Recipient Committee Campaign Statement Cover Page Statement covers period Date of election if applicable: RECEIVE FORM 1 21 25 21	60
Cover Page Statement covers period Date of election if applicable: RECEIVEL (Month, Day Year)	טע
Statement covers period Date of election if applicable: A C C C C C C C C C C C C C C C C C C	The second second
(Month, Day, Year)	
10/23/2022 Rage of	- 8
Trom	
12/21/2022	
tnrough	
Kings County Elections	
1. Type of Recipient Committee All Committees - Complete Parts 1, 2, 3, and 4 2. Type of Statement:	
X Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Preelection Statement Quarterly Statement	
State Candidate Election Committee Special Odd-Year Report	
Recall	- 1
(Also Complete Part 5) (Also file a Form 410 Termination)	
(Also Complete Part 6) General Purpose Committee Amendment (Explain Below)	
Primarily Formed Candidate/	
Constitutes Committee	
Small Contributor Committee (Also Complete Part 7) Political Party/Central Committee	
3. Committee Information I.D. NUMBER 1444506 Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER	
Chavez for Supervisor 2022	
MAILING ADDRESS	
STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA COD	E/PHONE
The last the	56-1542
CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY	00-1042
Stratford, CA 93266 559-639-3308 MAILING ADDRESS (IF DIFFERENT) NO, AND STREET OR P.O. BOX MAILING ADDRESS	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS	
CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE	EPHONE
Stratford, CA 93266	
OPTIONAL: FAX / E-MAIL ADDRESS Collideration	
kellylawler@thekalgroup.com	
4. Verification	-
I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and in the attached schedules is true and compared to the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the information contained herein and the best of my knowledge the best of my knowledge the best of my knowledge the best of my knowle	olete I
certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	-
	Y
Executed on12/21/2022 By Kelly Lawler (4
Signature of Treasurer or Assistant Treasurer	5.8
Executed on	-
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor	25
Executed onByBy	-
	S .
Executed onBy	

Recipient Committee Campaign Statement Cover Page - Part 2

	COVE	RPA	GE - PA	RT 2
CALIF		1	160	1
FOI	RM	h	·U	7
	2		21	
Page	_	of _	21	-

THE OF OFFICE ICLOSED OF CHARLES		NAME OF BALLOT MEASURE		
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE		
Martin Chavez		BALLOT NO. OR LETTER JURIS	SDICTION	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NU	MBER IF APPLICABLE)	BALLOT NO. OR LETTER JOHNS	SDICTION	SUPPOR
Board of Supervisors Kings	1			☐ OPPOSE
ESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT Stratfo	Y STATE ZIP rd, CA 93266	Identify the controlling offi any.	iceholder, candidate, or s	tate measure proponent, if
oleted Committees Not Included in this Statement		NAME OF OFFICEHOLDER, CANDIDATE	, OR PROPONENT	
Related Committees Not Included in this Statement tool included in this statement that are controlled by you or are prim. make expenditures on behalf of your candidacy	: List any committees arily formed to receive contributions or	OFFICE SOUGHT OR HELD	Ir	DISTRICT NO. IF ANY
and apparatus de dit butter de jour derinteley				
OMMITTEE NAME	I.D. NUMBER CONTROLLED COMMITTEE?	7. Primarily Formed Cand officeholder(s) or candidate(s)	idate/Officeholder Comm	ittee List names of primarily formed.
COMMITTEE NAME IAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS	CONTROLLED COMMITTEE?	7. Primarily Formed Cand	idate/Officeholder Comm) for which this committee is	HELD SUPPORT
OMMITTEE NAME AME OF TREASURER OMMITTEE ADDRESS STREET ADDRESS	I.D. NUMBER CONTROLLED COMMITTEE? YES NO (NO P.O. BOX)	7. Primarily Formed Cand officeholder(s) or candidate(s)	idate/Officeholder Comm) for which this committee is ATE OFFICE SOUGHT OR	HELD SUPPORT OPPOSE HELD SUPPORT
OMMITTEE NAME AME OF TREASURER OMMITTEE ADDRESS STREET ADDRESS ITY STATE	I.D. NUMBER CONTROLLED COMMITTEE? YES NO (NO P.O. BOX)	7. Primarily Formed Cand officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR CANDIDA NAME OF OFFICEHOLDER OR CANDIDA	idate/Officeholder Comm) for which this committee is ATE OFFICE SOUGHT OR OFFICE SOUGHT OR	HELD SUPPORT OPPOSE
OMMITTEE NAME AME OF TREASURER OMMITTEE ADDRESS STREET ADDRESS ITY STATE OMMITTEE NAME	I.D. NUMBER CONTROLLED COMMITTEE? YES NO (NO P.O. BOX) ZIP CODE AREA CODE/PHONE I.D. NUMBER	7. Primarily Formed Cand officeholder(s) or candidate(s)	idate/Officeholder Comm) for which this committee is ATE OFFICE SOUGHT OR OFFICE SOUGHT OR	HELD SUPPORT OPPOSE
OMMITTEE NAME IAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS	I.D. NUMBER CONTROLLED COMMITTEE? YES NO (NO P.O. BOX) ZIP CODE AREA CODE/PHONE	7. Primarily Formed Cand officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR CANDIDA NAME OF OFFICEHOLDER OR CANDIDA	idate/Officeholder Comm) for which this committee is ATE OFFICE SOUGHT OR ATE OFFICE SOUGHT OR	HELD SUPPORT OPPOSE HELD SUPPORT OPPOSE HELD SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE **CALIFORNIA** Statement covers period **FORM** 10/23/2022 from 12/21/2022 through I.D. NUMBER 1444506

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Chavez for Supervisor 2022

Chavez for Supervisor 2022				0 1 1 5	1444500
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Su Running in Both t	mmary for Candidates he State Primary and
1. Monetary Contributions Schedule A, Line 3		\$	92,160.43	General Elections	3
2. Loans Received Schedule B, Line 3	-350.00		0.00	1/1 t	hrough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$3,861.43_	\$	92,160.43	20. Contributions Received	0.00 \$ 0.00
4. Nonmonetary Contributions	1,000.00	_	3,389.81		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4	\$4,861.43	\$	95,550.24	21. Expenditures Made \$	0.00 \$ 0.00
Expenditures Made				Expenditures Lin Candidates	nit Summary for State
6. Payments Made	\$ 28,936.83	\$	92,444.03	Garialaates	
7. Loans Made Schedule H, Line 3	0.00		0.00		lative Expenditures Made* Voluntary Expenditure Limit)
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$28,936.83	\$	92,444.03	(025)331 13	, sound, Exponence and
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00		0.00	D	Tatalas Data
10. Nonmonetary Adjustment	1,000.00		3,389.81	Date of Election (mm/dd/yy)	Total to Date
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 29,936.83	\$	95,833.84		\$
Current Cash Statement		To calc	culate Column B,		\$
12. Beginning Cash Balance	\$\$24,791.80	A to the	nounts in Column e corresponding		
13. Cash Receipts	3,861.43	of your	ts from Column B last report. Some ts in Column A may	A	\$
14. Miscellaneous Increases to Cash Schedule I, Line 4	283.60	be neg	ative figures that be subtracted from	7	\$
15. Cash Payments Column A, Line 8 above	28,936.83	previou	us period amounts. If		\$
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 0.00	filed for	r this calendar year, arry over the amounts		
If this is a termination statement, Line 16 must be zero.			nes 2, 7, and 9 (if any).		
17. LOAN GUARANTEES RECEIVED Schedule B, Line 2	\$0.00			*Amounts in this section ma reported in Column B.	y be different from amounts
Cash Equivalents and Outstanding Debts					
18. Cash Equivalents See instructions on reverse \$	0.00				

0.00

19. Outstanding Debts Add Line 2 + Line 9 in Column B above

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

Schedule	Α	
Monetary	Contributions	Received

SCHEDULE A

Monetary Contributions Received			to whole dollars.	Statement covers from10/23/2 12/21/2		CALIFORNIA 460		
SEE INSTRUCTIO	ONS ON REVERSE			through	Pag	ge <u>4</u> of <u>21</u>		
NAME OF FILER	Supervisor 2022				I.D. NUI	MBER 1444506		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
11/08/2022	Jose Canchola San Francisco, CA 94123	IND COM OTH SCC	Musician Self Employed-Jose Canchola	100.00	100.00	100.00 G-2022		
12/02/2022	Martin Chavez Stratford, CA 93266	IND COM OTH SCC	Farmer Relations Pacific Farm Management	386.43	1,276.24	289.81 P-2022 986.43 G-2022		
11/06/2022	Beau Diaz Fresno, CA 93711	IND COM OTH PTY SCC	Solar and Goat Farming Barrier Solar	100.00	150.00	50.00 P-2022 100.00 G-2022		
11/07/2022	Pinole, CA 94564 ID: 831693	IND COM COTH PTY SCC		1,000.00	1,000.00	1,000.00 G-2022		
10/28/2022	Fresno, Madera, Kings & Tulare Counties Building Trades Council, Fresno, CA 93727 ID: 1257504	IND SCC		500.00	500.00	500.00 G-2022		
			SUBTOTAL \$	2,086.43				

Schedule A Monetary Contributions Received					covers per 10/23/20	riod 22	CALIFORNIA 46		
SEE INSTRUCTIO	INS ON REVERSE			through	12/21/20	22	Page _	5 of 21	
NAME OF FILER	Supervisor 2022					- /	I.D. NUMBER		
Chavez for	Supervisor 2022							1444506	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIV THIS PERIOD	VED	CUMULATIVE CALENDAI (JAN. 1 - D	RYEAR	PER ELECTION TO DATE (IF REQUIRED)	
	GROW Elect	☐ IND		250.00		250.0	00	250.00 G-2022	
11/07/2022	Laguna Niguel, CA 92677 ID: 1342160	OTH PTY SCC							
- 1	Heredia Farm Labor Inc.	□ IND		1,500.00		1,500	.00	1,500.00 G-2022	
11/08/2022	Paso Robles, CA 93446	COM SOTH PTY SCC							

Operations and Technology

NBCUniversal

Owner

The Ras Group

200.00

100.00

200.00

100.00

		SUBTOTAL	\$ 2,050.00	
1 1				
	DIND CO OTI PTY SO	DM 'H 'Y		

IND COM OTH SCC

IND COM OTH SCC

200.00 G-2022

100.00 G-2022

Gus Luzania

Ruben Mireles

San Jose, CA 95134

Lemoore, CA 93245

11/08/2022

11/08/2022

Schedule Monetary	A Contributions Received	Am	ounts may be rounded to whole dollars.	Statement covers	period	CALIFORNIA / C			
				from10/23/2022		FORM 46			
				through12/21/	2022	Page _	6 of 21		
SEE INSTRUCTION NAME OF FILER	NS ON REVERSE					I.D. NUMBER	3		
Chavez for	Supervisor 2022						1444506		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	IVE TO DATE DAR YEAR - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
		IND COM OTH PTY SCC							
Schedule	A Summary	1-				* Contributor	Codes		
1. Amount rec (Include all S	eived this period - itemized monetary contributions. Schedule A subtotals.)			4,136.43			ent Committee		
2. Amount rec	eived this period - unitemized monetary contributions of less t	han \$100	•	75.00		OTH - Other	than PTY or SCC) (e.g., business entity)		
	ary contributions received this period. and 2. Enter here and on the Summary Page, Column A, Lin	 e 1.) 		4,211.43		PTY - Politica SCC - Small (l Party Contributor Committee		

0.00

Schedule B - Part 1		Amo	ounts may be round	ied	so	CHEDULE B - PAR		
Loans Received		to whole dollars.			Statement cove	ers period 23/2022	FORM 46	
					through12/2	21/2022	Page7	_ of <u>21</u>
SEE INSTRUCTIONS ON REVERSE NAME OF FILER							I.D. NUMBER	
Chavez for Supervisor 2022							144	4506
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF 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 OF FORGIVEN THIS PERIOD **	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS DATE
The KAL Group, Inc. Hilmar, CA 95324		\$ 350.00	\$ 0.00	\$ 350.00 FORGIVEN \$ 0.00	\$0.00	0 % RATE \$ 0.00	\$ 350.00	CALENDAR YEAR \$ 0.00 PER ELECTION**
* IND COM NOTH PTY SCC					DATE DUE		DATE INCURRED	
Schedule B Summary								
Loans received this period (Total Column (b) plus unitemized to	 pans of less than \$100.)			\$	0.00		* Contributor Code	s
O I case said as ferritors this paried					350.00		IND - Individual	

SUBTOTALS \$	0.00	\$ 350.00	\$ 0.00	\$ 0.00	

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

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

350.00

-350.00 (May be a negative number)

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

COM - Recipient Committee

(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party

SCC - Small Contributor Committee

2. Loans paid or forgiven this period

(Total Column (c) plus loans under \$100 paid or forgiven)

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

(Include loans paid by a third party that are also itemized on Schedule A.)

Schedule B - Part 2		Amounts may be rour to whole dollars.	ided	SCHEDULE B -					
Loan Guarantors		to whole dollars.		Statement cov	ers period /23/2022	CALIFORNI FORM	⁴ 460		
				through12	/21/2022	Page 8	of21		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Chavez for Supervisor 2022						I.D. NUMBER 1444	506		
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	L	OAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE		
	□ IND □ COM		L	ENDER		CALENDAR DATE \$ PER ELECTION (IF REQUIRED)			
	OTH OTH SCC			DATE		(IF REGUINED)			

Enter on Summary Page. Line 17 only.

Schedule		Amounts may be rounded to whole dollars.						SCHEDULE C	
Nonmonetary Contributions Received					Statement covers period from10/23/2022		CALIFORN FORM	⁴ 460	
SEE INSTRUCTION	ONS ON REVERSE				through .	12/21/2022	Page 9	of 21	
NAME OF FILER	ONS ON REVERSE						I.D. NUMBER		
Chavez for	Supervisor 2022						1444	1506	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		PTION OF SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
	Jose Hernandez-Cruz, Jr.	X IND	Mechanical Engineer			1,000.00	1,000.00		
11/05/2022	Fresno, CA 93726	COM OTH PTY SCC	IREP California LLC	Mariachi for I	Election Night			1,000.00 G-2022	
Schedule	C Summary						* Contributor Codes		
(Include all 2. Amount red	ceived this period - itemized nonmonetary contribution Schedule C subtotals.)		n \$100	s	. —	.00	IND - Individual COM - Recipient Com (other than PT OTH - Other (e.g., bus PTY - Political Party	Y or SCC) siness entity)	
	nonetary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colu	mn A, Lines 4 a	nd 10.)	_TOTAL \$	1,00	00.00	SCC - Small Contribut	or Committee	

Schedule D Amounts may be rounded to whole dollars. SCHEDULE D **Summary of Expenditures** Statement covers period **CALIFORNIA** Supporting/Opposing Other **FORM** Candidates, Measures, and Committees 10/23/2022 from 12/21/2022 10 of 21 through NAME OF FILER I.D. NUMBER Chavez for Supervisor 2022 1444506 CUMULATIVE TO DATE CALENDAR YEAR PER ELECTION TO DATE NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION AMOUNT DATE (IF REQUIRED) MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) THIS PERIOD TYPE OF PAYMENT (JAN. 1 - DEC. 31) OR COMMITTEE Monetary Contribution Nonmonetary Contribution Independent Expenditure Oppose Support SCHEDULE D SUMMARY 0.00 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) -0.00 2. Unitemized contributions and independent expenditures made this period of under \$100 _ _ _ _ _ _ 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) 0.00

SUBTOTAL \$

Schedule E	Ξ .
Payments	Made

SCHEDULE E Statement covers period **CALIFORNIA FORM** 10/23/2022 from _ of __21 12/21/2022 through I.D. NUMBER

1444506

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Chavez for Supervisor 2022

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
Alvarado & Wertz Company, LLC Alexandria, VA 22305	CNS		2,000.00
Bank Of America Newark, DE 19713		WEB, PRT and PHO	3,967.17
Bank Of America Newark, DE 19713		WEB, CMP, LIT and MTG	5,903.05
Bank Of America Newark, DE 19713	WEB		488.93
Payments that are contributions or independent expenditures must also be summarized on S	Schedule D.	SUBTOTAL \$	12,359.15

Schedule E
Payments Made

SCHEDULE E

Statement covers period from10/23/2022	FORM 460				
through12/21/2022	Page12 of21				
No. 1	I.D. NUMBER 1444506				

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Chavez for Supervisor 2022

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
Gowans Printing Company Modesto, CA 95354	LIT		2,918.77
Gowans Printing Company Modesto, CA 95354	LIT		914.24
Integrated Solutions: Political San Diego, CA 92116	OFC		175.00
Integrated Solutions: Political San Diego, CA 92116	OFC		175.00
* Payments that are contributions or independent expenditures must also be summarized on Schedul	e D.	SUBTOTAL \$	4,183.01

Schedule I	E
Payments	Made

MBR member communications

OFC office expenses

PHO phone banks

PET petition circulating

MTG meetings and appearances

POL polling and survey research

POS postage, delivery and messenger services

SCHEDULE E Statement covers period CALIFORNIA **FORM** 10/23/2022 from

thurwah	12/21/2022	Page	13	of	21	_
through _		Page _		_ 01 _		-

I.D. NUMBER

1444506

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Chavez for Supervisor 2022

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

IND independent expenditure supporting/opposing others (explain)*

CNS campaign consultants

FIL candidate filing/ballot fees

CVC civic donations

FND fundraising events

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

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

LEG legal defense LIT campaign literature and mailings	PRO professional services (legal, accounting) PRT print ads	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
MTA Brown Mail Masters Plus Modesto, CA 95350		POS and LIT	1,836.20
MTA Brown Mail Masters Plus Modesto, CA 95350		POS and LIT	2,000.28
MTA Brown Mail Masters Plus Modesto, CA 95350		POS and LIT	1,902.56
The KAL Group, Inc. Hilmar, CA 95324	PRO		333.14
* Payments that are contributions or independent expenditures must also be summa	uńzed on Schedule D.	SUBTOTAL \$	6,072.18

Schedule E	
Payments Made	

CTB contribution (explain nonmonetary)*

Amounts may be rounded to whole dollars.

		SCHEDULE E
Statement covers period from 10/23/2022		FORM 460
through _	12/21/2022	Page 14 of 21
	12	I.D. NUMBER

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Chavez for Supervisor 2022 1444506 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 MBR member communications MTG meetings and appearances RAD radio airtime and production costs

OFC office expenses

PET petition circulating

CVC civic donations FIL candidate filing/ballot fees FND fundrais filing/ballot fees FND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger servi PRO professional services (legal, accounting PRT print ads		als same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The KAL Group, Inc.			
Hilmar, CA 95324	PRO		228.61
Topham Guerin LLC			100
Dover, DE 19901	CNS		6,000.00
Schedule E Summary			
Itemized payments made this period. (Include all Schedule E sul	ototals.)		\$28,842.95
2. Unitemized payments made this period of under \$100			\$93.88
3. Total interest paid this period on loans. (Enter amount from Scho	edule B, Part 1, Column (e).)		\$
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter h	ere and on the Summary Page, Column A, L		\$ 28,936.83
* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.	SUBTOTAL \$	6,228.61

Schedule F	Amounts may				SCHEDULE	
Accrued Expenses (Unpaid Bills)	to whole	dollars.	Statement covers	period CALI	FORM 46	
		1	from10/23	/2022 F		
		11	through12/21	/2022 Page	15 of 21	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		4		I.D. NUM	BER	
Chavez for Supervisor 2022		1		\$1	1444506	
CODES: If one of the following codes accurately describes the pay 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 communi MTG meetings and app OFC office expenses PET petition circulating PHO phone banks POL polling and survey	ications learances research and messenger services	RAD radio airti RFD returned of SAL campaign TEL t.v. or cabi TRC candidate TRS staff/spou TSF transfer be VOT voter regi	workers' salaries e airtime and production of travel, lodging, and meals se travel, lodging, and mea etween committees of the	als same candidate/sponsor	
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 A CLOSE OF THIS PERIOD	
SCHEDULE F SUMMARY	E 1	***				
 Total accrued expenses incurred this period. (Include all Schedule F, Col accrued expenses of \$100 or more, plus total unitemized accrued expenses 	lumn (b) subtotals for ses under \$100.)		"	NCURRED TOTALS	\$0.00	
Total accrued expenses paid this period. (Include all Schedule F, Column accrued expenses of \$100 or more, plus total unitemized payments on ac	n (c) subtotals for payment ccrued expenses under \$1	s on 00.)		PAID TOTALS	\$0.00	
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference on the Summary Page, Column A, Line 9.)	here and					

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

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

Amounts may be rounded to whole dollars.

from	10/23/2022	FORM TOU
through _	12/21/2022	Page 16 of 21
		I.D. NUMBER
		1444506

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Chavez for Supervisor 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bank Of America

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
Capitol Resources, Inc. Brooklyn, IA 52211	СМР		1,071.60
Capitol Resources, Inc. Brooklyn, IA 52211	СМР		1,279.29
Facebook Menio Park, CA 94025	WEB		1,695.57
Facebook Menio Park, CA 94025	WEB		1,283.23
Payments that are contributions or independent expenditures must also be summarized o	n Schedule D.	TOTAL*\$	5,329.69

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

Schedule (G				
Payments	Made by	an A	gent or	Indepen	dent
Contractor	(on Be	half of	This C	ommittee	e)

SCHEDULE G Statement covers period 10/23/2022

	from	
	through12/21/2022	Page17 of21
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		I.D. NUMBER
NAME OF THE PROPERTY OF THE PR		1 R050A 0 200 (200) (700)
Chavez for Supervisor 2022		1444506
NAME OF AGENT OR INDEPENDENT CONTRACTOR		7

Bank Of America

CODES: If one of the following codes accurately describes the p	vment, you may enter the code. Otherw	se, 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
Google Mountain View, CA 94043	WEB		500.00
Google Mountain View, CA 94043	WEB		488.93
Hanford Sentinel	PRT		700.00
danford, CA 93230	υτ		323.47
		TOTAL	* 6 2012.40

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

TOTAL * \$

2,012.40

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

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

Amounts may be rounded to whole dollars.

through	12/21/2022	Page	18	of	21

I.D. NUMBER

1444506

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Chavez for Supervisor 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bank Of America

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
Tachi Palace Hotel Lemoore, CA 93245	мта	Election Night Venue	2,078.93
20110010, 07100210			34772.00

TOTAL * \$

2,078.93

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

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

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Chavez for Supervisor 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

MTA Brown Mail Masters Plus

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 O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
USPS Modesto, CA 95350	POS		934.05
USPS Modesto, CA 95350	POS		1,048.32
USPS Modesto, CA 95350	POS		1,005.40

TOTAL * \$

2,987.77

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

^{**} 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*		Am	ounts may be round to whole dollars.	ed	Statement cover	ers period 23/2022	CALIFORNI FORM	* 460
					through12/	21/2022	Page 20	of21
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Chavez for Supervisor 2022							I.D. NUMBER 1444	506
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF 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 OF FORGIVENESS THI PERIOD *		(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$	s	PAID S FORGIVEN \$. \$	RATE \$	\$	CALENDAR YEAR S_ PER ELECTION**

SUBTOTALS	\$ \$	\$ \$	MANAGES STREET, STREET

SEE INSTRUCTION	Alloui	ts may be rounded whole dollars.	Statement covers period from 10/23/2022 through 12/21/2022	CALIFORNIA 460 FORM Page 21 of 21
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESC	CRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
11/07/2022	MTA Brown Mail Masters Plus Modesto, CA 95350		182.80	
11/07/2022	MTA Brown Mail Masters Plus Modesto, CA 95350		Postage Refund	100.80
	I Summary			
1. Itemized in	ncreases to cash this period		\$	
2. Uniternized increases to cash of under \$100 this period \$ 0.00				
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)			\$ 0.00	
	ellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on to age, Line 14.)			

283.60