

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

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CALIFORNIA 460
FORM

Page 1 of 17
For Official Use Only

Statement covers period
from 7/1/22 through 9/24/22

Date of election if applicable:
(Month, Day, Year)
11/08/2022

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
☐ Amendment (Explain below)
- ☐ Quarterly Statement
☐ Special Odd-Year Report

3. Committee Information

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

I.D. NUMBER
1446570

Treasurer(s)

NAME OF TREASURER
CATHERINE DUNHAM

MAILING ADDRESS
[REDACTED]

STREET ADDRESS (NO P.O. BOX)
[REDACTED]

CITY
[REDACTED]

STATE
[REDACTED]

ZIP CODE
[REDACTED]

AREA CODE/PHONE
[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY
[REDACTED]

MAILING ADDRESS
[REDACTED]

CITY
[REDACTED]

STATE
[REDACTED]

ZIP CODE
[REDACTED]

AREA CODE/PHONE
[REDACTED]

OPTIONAL: FAX / E-MAIL ADDRESS
[REDACTED]

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 9/30/2022
Date 9/30/2022

Executed on 9/30/2022
Date 9/30/2022

Executed on _____
Date _____

Executed on _____
Date _____

By [REDACTED] Assistant Treasurer

By [REDACTED] Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By [REDACTED] Signature of Controlling Officeholder, Candidate, State Measure Proponent

By [REDACTED] Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2

CALIFORNIA
FORM

460

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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)		
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE?		
	☐ YES ☐ 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
	☐ SUPPORT ☐ 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	☐ 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 <u>7/1/22</u> through <u>9/24/22</u>	CALIFORNIA FORM 460
Page <u>3</u> of <u>17</u>	
I.D. NUMBER <u>1446570</u>	

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	\$ 8800.00	\$ 24947.00
2. Loans Received..... Schedule B, Line 3	0.00	2725.98
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ 8800.00	\$ 27672.98
4. Nonmonetary Contributions..... Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ 8800.00	\$ 27672.98

Expenditures Made

6. Payments Made..... Schedule E, Line 4	\$ 18196.93	\$ 25122.91
7. Loans Made..... Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ 18196.93	\$ 25122.91
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	\$ 18196.93	\$ 25122.91

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ 11947.00
13. Cash Receipts..... Column A, Line 3 above	8800.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	0.00
15. Cash Payments..... Column A, Line 8 above	18196.93
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 2550.07

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

17. LOAN GUARANTEES RECEIVED

Schedule B, Part 2	\$ 2725.98
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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	\$ 18872.98	\$ 8800.00
21. Expenditures Made	\$ 6925.98	\$ 18196.93

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).

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from 7/1/22
through 9/24/22

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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/22/2022	STEVE & BRENDA SCARONI P.O. BOX 1550 HEBER, CA. 92249	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	SELF EMPLOYED	2000.00	2000.00	
7/22/2022	ROBERT DeLOACH 9370 ISAAC LORD DR. RANCHO CUCAMONGA, CA. 91701	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	250.00	250.00	
7/22/2022	DeLOACH & ASSOCIATES 8780 19th ST. STE#402 RANCHO CUCAMONGA, CA. 91701	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	RETIRED	250.00	500.00	
7/22/2022	TRUST OF PETER & JOANNE FREDRICKS 1838 HOLIDAY AVE. UPLAND, CA. 91784	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	RETIRED	100.00		
7/22/2022	DAN GAUDY BLUE WATER POOL & SPAS 1937 W. 9TH ST. TIDIPALTO CA 91784	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	POOL & SPA SUPPLIES	200.00		
SUBTOTAL \$ 2800.00						

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.)\$ 8800.00

2. Amount received this period – unitemized monetary contributions of less than \$100\$ 0

3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$ 8800.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
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 <u>7/1/2022</u> through <u>9/24/2022</u>		CALIFORNIA 460 FORM	
NAME OF FILER CATHERINE DUNHAM		Page <u>5</u> of <u>17</u>	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	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/22/2022	ALVIN RAY DICKEY 1030 FOREST PARK LANE COEUR d'ALENE, ID 83815	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	RETIRED	1500.00		
8/31/2022	TOM & KAREN BRUNDY CATTLE & HAY P.O. BOX 845 CHRYSTAL, CA 99972	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	CATTLE & HAY	1500.00		
8/31/2022	ROTHFLEISCH RANCHES, INC. 4696 OLD HWY 111 BRAWLEY, CA. 92227	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	AGRICULTURE	500.00		
9/16/2022	MADJAC FARMS, INC P.O. BOX 2135 EL CENTRO, CA. 92244	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	AGRICULTURE	2000.00		
9/16/2022	TIMOTHY HAWK 1115 ALEXANDRIA DR. SAN DIEGO, CA. 92107-3933	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	RETIRED	500.00		
SUBTOTAL \$ 6000.00						

*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.

Schedule B – Part 1 Loans Received

Statement covers period from 7/1/2022 through 9/24/2022

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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 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
JOHN R. HAWK [REDACTED]	FARMER / AG	2725.98	0	☐ PAID \$ 0 ☐ FORGIVEN \$ 0	\$ 2725.98	0 % RATE	\$ 2725.98	\$ 2725.98
☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC						\$ 0	4/23/2022	PER ELECTION** \$
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				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$		DATE DUE		DATE INCURRED	PER ELECTION** \$
				☐ PAID \$ ☐ FORGIVEN \$	\$			CALENDAR YEAR \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐								

Schedule B – Part 2 Loan Guarantors

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>7/1/2022</u> through <u>9/24/2022</u>	CALIFORNIA 460 FORM
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

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)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
JOHN B. HAWK [REDACTED] 0	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	FARMER / AG	LENDER JOHN B. HAWK DATE 4/23/2022		CALENDAR YEAR 2725.98 \$ PER ELECTION (IF REQUIRED) \$	2725.98
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR \$ PER ELECTION (IF REQUIRED) \$	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR \$ PER ELECTION (IF REQUIRED) \$	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR \$ PER ELECTION (IF REQUIRED) \$	
SUBTOTAL \$ 2725.98				Enter on Summary Page, Line 17 only.		

Schedule C Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period
from 7/1/2022
through 9/24/2022

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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					

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.).....\$ 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

FPPC Form 460 (Jan/2016))

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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 <u>7/1/2022</u> through <u>9/24/2022</u>		CALIFORNIA FORM 460	
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SEE INSTRUCTIONS ON REVERSE		I.D. NUMBER 1446570	
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				
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

from 7/1/2022

through 9/24/2022CALIFORNIA 460
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NAME OF FILER

CATHERINE DUNHAM

I.D. NUMBER

1446570

NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR
MEASURE NUMBER OR LETTER AND JURISDICTION,
OR COMMITTEE

N/A

☐ Support ☐ Oppose

☐ Support ☐ Oppose

☐ Support ☐ Oppose

☐ Support ☐ Oppose

TYPE OF PAYMENT

Monetary

☐ Nonmonetary☐ Independent

Monetary

Nonmonetary

☐ Independent☐ Monetary☐ Nonmonetary

Independent

Monetary

Nonmonetary

Independent

SUBTOTAL \$ 0.00

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

VOT

voter registration

LIT

campaign literature and mailings

PRO

professional services (legal, accounting)

WEB

information technology costs (internet, e-mail)

PRT

print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ALL SPORTS INTERNATIONAL	CMP		YARD SIGNS	8566.93
JERRY GAUNA	CMP		PUTTING UP YARD SIGNS	8130.00
ELECTIONS DEPT	FIL			300.00

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

SUBTOTAL \$ 16996.93

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)

18196.93

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 \$ 18196.93

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period
from 7/1/2022
through 9/24/2022

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NAME OF FILER

CATHERINE DUNHAM

I.D. NUMBER
1446570

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

Code	Description	Code	Description
CMP	campaign paraphernalia/misc.	MBR	member communications
CNS	campaign consultants	MTG	meetings and appearances
CTB	contribution (explain nonmonetary)*	OFC	office expenses
CVC	civic donations	PET	petition circulating
FIL	candidate filing/ballot fees	PHO	phone banks
FND	fundraising events	POL	polling and survey research
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services
LEG	legal defense	PRO	professional services (legal, accounting)
LIT	campaign literature and mailings	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		CONSULTING	1200.00

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

SUBTOTAL \$	1200,00
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Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded
to whole dollars.

Statement covers period
from 7/1/2022
through 9/24/2022

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
CATHERINE DUNHAM

I.D. NUMBER
1446570

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 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					

* 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 accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)
- INCURRED TOTALS \$ 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, plus total unitemized payments on accrued expenses under \$100.)
- PAID TOTALS \$ 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.)
- NET \$ 0.00

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

Amounts may be rounded
to whole dollars.

SCHEDULE F (CONT.)

CALIFORNIA
FORM 460

Statement covers period
from 7/1/2022
through 9/24/2022

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NAME OF FILER

CATHERINE DUNHAM

I.D. NUMBER

1446570

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	\$ 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 7/1/2022 through 9/24/2022

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NAME OF FILER

CATHERINE DUNHAM

NAME OF AGENT OR INDEPENDENT CONTRACTOR

N/A

I.D. NUMBER

1446570

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.

FPPC Form 460 (Jan/2016))

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Schedule H
Loans Made to Others*

Amounts may be rounded
to whole dollars.

SCHEDULE H

CALIFORNIA
FORM 460

Statement covers period

from 7/1/2022

through 9/24/2022

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

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I.D. NUMBER

1446570

FULL NAME, STREET ADDRESS AND ZIP CODE (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 \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
		\$	\$	☐ PAID \$ ☐ FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS		\$0	\$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.

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

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

Schedule I
Miscellaneous Increases to Cash

Amounts may be rounded
to whole dollars.

SCHEDULE I

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CATHERINE DUNHAM

Statement covers period

from 7/1/2022

through 9/24/2022

I.D. NUMBER

1446570

DATE

RECEIVED

FULL NAME AND ADDRESS OF SOURCE

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

N/A

DESCRIPTION OF RECEIPT

AMOUNT OF

INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 0.00

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