,739.71	\$1,739.71
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$36,388.70	\$36,388.70

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	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made <i>Schedule E, Line 4</i>	\$23,905.39	\$23,905.39
7. Loans Made <i>Schedule H, Line 3</i>	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$23,905.39	\$23,905.39
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	\$8,575.02	\$8,575.02
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	\$1,739.71	\$1,739.71
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$34,220.12	\$34,220.12

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____

Current Cash Statement	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)
12. Beginning Cash Balance <i>Previous Summary Page, Line 16</i>	\$0.00
13. Cash Receipts <i>Column A, Line 3 above</i>	\$34,648.99
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	\$0.00
15. Cash Payments <i>Column A, Line 8 above</i>	\$23,905.39
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$10,743.60

If this is a termination statement, Line 16 must be zero.

To calculate Column B, add amounts in Column A to the corresponding amount 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.

17. LOAN GUARANTEES RECEIVED <i>Schedule B, Part 2</i>	\$0.00
Cash Equivalents and Outstanding Debts	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)
18. Cash Equivalents <i>See instructions on reverse</i>	\$0.00
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$24,075.02

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>21</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/3/2022	M. Kirk Hale 1024 Ridge Park Drive Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Supervisor EMPLOYER: Imperial Irrigation Dist.	\$250.00	\$250.00	
3/3/2022	Eula Jones 484 West A Street Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Retired EMPLOYER: none	\$1,000.00	\$1,000.00	
3/17/2022	Thomas Storey 222 South 8th Street El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Attorney Self-Employed BUSINESS: Law Office of Thomas Storey	\$200.00	\$200.00	
3/22/2022	Marco Nunez 939 Main Street El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	\$500.00	\$500.00	
3/27/2022	Maria Torres 46 Las Flores Drive Calexico, CA 92232	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Retired EMPLOYER: none	\$100.00	\$100.00	
SUBTOTAL \$						

Schedule A Summary

1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.)	\$18,800.00
2. Amount received this period - unitemized monetary contributions of less than \$100	\$348.99
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$19,148.99

*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

Schedule A (Continuation Sheet)

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/30/2022	Christopher Plourd 939 Main Street El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	\$250.00	\$250.00	
3/31/2022	David Boniface 329 West 2nd Street Calexico, CA 92231	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Optometrist Self-Employed BUSINESS: David R. Boniface, OD	\$250.00	\$250.00	
3/31/2022	Kristine Kussman 2346 McConnell Road El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Retired EMPLOYER: none	\$300.00	\$300.00	
3/31/2022	Steven Walker 300 S. Imperial Ave., Ste. 10 El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Attorney Self-Employed BUSINESS: Walker & Driskill	\$300.00	\$300.00	
4/1/2022	William Lehman 939 Main Street El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	\$500.00	\$500.00	
SUBTOTAL \$						

*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

Schedule A (Continuation Sheet)

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/2/2022	Daniel Tirado 1415 Ross Avenue El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Pharmacist EMPLOYER: El Centro Regional Med. Ctr.	\$100.00	\$100.00	
4/2/2022	Brooks Anderholt 939 Main Street El Centro, CA 92243	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	\$250.00	\$250.00	
4/4/2022	Mark Huber 550 Marylin Avenue Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Manager/Officer EMPLOYER: Elms Equipment Rentals, Inc.	\$200.00	\$200.00	
4/5/2022	Bobby Turner 317 E 5th Street Holtville, CA 92250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: HVAC Contractor Self-Employed BUSINESS: Turner Air Conditioning & Electrical Co	\$500.00	\$500.00	
4/7/2022	Andrew Currier 287 West J Street Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Farmer Self-Employed BUSINESS: Badlands Provisions	\$500.00	\$500.00	
SUBTOTAL \$						

*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

Schedule A (Continuation Sheet)

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/8/2022	Craig Riemer 4050 Main Street, Dep. 1 Riverside, CA 92501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	\$200.00	\$200.00	
4/8/2022	Evalyn Currier 369 Terrace Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: retired EMPLOYER: none	\$200.00	\$200.00	
4/11/2022	Ronald C. Leimgruber Farms Inc. 646 Olive Avenue Holtville, CA 92250	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
3/20/2022	Clayton's, Inc. 1619 River Drive Brawley, CA 92227	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	
4/14/2022	Donald Wharton 1134 La Valencia Ct. Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Manager EMPLOYER: Mediplane, Inc.	\$200.00	\$200.00	
SUBTOTAL \$						

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/14/2022	Edward Hale 340 West K Street Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Farmer Self-Employed BUSINESS: Ed Hale	\$500.00	\$500.00	
4/14/2022	KC Welding and Rentals, Inc. 1549 Dogwood Road El Centro, CA 92243	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
4/14/2022	Judicial Excellence Together 1127 11th Street Sacramento, CA 95814 COMMITTEE ID: 1339627	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00	\$10,000.00	
4/21/2022	Gary Mamer 463 West H Street Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Farmer Self-Employed BUSINESS: Gary Mamer	\$250.00	\$250.00	
3/23/2022	Patrick Hutchinson 426 Terrace Brawley, CA 92227	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Retired EMPLOYER: none	\$250.00	\$250.00	
SUBTOTAL \$						

*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

Schedule B - Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY	I.D. NUMBER 1445127
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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*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Jeffrey Jones 1211 La Valencia Drive Brawley, CA 92227 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	\$0.00	\$500.00	<input type="checkbox"/> PAID \$0.00 <input type="checkbox"/> FORGIVEN \$0.00	\$501.00 6/10/2022 DATE DUE	1 _____% RATE \$0.00	\$500.00 2/14/2022 DATE INCURRED	CALENDAR YEAR \$15,500.00 PER ELECTION**
Jeffrey Jones 1211 La Valencia Drive Brawley, CA 92227 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	\$0.00	\$15,000.00	<input type="checkbox"/> PAID \$0.00 <input type="checkbox"/> FORGIVEN \$0.00	\$15,023.00 6/10/2022 DATE DUE	1 _____% RATE \$0.00	\$15,000.00 3/3/2022 DATE INCURRED	CALENDAR YEAR \$15,500.00 PER ELECTION**
 † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	 DATE DUE	 RATE	 DATE INCURRED	CALENDAR YEAR PER ELECTION**
SUBTOTAL \$								

(Enter (e) on
Schedule E, Line 3)

Schedule B Summary

1. Loans received this period (Total Column (b) plus unitemized loans of less than \$100.)	\$15,500.00
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.)	\$0.00
3. Net change this period. (Subtract Line 2 from Line 1.) NET	\$15,500.00 <small>(May be a negative number)</small>

***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

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

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

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 OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/31/2022 through 3/31/2022	Poli Flores 700 Harrington Street Calexico, CA 92250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Judge EMPLOYER: State of California	Food/drink for Mixer	\$981.66	\$981.66	
4/2/2022 through 4/2/2022	Victor Jaime 515 West Belford Road Imperial, CA 92251	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OCCUPATION: Retired College Administrator EMPLOYER: none	Food/drink for mixer	\$758.05	\$758.05	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule C Summary

1. Amount received this period - itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$1,739.71
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	\$0.00
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 \$1,739.71

*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

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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I.D. NUMBER 1445127	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

DATE	NAME OF CANDIDATE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$						

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$0.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) \$0.00

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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	I.D. NUMBER 1445127

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT 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 OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster 401 Main Street Brawley, CA 92227	POS	Form 410	\$8.95
Memo Reference: 1 Secretary of State 1500 11th Street #495 Sacramento, CA 95814	FIL	Form 410	\$50.00
Imperial County Elections 940 Main Street El Centro, CA 92243		Voter Data Disk	\$190.00

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

SUBTOTAL \$

Schedule E Summary

1. Itemized payment made this period. (Include all Schedule E subtotals.)	\$23,905.39
2. Unitemized payments made this period of under \$100	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	\$23,905.39

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	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 OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Imperial County Elections 940 Main Street El Centro, CA 92243	FIL	Candidate Statement Fee	\$300.00
All Sports International 331 West 2nd Street Calexico, CA 92250	CMP	Banners	\$4,763.00
Bank of America PO Box 15019 Wilmington, DE 198865019		Credit Card Payment	\$2,270.15
<u>Memo Reference: 2</u> Gerry Gauna 1110 Magnolia Street Brawley, CA 92227	CMP	Sign Erection	\$8,333.93
Los Amigos de Comunidad 1135 Apple Way Brawley, CA 92227	CVC	Cesar Chaves Celebration	\$250.00

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

SUBTOTAL \$

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	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 OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mechanics Bank 190 Main Street Brawley, CA 92227		Bank Fee -- check printing	\$30.75
Professional Packaging 103 North 21st El Centro, CA 92243	CMP	Yard Signs	\$1,646.76
Square, Inc. 1455 Market Street, Ste. 60 San Francisco, CA 94103		Credit Card Processing Fees	\$45.85
KXO Radio 420 Main Street El Centro, CA 92243	RAD	Radio Ad Spots	\$6,016.00

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

SUBTOTAL \$

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSING OF THIS PERIOD
Bank of America PO Box 15019 Wilmington, DE 198865019	Credit Card Payment	\$0.00	\$10,845.17	\$2,270.15	\$8,575.02
Memo Reference: 3					
SUBTOTAL \$			\$	\$	\$

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.).....	INCURRED TOTALS	<u>\$10,845.17</u>
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.).....	PAID TOTALS	<u>\$2,270.15</u>
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.).....	NET	<u>\$8,575.02</u>

(May be a negative number)

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

NAME OF AGENT OR INDEPENDENT CONTRACTOR

See below for name of agent or independent contractor.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AGENT/INDEPENDENT CONTRACTOR: Bank of America PAYEE OR CREDITOR: Imperial Printers 430 Main Street El Centro, CA 92243	CMP	Palm Cards, yard signs, ink stamps	\$1,661.88
AGENT/INDEPENDENT CONTRACTOR: Bank of America PAYEE OR CREDITOR: Lamar Companies 1277 East 21st Street Yuma, AZ 85365	CMP	Billboards	\$8,522.00
AGENT/INDEPENDENT CONTRACTOR: Bank of America PAYEE OR CREDITOR: Postmaster 71 E Main Heber, CA 92249	POS	Postcards	\$450.00
AGENT/INDEPENDENT CONTRACTOR: Bank of America PAYEE OR CREDITOR: Jeffrey Sports Savvy 1470 State Street El Centro, CA 92243	CMP	shirts	\$97.43

Attach additional information on appropriately labeled continuation sheets.

TOTAL \$

*Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
	Page <u>17</u> of <u>21</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

NAME OF AGENT OR INDEPENDENT CONTRACTOR

See below for name of agent or independent contractor.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AGENT/INDEPENDENT CONTRACTOR: Bank of America PAYEE OR CREDITOR: Staples 560 E Dannenberg Drive El Centro, CA 92243	POS	Envelopes	\$64.91
AGENT/INDEPENDENT CONTRACTOR: Bank of America PAYEE OR CREDITOR: Postmaster 401 Main Street Brawley, CA 92227	POS	PO Box Rent, overnight fee	\$78.95

Attach additional information on appropriately labeled continuation sheets.

TOTAL \$

*Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule H Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period from <u>1/1/2022</u> through <u>4/23/2022</u>	CALIFORNIA FORM 460
	Page <u>18</u> of <u>21</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
JONES SUPERIOR COURT OFFICE #2, 2022; RE-ELECT JUDGE JEFFREY

I.D. NUMBER
1445127

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (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 LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*		(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID	<input type="checkbox"/> FORGIVEN				
				<input type="checkbox"/> PAID					
				<input type="checkbox"/> FORGIVEN			RATE %		
				<input type="checkbox"/> PAID					
				<input type="checkbox"/> FORGIVEN			RATE %		
		SUBTOTAL		\$	\$	\$	\$		

*Loans that are contributions to another candidate or committee
must also be summarized on Schedule D. Loans forgiven must
also be reported on Schedule E.

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

- Loans made this period \$0.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Payments received on loans \$0.00
(Total Column (c) plus unitemized payments of less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.)NET \$0.00
Enter the net here and on the Summary Page, Column A, Line 7.
(May be a negative number)

** If required.

Memo Reference: 1
Overnight to FPPC

Memo Reference: 2
Vendors shown on Sch. G

Memo Reference: 3
Vendors Reported on Schedule G

ONLINE