

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

DATE Stamp
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By _____

CALIFORNIA 460
FORM

Page 1 of 18

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Date of election if applicable:
(Month, Day, Year)
6/7/2022

Statement covers period
from 4/24/22
through 5/21/22

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 3)
- ☐ 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)
- ☐ Quarterly Statement
☐ Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1446570

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
COMMITTEE TO ELECT JOHN HAWK DISTRICT 5 SUPERVISOR 2022

Treasurer(s)

NAME OF TREASURER
CATHERINE DUNHAM
MAILING ADDRESS

STREET ADDRESS (NO P.O. BOX)

STATE ZIP CODE AREA CODE/PHONE

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

STATE ZIP CODE AREA CODE/PHONE

STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

STATE ZIP CODE AREA CODE/PHONE

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 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 5/24/22 Date

Executed on 5/24/22 Date

Executed on _____ Date

Executed on _____ Date

Treasurer

Signature of Assistant Treasurer, if any

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

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

www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page — Part 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
JOHN HAWK			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
IMPERIAL COUNTY DISTRICT 5 SUPERVISOR 2022			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP

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		
N/A			
NAME OF TREASURER	CONTROLLED COMMITTEE?		
	☐ YES ☐ NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)	STATE	ZIP CODE
CITY	AREA CODE/PHONE		
COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE?		
	☐ YES ☐ NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)	STATE	ZIP CODE
CITY	AREA CODE/PHONE		

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE	
BALLOT NO. OR LETTER	JURISDICTION
	☐ SUPPORT ☐ OPPOSE
Identify the controlling officeholder, candidate, or state measure proponent, if any.	
NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT	
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	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 4/24/22 through 5/21/22		CALIFORNIA FORM 460
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I.D. NUMBER 1446570		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ 9549.00	\$ 14847.00
2. Loans Received..... Schedule B, Line 3	0.00	2725.98
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ 9549.00	\$ 17572.98
4. Nonmonetary Contributions..... Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ 9549.00	\$ 17572.98

Expenditures Made

6. Payments Made..... Schedule E, Line 4	\$ 2200.00	\$ 5725.98
7. Loans Made..... Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ 2200.00	\$ 5725.98
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment..... Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ 2200.00	\$ 5725.98

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ 4498.00
13. Cash Receipts..... Column A, Line 3 above	\$ 9549.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	0.00
15. Cash Payments..... Column A, Line 8 above	2200.00
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 11847.00

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	\$ 0
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ 2725.98

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	\$ 17572.98	\$
21. Expenditures Made	\$ 5725.98	\$

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
	/ /	\$
	/ /	\$

*Amounts in this section may be different from amounts reported in Column B.

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 may be rounded
to whole dollars.

Schedule A **Monetary Contributions Received**

Statement covers period from <u>4/24/22</u> through <u>5/21/22</u>		CALIFORNIA 460 FORM
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SEE INSTRUCTIONS ON REVERSE		I.D. NUMBER 1446570

NAME OF FILER

CATHERINE DUNHAM

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)
4/29/22	PREECE FARMS 246 E. DEALWOOD RD. EL CENTRO, CA. 92243	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	SELF EMPLOYED / AG	250.00	250.00	
4/29/22	LAW OFFICES OF TOM STOREY 222 S. 8TH ST. EL CENTRO, CA. 92243	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	SELF EMPLOYED / ATTORNEY	200.00	200.00	
4/29/22	MARK McBROOM 6522 CORN RD. CALIPATRIA CA. 92233	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	500.00	500.00	
5/5/22	LANTANA FARMS, LLC P.O. BOX 2886 EL CENTRO, CA. 92244	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	FARMING / AG	2500.00	2500.00	
5/5/22	TTL CAPITAL, INC. P.O. BOX 1349 EL CENTRO CA. 92244	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	FARMING / AG	2500.00	2500.00	
SUBTOTAL \$ 5950.00						

Schedule A Summary

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

- Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 9450.00
- Amount received this period - unitemized monetary contributions of less than \$100 \$ 99.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 9549.00

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

from 4/24/22

through 5/21/22

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I.D. NUMBER

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NAME OF FILER

CATHERINE DUNHAM

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE * ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	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)
5/5/22	STEVEN G. DAHM - FARM ACCOUNT P.O. BOX 721 BRAWLEY, CA. 92227	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	FARMING / AG	1000.00	1000.00	
5/17/22	CHARLOTTE & PAUL W. BROWDER 1820 COUNTY RD. 116b BURNET, TX. 78611-6015	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	500.00	500.00	
5/17/22	ROBERT A. & ROSANNE M. FLEMING 688 MARILYN AVE. BRAWLEY, CA. 92227	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	500.00	500.00	
5/17/22	JOHN L. DANTICE P.O. BOX 1033/1699 BARBARA WORTH DR. EL CENTRO, CA. 92244	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	100.00	100.00	
5/17/22	HARRY & SYLVIA NELSON 2305 HOYT RD. HOLTVILLE, CA. 92250	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED FARMER / AG	500.00	500.00	
SUBTOTAL \$ 2600.00						

*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

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

from 4/24/22

through 5/21/22

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I.D. NUMBER

1446570

NAME OF FILER

CATHERINE DUNHAM

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)
5/17/22	CLIFFORD & FRANCES STRAHM 1979 CHAMBERS LANE HOLTVILLE, CA. 92250	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	FARMING / AG	400.00	400.00	
5/17/22	BROCK SEED CO., LLC P.O. BOX 549 / 1399 FORRESTER RD. EL CENTRO, CA. 92244	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	SEED / AG	500.00	500.00	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
SUBTOTAL \$ 900.00						

*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 may be rounded to whole dollars.

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NAME OF FILER

CATHERINE DUNHAM

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	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
JOHN B. HAWK 999 KEFFER RD. HOLTVILLE, CA. 92250		FARMER / AG	0 \$	\$	☐ PAID \$ ☐ FORGIVEN \$	2725.98 \$	0 % RATE	2725.98 \$	2725.98 \$
					☐ PAID \$ ☐ FORGIVEN \$	\$	\$ % RATE	4/23/2022 DATE INCURRED	PER ELECTION** \$
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			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
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			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
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			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$	DATE INCURRED	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$	DATE INCURRED	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
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			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
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			\$	\$	\$	DATE DUE	\$	DATE INCURRED	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
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			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
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			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$	DATE INCURRED	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$ % RATE	\$	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$	DATE INCURRED	PER ELECTION** \$
			\$	\$	\$	DATE DUE	\$ % RATE		

Schedule B Summary	
1. Loans received this period..... (Total Column (b) plus unitemized loans of less than \$100.)	0 \$
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 \$
3. Net change this period. (Subtract Line 2 from Line 1.)	0 \$
Enter the net here and on the Summary Page, Column A, Line 2.	

(May be a negative number)

... that activity also must be reported on Schedule A.

**** If required.**

†Contributor Codes
IND – Individual
COM – Recipient Code
(other than I)
OTH – Other (e.g.,
PTY – Political Party
sCC – Small Contributor

Schedule B – Part 2

Loan Guarantors

Amounts may be rounded
to whole dollars.

Statement covers period
from 4/24/22
through 5/21/22

CALIFORNIA **460**
FORM

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

I.D. NUMBER
1446570

FULL NAME, STREET ADDRESS AND ZIP CODE OF
CONTRIBUTOR
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

JOHN HAWK

CONTRIBUTOR
CODE *

☒ IND
☐ COM
☐ OTH
☐ PTY
☐ SCC

IF AN INDIVIDUAL, ENTER
OCCUPATION AND EMPLOYER
(IF SELF-EMPLOYED, ENTER
NAME OF BUSINESS)

FARMER / AG

LOAN

LENDER

JOHN HAWK

DATE

4/23/2022

AMOUNT
GUARANTEED
THIS PERIOD

CUMULATIVE
TO DATE

CALENDAR YEAR
2725.98

PER ELECTION
(IF REQUIRED)

BALANCE
OUTSTANDING
TO DATE

2725.98

LENDER

DATE

LENDER

DATE

LENDER

DATE

SUBTOTAL \$ 2725.98

Enter on
Summary Page,
Line 17 only

Amounts may be rounded
to whole dollars.

Schedule C **Nonmonetary Contributions Received**

Statement covers period
from 4/24/22
through 5/21/22

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

I.D. NUMBER

1446570

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)
	N/A	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
SUBTOTAL \$							

Attach additional information on appropriately labeled continuation sheets.

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.

(Include all Schedule C subtotals.).....\$ 0.00

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 \$ 0.00

*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

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period

from 4/24/22

through 5/21/22

CALIFORNIA
FORM

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

I.D. NUMBER

1446570

DATE	NAME OF CANDIDATE, OFFICE, 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)
	N/A	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
SUBTOTAL \$ 0.00						

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.) TOTAL.. \$ 0.00

Amounts may be rounded to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

CALIFORNIA 460
FORM

from 4/24/22

Page $\frac{11}{18}$ of $\frac{18}{18}$

I.D. NUMBER

NAME OF FILER

CATHERINE DUNHAM

DATE	NAME OF CANDIDATE, OFFICE, 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)
	N/A	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
		☐ Support ☐ Oppose				
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
		☐ Support ☐ Oppose				
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
		☐ Support ☐ Oppose				
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
		☐ Support ☐ Oppose				
SUBTOTAL \$ 0.00						

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

Amounts may be rounded
to whole dollars.

Statement covers period
from 4/24/22
through 5/21/22

CALIFORNIA 460
FORM

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I.D. NUMBER
1446570

Schedule E
Payments Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
CATHERINE DUNHAM

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

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

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
EDWARD MORALES	CNS		CONSULTATION	1200.00
JERRY GAUNA	SAL		PUTTING UP SIGNS	1000.00
SUBTOTAL \$ 2200.00				

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

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 2200.00
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.)	TOTAL \$ 2200.00

www.fppc.ca.gov

CODES: If one of the following codes accurately describes the payment, you may enter the code. Candidates, committees, and sponsors	
CMP	campaign paraphernalia/misc.
CNS	campaign consultants
CTB	contribution (explain nonmonetary)*
CVC	civic donations
FIL	candidate filing/ballot fees
FND	fundraising events
IND	independent expenditure supporting/opposing others (explain)*
LEG	legal defense
MBR	member communications
MTG	meetings and appearances
OFC	office expenses
PET	petition circulating
PHO	phone banks
POL	polling and survey research
POS	postage, delivery and messenger services
PRO	professional services (legal, accounting)
PRT	print ads
RAD	radio airtime and production costs
RFD	returned contributions
SAL	campaign workers' salaries
TEL	t.v. or cable airtime and production costs
TRC	candidate travel, lodging, and meals
TRS	staff/spouse travel, lodging, and meals
TSF	transfer between committees of the same candidate/sponsor
VOT	voter registration
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 CLOSE OF THIS PERIOD
N/A						
SUBTOTALS \$			\$	\$	\$	\$

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

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for

0.00

2 Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more on this period.)

0.00

3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

0.00

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period from <u>4/24/22</u> through <u>5/21/22</u>		CALIFORNIA 460 FORM
		Page <u>15</u> of <u>18</u>
		I.D. NUMBER <u>1446570</u>

NAME OF FILER

CATHERINE DUNHAM

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 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 | 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 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 CLOSE OF THIS PERIOD
N/A					
SUBTOTALS \$		0.00	\$ 0.00	\$ 0.00	\$ 0.00

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

Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period from <u>4/24/22</u> through <u>5/21/22</u>	CALIFORNIA 460 FORM
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

NAME OF AGENT OR INDEPENDENT CONTRACTOR

N/A

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

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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
N/A				
TOTAL * \$ 0.00				

Attach additional information on appropriately labeled continuation sheets.

* 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*

Amounts may be rounded
to whole dollars.

Statement covers period

from 4/24/22

through 5/21/22

CALIFORNIA
FORM

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

I.D. NUMBER

1446570

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
N/A		\$	\$	☐ PAID ☐ FORGIVEN	\$	% RATE	\$	\$ PER ELECTION**
		\$	\$	☐ PAID ☐ FORGIVEN	\$	% RATE	\$	\$ PER ELECTION**
		\$	\$	☐ PAID ☐ FORGIVEN	\$	% RATE	\$	\$ PER ELECTION**
SUBTOTALS \$0				\$0	\$0	\$0		

*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.

Schedule H Summary

- Loans made this period.....\$ 0
(Total Column (b) plus unitemized loans of less than \$100.)
- Payments received on loans.....\$ 0
(Total Column (c) plus unitemized payments of less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.).....NET \$ 0
(Enter the net here and on the Summary Page, Column A, Line 7.)

(May be a negative number)

**If Required

Amounts may be rounded to whole dollars.

SCHEDULE I

Statement covers period
from 4/24/22
through 5/21/22

CALIFORNIA 460
FORMPage 18 of 18

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE AL SO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
---------------	---	------------------------	----------------------------

N/A

Attach additional information on appropriately labeled continuation sheets.

Schedule I Summary

Schedule I Summary	
1. Itemized increases to cash this period.	\$ 0
2. Unitemized increases to cash of under \$100 this period.	\$ 0
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ 0

4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL** \$ 0

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