### Statement of Economic Interests

**Cover Page**

A Public Document

**Name of Filer**

Salomen, Kelly Ann

**1. Office, Agency, or Court**

- **Agency Name:** (Do not use acronyms)
  -  
- **Napa County**
  - **Division, Board, Department, District, if applicable**
  -  
- **Napa County Unified School District**
  - **Your Position**
  -  
- **Board Number - District 3**
  -  

**(Do not use acronyms)**

- **Agency:**
  -  
- **Position:**
  -  

**2. Jurisdiction of Office (Check at least one box)**

- **State**
  -  
- **Multi-County**
  -  
- **City of Napa**
  -  
- **County of Napa**
  -  
- **Other**
  -  

**3. Type of Statement (Check at least one box)**

- **Annually:** The period covered is January 1, 2021 through December 31, 2021.
  -  
- **or**
  -  
- **Assuming Office:** Date assumed __/__/2021, through December 31, 2021.
  -  
- **Leaving Office:** Date Left __/__/2021 (Check one circle)
  -  
- **The period covered is January 1, 2021 through the date of leaving office.**
  -  
- **The period covered is __/__/2021, through the date of leaving office.**
  -  

**Candidate Date of Election:** 11/8/2022 and office sought, if different than Part 1:

**4. Schedule Summary (must complete)**

<table>
<thead>
<tr>
<th>Schedule</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Investments - schedule attached</td>
</tr>
<tr>
<td>2</td>
<td>Schedule B - Real Property - schedule attached</td>
</tr>
</tbody>
</table>

**None - No reportable interests on any schedule**

**5. Verification**

- **Name:** Kelly Ann Salomen
- **Address:**  
  - **City:** Calistoga
  - **State:** CA
  - **ZIP Code:** 95463

**Telephone:** (707) 760-6213
**Email Address:** kellysalome22@gmail.com

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

**Date Signed:** 07/22/2022

**Signature:** Kelly Ann Salomen

**FPPC Form 700 - Cover Page (2021/2022)**
### SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

#### 1. BUSINESS ENTITY OR TRUST

<table>
<thead>
<tr>
<th>Name</th>
<th>Cathays Valley (Real Estate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Cathays Valley, Ca. 95355</td>
</tr>
<tr>
<td>Trust</td>
<td>□ Yes</td>
</tr>
<tr>
<td>Business Entity</td>
<td>□ Yes</td>
</tr>
</tbody>
</table>

#### GENERAL DESCRIPTION OF THIS BUSINESS

<table>
<thead>
<tr>
<th>Independent Contractor for CVEP</th>
<th>FAIR MARKET VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>IF APPLICABLE, LIST DATE:</td>
</tr>
<tr>
<td></td>
<td>□ $0 - $10,000</td>
</tr>
<tr>
<td></td>
<td>□ $10,001 - $100,000</td>
</tr>
<tr>
<td></td>
<td>□ $100,001 - $1,000,000</td>
</tr>
<tr>
<td></td>
<td>□ Over $1,000,000</td>
</tr>
</tbody>
</table>

| NATURE OF INVESTMENT | □ Partnership | □ Sole Proprietorship | □ Other |

#### YOUR BUSINESS POSITION Realize

| Income | $0 - $400 | □ $500 - $1,000 | □ Over $1,000,000 |

#### 2. INCOME FROM EACH REPORTABLE SINGLE SOURCE OF INCOME OF MORE THAN $10,000 OR MORE

| Income | $0 - $400 | □ $500 - $1,000 | □ Over $1,000,000 |

#### 3. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

<table>
<thead>
<tr>
<th>Name of Business Entity, if any</th>
<th>Cathays Valley (Real Estate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of Business Activity</td>
<td>Real Estate Investments</td>
</tr>
<tr>
<td>City or Other Practice Location</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $10,000</td>
<td>□ $10,001 - $100,000</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>□ Over $1,000,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NATURE OF INTEREST</th>
<th>□ Property Ownership/Ded of Trust</th>
<th>□ Loan</th>
<th>□ Partnership</th>
</tr>
</thead>
</table>

#### Income Source

| Income | $0 - $400 | □ $500 - $1,000 | □ Over $1,000,000 |

#### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

<table>
<thead>
<tr>
<th>Name of Business Entity, if any</th>
<th>Cathays Valley (Real Estate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of Business Activity</td>
<td>Real Estate Investments</td>
</tr>
<tr>
<td>City or Other Practice Location</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $10,000</td>
<td>□ $10,001 - $100,000</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>□ Over $1,000,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NATURE OF INTEREST</th>
<th>□ Property Ownership/Ded of Trust</th>
<th>□ Loan</th>
<th>□ Partnership</th>
</tr>
</thead>
</table>

#### Income Source

| Income | $0 - $400 | □ $500 - $1,000 | □ Over $1,000,000 |
SCHEDULE B
Interests in Real Property
(Including Rental Income)

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

Cathays Valley

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☑ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
☐ 07/05/22
☐ 07/05/21
☐ 07/12/21

ACQUIRED
DISPOSED

NATURE OF INTEREST
☑ Ownership/Deed of Trust
☐ Easement
☐ Leasehold
☐ Yr. ending
☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $500
☐ $501 - $1,000
☑ $1,001 - $15,000
☐ $15,001 - $100,000
☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

☐ None

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE
☐ %
☐ None

TERM (Month/Year)

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $000 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE
☐ %
☐ None

TERM (Month/Year)

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $000 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000
☐ Guarantor, if applicable

Comments:

PPFC Form 700 Schedule B (2021/2022)
**SCHEDULE C**
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
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<tbody>
<tr>
<td>Commission</td>
</tr>
<tr>
<td><strong>ADDRESS</strong> (Business Address Acceptable)</td>
</tr>
<tr>
<td>Oakley, CA, 95201</td>
</tr>
</tbody>
</table>

**BUSINESS ACTIVITY, IF ANY, OF SOURCE**

**RENT**

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>RENT</td>
</tr>
<tr>
<td><strong>ADDRESS</strong> (Business Address Acceptable)</td>
</tr>
<tr>
<td>Oakley, CA, 95201</td>
</tr>
</tbody>
</table>

**BUSINESS ACTIVITY, IF ANY, OF SOURCE**

**YOUR BUSINESS POSITION**

**GROSS INCOME RECEIVED**

- No Income - Business Position Only
- $0 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**

- Salary
- Spouse or registered domestic partner’s income
- Partnership (less than 10% ownership. For 10% or greater use Schedule A-2.)
- Self-employment
- Royalty
- Personal services
- Royalty
- Service

**LOANS RECEIVED OR OBTAINED DURING THE REPORTING PERIOD**

- You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender’s regular course of business must be disclosed as follows:

<table>
<thead>
<tr>
<th>NAME OF LENDER</th>
</tr>
</thead>
</table>

**ADDRESS** (Business Address Acceptable)

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $0 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**INTEREST RATE**

**TERM (Month/Year)**

- %
- Month

**SECURITY FOR LOAN**

- Real Property
- Personal residence
- Other

**Comments:**

FPPC Form 700 Schedule C (2021/2022)
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

2. Verification:

☐ On or before (form to be completed)

☐ I contributed personal funds in excess of the expenditure ceiling for the election stated above.

☐ I did not exceed the expenditure ceiling in the primary or special election held on

☐ I did not accept the voluntary expenditure ceiling for the election held on

☐ I accept the voluntary expenditure ceiling for the election held on

☐ I do not accept the voluntary expenditure ceiling for the election held on

☐ I did not accept the voluntary expenditure ceiling for the election stated above.

2. State Candidate Expenditure Limit Statement:

<table>
<thead>
<tr>
<th>Office or Position</th>
<th>Expenditure Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Board</td>
<td>$20,000</td>
</tr>
<tr>
<td>Candidate Name</td>
<td>Kathy Scott</td>
</tr>
<tr>
<td>20876-6273</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td>48206</td>
</tr>
<tr>
<td>City/State/Zip</td>
<td>Laguna Niguel, CA 92653</td>
</tr>
</tbody>
</table>

1. Candidate Information:

Candidate Information

Check One: "Initial" or "Amendment"

Candidate Information

Filed: 7/28/2022

CA: 04-04-2051

ELD
<table>
<thead>
<tr>
<th>Name of Committee</th>
<th>95545 209-78-6573</th>
</tr>
</thead>
<tbody>
<tr>
<td>State of Incorporation</td>
<td>CA</td>
</tr>
<tr>
<td>Woman Registered No.</td>
<td>59506</td>
</tr>
<tr>
<td>Date of Incorporation</td>
<td>2002</td>
</tr>
<tr>
<td>City</td>
<td>CA</td>
</tr>
<tr>
<td>County</td>
<td>Orange County</td>
</tr>
<tr>
<td>Postal Code</td>
<td>92648</td>
</tr>
<tr>
<td>Zip Code</td>
<td>92648</td>
</tr>
<tr>
<td>Street Address</td>
<td>123 Main St.</td>
</tr>
<tr>
<td>City</td>
<td>Anaheim</td>
</tr>
<tr>
<td>County</td>
<td>Orange County</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>92801</td>
</tr>
</tbody>
</table>

**2. Treasurer and Other Principal Officers**

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>KATHY WILLIAMS</td>
<td>Treasurer</td>
</tr>
</tbody>
</table>

**3. Verification**

Access additional information on opposingly labeled contribution sheets.

**Statement of Organization**

<table>
<thead>
<tr>
<th>Statement of Organization</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4/10</td>
</tr>
</tbody>
</table>

**Filed**

Form 410

California
Candidate Committee

<table>
<thead>
<tr>
<th>Name of Candidate/Committee or Candidate</th>
<th>Elected or Unincorporated Business Entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>---------------------------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If the candidate acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

Let the political party with which each officerholder or candidate is affiliated or which "endorsed" the candidate or officerholder control the election.

Let the name of each contributing officerholder or candidate or state measure proponent if candidate or officerholder controlled.

**CA 65538**

<table>
<thead>
<tr>
<th>212 Fellowship</th>
<th>212 Fellowship</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA 95666</td>
<td>CA 95666</td>
</tr>
<tr>
<td>320-455-7067</td>
<td>320-455-7067</td>
</tr>
</tbody>
</table>

All contributions must be handled pursuant to California's Fair Political Practices Act.

The Committee to Elect Kelly Salmon for Merced County School Board District 3.

Instructions on reverse.

Revised Committee Statement of Organization
MAY 30, 2002

KETHEM WILLIAMS
SEP 29 2002

CALIFORNIA 460
FILED

DATE OF ELECTION OR REFERENDUM: SEP 29 2002

Recipient Committee
Campaign Statement

Cover Page

See Instructions on Reverse

Post-Primary Candidate Committee
Primary Post-Primary Candidate
General Election Candidate

SEE INSTRUCTIONS ON REVERSE
7. If you or your employer contribute or spend any amount of money to influence the outcome of any election, report the details in this section. Include the name of the committee, the amount, and how the money was spent.

8. Office of the Governor, Secretary of State, or Controller Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

9. Office of the Attorney General or Treasurer Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

10. Office of the Controller or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

11. Office of the Registrar or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

12. Office of the Director or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

13. Office of the Auditor or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

14. Office of the Commissioner or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

15. Office of the Lieutenant Governor or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

16. Office of the Chief Justice or Judge Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

17. Office of the State Treasurer or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.

18. Office of the State Senator or Candidate Report the details of your contributions and expenditures in this section. Include the name of the committee, the amount, and how the money was spent.
<table>
<thead>
<tr>
<th>Account</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Loans</td>
<td>$600.00</td>
</tr>
<tr>
<td>2. Contributions Received</td>
<td>$3360.00</td>
</tr>
<tr>
<td>3. Total Contributions</td>
<td>$3360.00</td>
</tr>
<tr>
<td>4. Non-memory Contributions</td>
<td>$3360.00</td>
</tr>
<tr>
<td>5. Prepaid Expenses (Prepaid Bill)</td>
<td>$3360.00</td>
</tr>
<tr>
<td>6. Petty Cash Payments</td>
<td>$3360.00</td>
</tr>
<tr>
<td>7. Other Expenses</td>
<td>$3360.00</td>
</tr>
<tr>
<td>8. Total Expenditures Made</td>
<td>$3360.00</td>
</tr>
<tr>
<td>9. Total Expenditures</td>
<td>$3360.00</td>
</tr>
</tbody>
</table>

**Campaign Disclosure Statement**

Candidate: [Name]

Date: [Date]

Amounts may be rounded to whole dollars.

[Signature]

[Title]
### Schedule A

**TOTAL $ 600.00**

1. Amount received this period - individual money contributions (Cuban money contributions).
2. Total money contributions received this period.
3. A total money contributions received this period.

#### Schedule A Summary

<table>
<thead>
<tr>
<th>Name of Person</th>
<th>Amount Received</th>
<th>Date Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Valley</td>
<td>$250.00</td>
<td>02/01/2022</td>
</tr>
<tr>
<td>School District</td>
<td>$250.00</td>
<td>02/01/2022</td>
</tr>
</tbody>
</table>

#### Notes
- Form 460: California
- Schedule A
- Due by March 31, 2022
- www.form460.org
Schedule B

Summary

<table>
<thead>
<tr>
<th>Date Due</th>
<th>Amount</th>
<th>Date of Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/21/2002</td>
<td>$0</td>
<td>6/21/2002</td>
</tr>
<tr>
<td>6/30/2000</td>
<td>$0</td>
<td>6/30/2000</td>
</tr>
<tr>
<td>6/30/2000</td>
<td>$0</td>
<td>6/30/2000</td>
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<td>6/30/2002</td>
</tr>
<tr>
<td>6/30/2002</td>
<td>$0</td>
<td>6/30/2002</td>
</tr>
</tbody>
</table>

Subtotal: $0
### Schedule E Summary

<table>
<thead>
<tr>
<th>Amount Paid</th>
<th>Description of Payment</th>
<th>Code or Other Number</th>
<th>Name and Address of Payee</th>
</tr>
</thead>
<tbody>
<tr>
<td>12,000</td>
<td>CDP</td>
<td></td>
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</tr>
<tr>
<td>6,000</td>
<td>CDP</td>
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<tr>
<td>22,000</td>
<td>CDP</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal $ 43,250.00**

- **Medco CA 95495**
- **Meritas CA 95338**
- **Mississippi CA 75090**
- **Medco CA 95495**

**Total:** $ 43,250.00

---

**NOT YET RECEIVED**

**Page of 460**

**Schedule E**

**Form 460**

**Instruction of Reverse**

**Payments Made**

**Name or Firm**

**Date Paid**

**Amount Owed Per Pledge**

**PAY RECON**

**Date of Payment**

**Amortization Group**

**Interest Only**

**Primary Loan**

**Number of Payment**

**Total Number of Payments**

**Credit**

**Debit**

**Notes**

**Other**

**Signatures**

**Paid to**

**Expires**

**By**

**For**

**Date**

**Number of Days**

**Amount Owed**

**Principal**

**Interest**

**Other**

**Total**

**Total Amount Owed**

**Total Amount Paid**

**Total Amount Outstanding**
**Receipient Committee:**

- **Committee Name:** [Redacted]
- **Committee Status:** [Redacted]
- **Type of Statement:** [Redacted]
- **Date of Statement:** 11/08/2022
- **Statement Cover Period:** 09/22/2022 to 11/20/2022

- **Candidate Information:**
  - Full Name: [Redacted]
  - Address: [Redacted]
  - City: [Redacted]
  - State: [Redacted]
  - Zip Code: [Redacted]
  - Phone: [Redacted]

- **Committee Information:**
  - Treasurer(s): [Redacted]
  - Street Address: [Redacted]

- **Filing Information:**
  - Date of Filing: 11/08/2022
  - Filer: [Redacted]
  - Contact Information: [Redacted]

- **Purpose:**
  - [Redacted]

- **Other Notes:**
  - [Redacted]
<table>
<thead>
<tr>
<th>Name of Opponent or Candidate</th>
<th>Office Sought or Held</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vice President of the State Board of Education</td>
<td>(no office held)</td>
</tr>
</tbody>
</table>

7. Primarily Formed Candidate/Continued Candidate Committee / List Name of:

8. Opponent:

9. Opponent of Opponent or Candidate:

10. Ballot No. or Letter: Junction

6. Primarily Formed Ballot Measure Committee:

460 Cover Page - Part 2

California

FORM 460

Cover Page - Part 2
<table>
<thead>
<tr>
<th>Code</th>
<th>Amount</th>
<th>Name</th>
<th>Address</th>
<th>City</th>
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</tr>
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<td>CO</td>
<td>500.00</td>
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<tr>
<td>N</td>
<td>500.00</td>
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<td>Proprietor ITC</td>
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<td>Vendor Company</td>
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<td>150.00</td>
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<td></td>
<td>500.00</td>
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<td></td>
</tr>
</tbody>
</table>

**Schedule A Summary**

1. Amount received this period — non-campaign monetary contributions:

   - 500.00

2. Amount received this period — unitemized monetary contributions of less than $1,000:

   - 500.00

3. Total monetary contributions received this period:

   - 1,000.00

**Subtotal**:

- 500.00

**Taxpayer Information**

- **Name**: [Name]
- **Address**: [Address]
- **City**: [City]
- **State**: [State]
- **Zip Code**: [Zip Code]

**Candidateicky CA 95960**

**Date**: 10/11/2002

**Campaign Statement**

- **Amount Received**: $500.00
- **Purpose**: [Purpose]
- **Receive Date**: 10/11/2002

**Contributor Information**

- **Name**: [Name]
- **Address**: [Address]
- **City**: [City]
- **State**: [State]
- **Zip Code**: [Zip Code]

**Schedule A**

- **Amounts may be rounded**

---

**Schedule B**

- **Amounts may be rounded**

---

**Schedule C**

- **Amounts may be rounded**

---

**Schedule D**

- **Amounts may be rounded**

---

**Schedule E**

- **Amounts may be rounded**

---
Schedule A - Part 1

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Loans received</td>
<td>$11,000</td>
</tr>
<tr>
<td>2.</td>
<td>Total income (including loans of less than $100)</td>
<td>$0</td>
</tr>
<tr>
<td>3.</td>
<td>Net</td>
<td>$11,000</td>
</tr>
</tbody>
</table>

**Note:** This form is a summary of the income and expenses related to the operation of the business for the tax year. It includes information about loans received, income, expenses, and other financial details. The form is used to report income and expenses accurately for tax purposes.
Schedule E Summary

<table>
<thead>
<tr>
<th>Amount</th>
<th>Description of Payment</th>
<th>Code or Name and Address of Payee</th>
</tr>
</thead>
<tbody>
<tr>
<td>36.00</td>
<td></td>
<td>CAF</td>
</tr>
<tr>
<td>76.00</td>
<td></td>
<td>CAF</td>
</tr>
<tr>
<td>469.00</td>
<td></td>
<td>CAF</td>
</tr>
</tbody>
</table>

Total $890.00

1. Listed payments made this period (include all Schedule E subparts).
2. Unlisted payments made this period of under $100.
3. Total interest paid this period on loans (enter amount from Schedule B, Part 1, Column A, line 6).
4. Total payments made this period (add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, line 6).

Notes:
- Payments for contributions and independent expenditures must also be summarized on Schedule D.

CA 93549

Addressee: CA 93553

Mariposa County Chamber of Commerce

Name and Address of Payee:

CA 93549

Mariposa County Chamber of Commerce

Additional Notes:
- If any of the following codes correctly describe the payment, you may enter the code. Otherwise, describe the payment.
4. Verification

I hereby certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

[Signature]

[Date]

5. Campaign Information

[Committee Name (OCR)]

[Committee Number (OCR)]

[Address (OCR)]

[City (OCR)]

[State (OCR)]

[Zip Code (OCR)]

[Telephone Number (OCR)]

6. Other Information

[Date of Election (OCR)]

[Date of Filing (OCR)]

[Form Number (OCR)]

[State Code (OCR)]
### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outstanding Debts, line 6</td>
<td>$703.00</td>
</tr>
<tr>
<td>Cash Equivalents, line 8</td>
<td>$0.00</td>
</tr>
<tr>
<td>Total column B, line 2</td>
<td>$703.00</td>
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</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance, line 15</td>
<td>$1,031.00</td>
</tr>
<tr>
<td>Previous Summary Page, line 15</td>
<td>$1,031.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Expenditures Made, line 2</td>
<td>$433.00</td>
</tr>
<tr>
<td>2. Expenditures Made, column B</td>
<td>$433.00</td>
</tr>
<tr>
<td>2.1. Expenditures Made, line 1</td>
<td>$0.00</td>
</tr>
<tr>
<td>2.2. Expenditures Made, line 2</td>
<td>$0.00</td>
</tr>
<tr>
<td>2.3. Expenditures Made, line 3</td>
<td>$433.00</td>
</tr>
<tr>
<td>2.4. Expenditures Made, line 4</td>
<td>$0.00</td>
</tr>
<tr>
<td>2.5. Expenditures Made, line 5</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Contributions Received, line 6</td>
<td>$894.00</td>
</tr>
<tr>
<td>6. Contributions Received, column A</td>
<td>$894.00</td>
</tr>
<tr>
<td>6.1. Contributions Received, line 1</td>
<td>$0.00</td>
</tr>
<tr>
<td>6.2. Contributions Received, line 2</td>
<td>$0.00</td>
</tr>
<tr>
<td>6.3. Contributions Received, line 3</td>
<td>$433.00</td>
</tr>
<tr>
<td>6.4. Contributions Received, line 4</td>
<td>$0.00</td>
</tr>
<tr>
<td>6.5. Contributions Received, line 5</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

### General Elections

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total General Elections, line 10</td>
<td>$1,950.00</td>
</tr>
<tr>
<td>10. General Elections, column A</td>
<td>$1,950.00</td>
</tr>
<tr>
<td>10.1. General Elections, line 1</td>
<td>$0.00</td>
</tr>
<tr>
<td>10.2. General Elections, line 2</td>
<td>$0.00</td>
</tr>
<tr>
<td>10.3. General Elections, line 3</td>
<td>$1,950.00</td>
</tr>
<tr>
<td>10.4. General Elections, line 4</td>
<td>$0.00</td>
</tr>
<tr>
<td>10.5. General Elections, line 5</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

### Expenditures Limit Summary for Statewide Candidates

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expenditures Limit Summary for Statewide Candidates, line 20</td>
<td>$0.00</td>
</tr>
<tr>
<td>20. Expenditures Limit Summary for Statewide Candidates, line 21</td>
<td>$0.00</td>
</tr>
<tr>
<td>20.1. Expenditures Limit Summary for Statewide Candidates, line 22</td>
<td>$0.00</td>
</tr>
<tr>
<td>20.2. Expenditures Limit Summary for Statewide Candidates, line 23</td>
<td>$0.00</td>
</tr>
<tr>
<td>20.3. Expenditures Limit Summary for Statewide Candidates, line 24</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

---

**Note:** Amounts may be rounded to whole dollars.
Schedule A Summary

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCC</td>
<td>$150.00</td>
</tr>
<tr>
<td>PTF</td>
<td>$0.00</td>
</tr>
<tr>
<td>OTH</td>
<td>$0.00</td>
</tr>
<tr>
<td>COM</td>
<td>$0.00</td>
</tr>
<tr>
<td>IND</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Subtotal:** $150.00

**Per Election:**

- **Per Election Calendar Year:**
  - Amount: $100.00
  - Date: 10/23/2022
  - Description: Received

- **Per Election Cumulative to Date:**
  - Amount: $50.00
  - Date: 10/23/2022
  - Description: Received

**TOTAL:** $150.00

**Other:**

- **From:** 01/01/2022
- **Through:** 12/31/2022

**Amounts may be rounded.**

**Schedule A:**

Recipient Name: Tuckrow, CA 93800

Signatory: Vincent Thomas

Contributor Name: Modesto, CA 95355

Signatory: Helen Denson

**Form:** Schedule A

**ID Number:** 1456582

**Page:** 460

**Schedule A:**

**Monetary Contributions Received:**

**Name of Registrant:** See Instructions on Reverse

**Date:** 12/31/2022

**Period Covered by Statement:** From 10/03/2022

**Amount:** To whole dollars.
## Schedule E Summary

**Total** $477.00

<table>
<thead>
<tr>
<th>Amount</th>
<th>Description of Payment</th>
<th>Code or Name and Address of Payee</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.00</td>
<td>Service fee for bank account</td>
<td>OFC</td>
</tr>
<tr>
<td>425.00</td>
<td></td>
<td>PPO</td>
</tr>
</tbody>
</table>

**Name of Payee**
- Wenzlau CA 93538
- Wenzlau Bank
- Wenzlau CA 93538
- Wenzlau

**Code or Name and Address of Payee**
- Shannon Luchs

**Notes**
- If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

---

**Form 460 (Rev 03/2012)**

**Schedule E**

**Payment Made**
- Amounts may be rounded to whole dollars.

**Instructions on Reverse**

**Form 460 California**

**Page 4 of 5**

**10/31/2022**
<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Treasurer and Other Principal Officers</td>
<td>[Handwritten: Re POWA County Clerk, 2009-617-744]</td>
</tr>
<tr>
<td>3. Verification</td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled contribution sheets.

Name of Candidate: [Handwritten: Re POWA County Clerk, 2009-617-744]

Address: [Handwritten: Re POWA County Clerk, 2009-617-744]

City: [Handwritten: Re POWA County Clerk, 2009-617-744]

State: [Handwritten: Re POWA County Clerk, 2009-617-744]

Zip Code: [Handwritten: Re POWA County Clerk, 2009-617-744]

E-Mail Address: [Handwritten: Re POWA County Clerk, 2009-617-744]

Full Mailing Address (if different): [Handwritten: Re POWA County Clerk, 2009-617-744]

E-mail Address (if necessary): [Handwritten: Re POWA County Clerk, 2009-617-744]

City: [Handwritten: Re POWA County Clerk, 2009-617-744]

State: [Handwritten: Re POWA County Clerk, 2009-617-744]

Zip Code: [Handwritten: Re POWA County Clerk, 2009-617-744]

Street Address (if necessary): [Handwritten: Re POWA County Clerk, 2009-617-744]

City: [Handwritten: Re POWA County Clerk, 2009-617-744]

State: [Handwritten: Re POWA County Clerk, 2009-617-744]

Zip Code: [Handwritten: Re POWA County Clerk, 2009-617-744]

Street Address (if necessary): [Handwritten: Re POWA County Clerk, 2009-617-744]

City: [Handwritten: Re POWA County Clerk, 2009-617-744]

State: [Handwritten: Re POWA County Clerk, 2009-617-744]

Zip Code: [Handwritten: Re POWA County Clerk, 2009-617-744]

Street Address (if necessary): [Handwritten: Re POWA County Clerk, 2009-617-744]

City: [Handwritten: Re POWA County Clerk, 2009-617-744]

State: [Handwritten: Re POWA County Clerk, 2009-617-744]

Zip Code: [Handwritten: Re POWA County Clerk, 2009-617-744]

Street Address (if necessary): [Handwritten: Re POWA County Clerk, 2009-617-744]