

Recipient Committee Campaign Statement Cover Page

CALIFORNIA
FORM 460

Page 1 of 12
For Official Use Only



MAY 21 2026

Imperial
County

Date of election if applicable:
(Month, Day, Year)

06/02/2026

Statement covers period

from 04/19/2026

through 05/16/2026

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)
- Quarterly Statement
- Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1487643

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION
DISTRICT 2026 DIVISION 1

Treasurer(s)

NAME OF TREASURER

ADRIANA MURILLO KIRBY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

CHUCK FISHER

MAILING ADDRESS

CITY 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 5/21/2026
Date

Executed on 5/21/2026
Date

Executed on _____
Date

Executed on _____
Date

By _____
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent/Officer, Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA **460**
FORM

Page 2 of 12

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Alex Cardenas

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Committee to Re-elect Cardenas for Imperial Irrigation District 2026 Division 1

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
[REDACTED]

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
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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
Alex Cardenas	IID DIRECTOR DIV 1	<input checked="" 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

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period
from 04/19/2026
through 05/16/2026

CALIFORNIA FORM 460

Page 3 of 12

I.D. NUMBER
1487643

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ 3494.00	\$ 12,394.00
2. Loans Received	Schedule B, Line 3 2700.00	7700.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 \$ 6194.00	\$ 20,094.00
4. Nonmonetary Contributions	Schedule C, Line 3 -0-	-0-
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 \$ 6194.00	\$ 20,094.00

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ 8911.09	\$ 21,033.54
7. Loans Made	Schedule H, Line 3 -0-	-0-
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 \$ 8911.09	\$ 21,033.54
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 0	
10. Nonmonetary Adjustment	Schedule C, Line 3 0	
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 \$ 8911.09	\$ 21,033.54

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ 1777.55
13. Cash Receipts	Column A, Line 3 above 6194.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4 0
15. Cash Payments	Column A, Line 8 above 8911.09
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 939.54

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

17. LOAN GUARANTEES RECEIVED

Schedule B, Part 2 \$

Cash Equivalents and Outstanding Debts

18. Cash Equivalents

See instructions on reverse \$

19. Outstanding Debts

Add Line 2 + Line 9 in Column B above \$

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	\$	\$

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	Total to Date
Date of Election (mm/dd/yy)	\$
	\$

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA **460**
FORM

Page 4 of 12

Statement covers period
from 04/19/2026
through 05/16/2026

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

I.D. NUMBER
1487643

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)
05/08/2026	Enedina Cardenas 2631 Sandalwood El Centro	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	400.00		
05/08/2026	Abe Cardenas 1541 Sandalwood El Centro	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	500.00		
05/08/2026	Susan Harberson 10392 Del Rio Yuma, Az 85367	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	500.00		
05/08/20206	Bill Harberson 103392 Del Rio Yuma, Az 85367	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	400.00		
05/11/20206	Betty Jo McNeece 5825 Cinnamon Rd Prescott, Az 86305	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	100.00		
SUBTOTAL \$				1900.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 3300.00

2. Amount received this period – unitemized monetary contributions of less than \$100 \$ 194.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 3494.00

*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.)

**CALIFORNIA 460
FORM**

Statement covers period

from 04/19/2026

through 05/16/2026

Page 5 of 12

NAME OF FILER
COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1
I.D. NUMBER
1487643

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE * <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> 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)
05/11/2026	Town Center Village LLC El Monte, Ca 91731	<input checked="" type="checkbox"/> COM		500.00		
05/13/2026	Edward Singh 1767 S 21St El Centro, Ca 9224	<input checked="" type="checkbox"/> IND	RETIRED	500.00		
05/13/2026	Chuck Fisher [REDACTED]	<input checked="" type="checkbox"/> IND	RETIRED	400.00		
		<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				
SUBTOTAL \$				1400.00		

*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 Summary

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

Statement covers period from 04/19/2026 through 05/16/2026

I.D. NUMBER
1487643

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
		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	\$ PER ELECTION** \$ CALENDAR YEAR
ALEX CARDENAS [REDACTED]	CASA Executive Director	\$	2500.00	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	2500.00 DATE DUE	% RATE \$	\$ DATE INCURRED	\$ PER ELECTION** \$ CALENDAR YEAR
ALEX CARDENAS [REDACTED]	CASA Executive Director	\$	200.00	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	200.00 DATE DUE	% RATE \$	\$ DATE INCURRED	\$ PER ELECTION** \$ CALENDAR YEAR
		\$		<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	DATE DUE	% RATE \$	\$ DATE INCURRED	\$ PER ELECTION** \$ CALENDAR YEAR
SUBTOTALS		\$	\$	\$	\$	\$	\$	\$

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

Schedule B Summary

- Loans received this period (Total Column (b) plus unitemized loans of less than \$100.) \$ 2700.00
- Loans paid or forgiven this period \$ 0
- Net change 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.)
 (Subtract Line 2 from Line 1.) NET \$ 0

Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

†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.

Amounts may be rounded to whole dollars.

Statement covers period
from 04/19/2026
through 05/16/2026
Page 7 of 12
I.D. NUMBER
1487643

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
DTK PRINT 1038 S. 14TH ST. EL CENTRO, CA 92243	CMP		CAMPAIGN MATERIALS	189.44
IV DEMOCRATS PO BOX 964, EL CENTRO, CA 92243	CVC		COMMUNITY/POLITICAL ORGANIZATION DONATION	200.00
RICARDO JAMARILLO 687 S. 6TH ST. EL CENTRO, CA 92243	CNS		CAMPAIGN CONSULTANT	250.00
SUBTOTAL \$				639.44

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

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 7894.66
- Unitemized payments made this period of under \$100 \$ 1016.43
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ -0-
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** 8911.09

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

SCHEDULE E (CONT.)

Amounts may be rounded to whole dollars.

Statement covers period from 04/19/2026 through 05/16/2026	CALIFORNIA FORM 460
Page 8 of 12	I.D. NUMBER 1487643

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ELIA FUENTES 2460 W. ELM AVE, EL CENTRO, CA 92243	CMP	BANNERS AND YARD SIGNS	600.00
BAJA SHAVED ICE IMPERIAL, CA 92251	FND	FUNDRAISING EVENTS	525.00
BAJA SHAVED ICE IMPERIAL, CA 92251	FND	FUNDRAISING EVENTS	550.00
MALLORYS RESTAURANT 117 W. MAIN ST. WESTMORLAND, CA 92281	FND	CAMPAIGN PLANNING MEETING	177.55
IVONNE SOTOMAYOR 615 FLYING CLOUD DR. IMPERIAL, CA 92251	LIT	MARKETING LITERATURE	1,304.00

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

SUBTOTAL \$ 3156.55

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

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

CALIFORNIA 460 FORM	
Statement covers period from 04/19/2026	Page 9 of 12
through 05/16/2026	I.D. NUMBER 1487643

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

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 |
| FLI | 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
USPS 1598 W. MAIN ST, EL CENTRO, CA 92243	OFC		POSTAGE/MAILING EXPENSE	624.00
AMERICAN CITIZEN CLUB 890 B ST. BRAWLEY, CA 92227	CVC		DONATION	500.00
CAFETON EL CENTRO, CA 92243	CVC		DONATION	103.00
LOS VIGILANTES 1095 S. 4TH ST. EL CENTRO, CA 92243	CVC		DONATION	200.00
KIRBY BUSINESS SOLUTIONS, LLC	PRO		TREASURER SERVICES	500.00

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

SUBTOTAL \$ 1927.00

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period
from 04/19/2026
through 05/16/2026

**CALIFORNIA 460
FORM**

Page 10 of 12

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

I.D. NUMBER
1487643

COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

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
JIM SHIN 1037 SANDALWOOD DRIVE, EL CENTRO, CA 92243	CNS		CAMPAIGN CONSULTANTS	400.00
USPS 1598 W. MAIN ST, EL CENTRO, CA 92243	OFC		POSTAGE/MAILING EXPENSE	546.00
LA FONDA 1950 S. 4TH ST., EL CENTRO, CA 92243	FND		CAMPAIGN PLANNING MEETING	522.30
USPS 1598 W. MAIN ST, EL CENTRO, CA 92243	OFC		POSTAGE/MAILING EXPENSE	546.00
USPS 1598 W. MAIN ST, EL CENTRO, CA 92243			POSTAGE/MAILING EXPENSE	156.00

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

SUBTOTAL \$ 2170.30

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>04/19/2026</u>		CALIFORNIA FORM 460
through <u>05/16/2026</u>		
Page <u>11</u> of <u>12</u>		I.D. NUMBER 1487643

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

COMMITTEE TO RE-ELECT GARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
RICARDO JAMARILLO 687 S. 6TH ST. EL CENTRO, CA 92243	CNS		CAMPAIGN CONSULTANTS	250.00
BD STUDIOS 1202 MANUEL A. ORTIZ AVE, EL CENTRO, CA 92243	RAD		VIDEO PRODUCTION FOR CAMPAIGN	1500.00
RUBEN RASPADOS 734 S. 4 TH ST. EL CENTRO, CA 92243	FND			127.92
JIM SHIN 1037 SANDALWOOD DRIVE, EL CENTRO, CA 92243	CNS		CAMPAIGN CONSULTANTS	400.00
STELLA MATA 314 CENTER ST. WESTMORLAND, CA 92281	FND		MEET AND GREET	280.00

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

SUBTOTAL \$ 2557.92

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

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>04/19/2026</u>	CALIFORNIA 460 FORM
through <u>05/16/2026</u>	
	Page <u>12</u> of <u>12</u>
SEE INSTRUCTIONS ON REVERSE	I.D. NUMBER 1487643

NAME OF FILER
COMMITTEE TO RE-ELECT CARDENAS FOR IMPERIAL IRRIGATION DISTRICT 2026 DIVISION 1

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
RICARDO JAMARILLO 687 S. 6TH ST. EL CENTRO, CA 92243	CNS		CAMPAIGN CONSULTANT	250.00
RICARDO JAMARILLO 687 S. 6TH ST. EL CENTRO, CA 92243	CNS	+	CAMPAIGN CONSULTANT	350.00
SUBTOTAL \$				600.00

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