Posinient Committee					COVERPAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp	EC	FORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable: (Month, Day, Year)	FEB 0 1 2023	Page _	1 of 19 or Official Use Only
1. Type of Recipient Committee: All Committees - C	complete Parts 1, 2, 3, and 4.	2. Type of Statement:			
□ Officeholder, Candidate Controlled Committee     ○ State Candidate Election Committee     ○ Recall     (Also Complete Part 5)      □ General Purpose Committee     ○ Sponsored	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	ermination)	Quarterty State Special Odd-Ye Supplemental F Statement - Att	ment ear Report Preelection
3. Committee Information	.D. NUMBER 1303250	Treasurer(s)			•
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Valle for Supervisor 2024  STREET ADDRESS (NO P.O. BOX)	)	NAME OF TREASURER  Danny Trujillo  MAILING ADDRESS  CITY	STATE	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP O	CODE AREA CODE/PHONE	Corcoran NAME OF ASSISTANT TREASU	CA CA	93212	(559)380-5704
COTCOTAN CA 932		Denise Lewis	San Cy II San I		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.		MAILING ADDRESS			***************************************
CITY STATE ZIP C	CODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Corcoran CA 932	21.2	Sacramento	CA	95841	(916)348-9100
OPTIONAL: FAX / E-MAIL ADDRESS (916)348-9111 / campaigns@rcbs.us		OPTIONAL: FAX / E-MAIL ADDI	RESS		
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californ  Executed on 01/19/2023 Date  Executed on Date  Executed on Date	nia that the foregoing is true and correct.	owledge the information contained he Signature of Tressurer or Assistant Signature of Controlling Officeholder, Candidate, State Measure Prosperature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, S	Treasurer oponent or Responsible Officer of S state Moasuré Proponent	Sponsor	
				FF	PPC Form 460 (Jan/2016)

# Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAGI	E-PARTZ
CALIF FC	ORNIA ORM	4	60
Dogo	2	o.f	19

Officeholder or Candidate Controlled Com	mittee			6.	Primarily Formed Balle	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			· · · · · · · · · · · · · · · · · · ·		NAME OF BALLOT MEASURE	<u> </u>		
Richard Valle						1		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF A	APPLICABL	.E)		BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT OPPOSE
County Supervisor Kings County District 2							<u>, , , , , , , , , , , , , , , , , , , </u>	UPPUSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP		Identify the controlling of	ficeholder, ca	ndidate, or state measu	re proponent, if any
	Corcoran	CA	93212		NAME OF OFFICEHOLDER, CAL	NDIDATE, OR PE	OPONENT	-
Related Committees Not Included in this S not included in this statement that are controlled by your contributions or make expenditures on behalf of your	ou or are primarily candidacy.	y formed :			OFFICE SOUGHT OR HELD		DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER			7.	. Primarily Formed Can	didate/Offic	ceholder Committee	. List names of
NAME OF TREASURER	CONTROLLED  YES	NO 🗍			officeholder(s) or candidate(	s) for which the	is committee is primarily f	ormed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.		2, 110			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D . SUPPORT OPPOSE
CITY STATE ZI	P CODE	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	ž.			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLE	D COMMIT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.	D. BOX)							
CITY STATE ZI	P CODE	AREA COI	DE/PHONE		Atta	ch continuati	on sheets if necessary	

## Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA 460
from	07/01/2022	FORM TOO
through _	12/31/2022	Page 3 of 19
	<u></u>	I.D. NUMBER
		1303250

NAME OF FILER	-					I.D. NUMBER
Valle for Supervisor 2024						1303250
Contributions Received		Column A TOTAL THIS PERIOD ATTACHED SCHEDULES)		COLUMN B CALENDAR YEAR TOTAL TO DATE		imary for Candidates e State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	15,576.76	\$	15,576.76		hrough 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3		0.00		0.00	20. Contributions	•
3. SUBTOTAL CASH CONTRIBUTIONS			\$	15,576.76	Received \$	\$
4. Nonmonetary Contributions				0.00	21. Expenditures	\$
5. TOTAL CONTRIBUTIONS RECEIVED	\$	15,576.76	\$	15,576.76	Made \$	3
Expenditures Made						Summary for State
6. Payments Made	\$ <u> </u>	10,651.02			Candidates	
7. Loans Made Schedule H, Line 3		0.00		0.00		ve Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7					(If Subject t	o Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)				822.57	Date of Election (mm/dd/yy)	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3				0.00	(Initiodayy)	
11. TOTAL EXPENDITURES MADE	\$	10,060-45	\$	11,473.59		
Current Cash Statement						\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$			calculate Column B, add		
13. Cash Receipts Column A, Line 3 above		15,576.76		nounts in Column A to the rresponding amounts	*Amounts in this section	may be different from amounts
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00		m Column B of your last oort. Some amounts in	reported in Column B.	,
15. Cash Payments Column A, Line 8 above		10,651.02	Co	lumn A may be negative		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	4,927.46		ures that should be btracted from previous		
If this is a termination statement, Line 16 must be zero.			pe	riod amounts. If this is a first report being filed		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$_	0.00	for ca	this calendar year, only rry over the amounts		
Cash Equivalents and Outstanding Debts				m Lines 2, 7, and 9 (if y).		
18. Cash Equivalents See instructions on reverse						
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	822.57				EDDC E 400 / L #
					FPPC Advice:	FPPC Form 460 (Jan/2 advice@fppc.ca.gov (866/275-3

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

Schedule	<b>A</b>							SCHEDULE A
Monetary Contributions Received			ts may be rounded whole dollars.	Statement cov	•			
SEE INSTRUCTION	ONS ON REVERSE			through12/31/2	022	Page	4	of <u>19</u>
NAME OF FILER						I.D. NU		<u> </u>
Valle for \$	Supervisor 2024							
		<u> </u>			ī	13032	50	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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 CALENDAR Y (JAN. 1 - DEC	EAR	TO	ELECTION DDATE EQUIRED)
09/16/2022	American Ambulance	□IND		1,000.00	1,	000.00	32024	\$1,000.00
	Fresno, CA 93721	□COM 図OTH □PTY □SCC						<b>+-,</b>
09/16/2022	Amler Investments LP Lemoore, CA 93245	☐IND ☐COM ②OTH ☐PTY ☐SCC		500.00		500.00 G	2024	\$500.00
09/27/2022	Dalena Farms Inc. Madera, CA 93638	□IND □COM 図OTH □PTY □SCC		2,500.00	2,5	500.00 G	2024	\$2,500.00
09/16/2022	Hansen Ranches Corcoran, CA 93212	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	00.00 G	2024	\$1,000.00
09/15/2022	Koz Real Estate LLC(Dean Sparks) Sacramento, CA 95814	□IND □COM ဩOTH □PTY □SCC		Received through inter Efundraising Connectio 2831 G Street Stite 12 Sacramento, CA 95816	nediary:	50.00 G	2024	\$250.00
			SUBTOTAL \$	5,250.00		les de la constante de la cons		
1. Amount re	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)		•	15,226.76	IND	ributor Co Individual - Recipien		tee
	ceived this period – unitemized monetary contributions				İ	(other th	an PTY o	
3. Total mone	tary contributions received this period.				PTY-	Political F	artv	Committee
/Add Filles	1 and 2. Enter here and on the Summary Page, Colum	ın A, Line 1.).	********************************	15,576.76				

### Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded

SCHEDULE A	(CONT.)
------------	---------

wionetary Contributions Received		to whole dollars.			2022 CA	FORM 460			
				through12/31/	2022 Pag	e5	of 19		
NAME OF FILER					I.D.	NUMBER			
Valle for Su	pervisor 2024				130	3250			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	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)		R ELECTION TO DATE REQUIRED)		
09/16/2022	Lance-Kashian and Company Fresno, CA 93720	□IND □COM ☑OTH □PTY □SCC		500.00		0 G2024	\$500.00		
09/16/2022	Rachel Lerma Hanford, CA 93230	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.0	0 G2024	\$100.00		
09/16/2022	Mid-Valley Disposal, LLC(Joseph Kalpakoff) Kerman, CA 93630	□IND □COM ☑OTH □PTY □SCC		2,500.00	2,500.0	0 G2024	\$2,500.00		
07/10/2022	Nicole Parra for Senate 2022 (ID# 1443353) Irvine, CA 92612	□IND  ICOM □OTH □PTY □SCC		3,526.76	3,526.7	6 G2024	\$3,526.76		
09/05/2022	Producers Ranch Stratford, CA 93266	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	1,000.0	0 G2024	\$1,000.00		
			SUBTOTAL	\$ 7,626.76					

\*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)

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may be rounded to whole dollars.		Statement covers from 07/01/	•		IFORN ORM	<sup>IA</sup> 460
				through12/31/	2022	Page.	6	of19
NAME OF FILER						I.D. NL	MBER	
Valle for Sup	pervisor 2024					13032	250	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSE,FEMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	<b>EAR</b>		R ELECTION TO DATE REQUIRED)
07/10/2022	Southern California Edison Rosemead, CA 91770	□IND □COM ⊠OTH □PTY □SCC		1,000.00	1,0	00.00	G2024	\$1,000.00
09/16/2022	Vivian Thomas Corcoran, CA 93212	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00	G2024	\$100.00
10/27/2022	Tule Trash Company, LLC(Jeffrey Martin) Wasco, CA 93280	□IND □COM 図OTH □PTY □SCC		1,000.00	1,0	00.00	G2024	\$1,000.00
09/27/2022	Vista Consulting Inc Clovis, CA 93612	□IND □COM ☑OTH □PTY □SCC		250.00	. 2	50.00	G2024	\$250.00
		□IND □COM □OTH □PTY □SCC						
			SUBTOTALS	2,350.00				

\*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

DATE  NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE  NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR TYPE OF PAYMENT DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	I.D. NU 1303 CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
DATE  NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE  109/06/2022  Nam Gomez-Heitzeberg College Trustee Kern Community College District  Contribution  TYPE OF PAYMENT  DESCRIPTION (IF REQUIRED)  X Monetary Contribution	PERIOD	CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE (IF REQUIRED)
College Trustee Kern Community College District Contribution	500.00	500.0	
Contribution Independent Expenditure			
Monetary Contribution Nonmonetary Contribution Independent Expenditure			
Monetary Contribution Nonmonetary Contribution Independent Expenditure			
SUBTOTAL \$	500.00	0	
Schedule D Summary  1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtota	als.)	\$	500.00
<ol> <li>Unitemized contributions and independent expenditures made this period of under \$100</li> <li>Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the State of the St</li></ol>			

Schedule E Payments Made	Amounts may to whole		d	Staten	nent covers period		SCHEDULE ORNIA 460 RM
SEE INSTRUCTIONS ON REVERSE		······································		through	12/31/2022		8 of 19
Valle for Supervisor 2024				-		I.D. NUI	MBER
CODES: If one of the following codes accurately described campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations CTL candidate filing/ballot fees fundraising events	MBR member com MTG meetings ar OFC office exper PET petition circu PHO phone banks POL. polling and	nmunications ad appearant nses ulating s survey resea	ces arch	RAD radio RFD return SAL cam TEL t.v. of TRC cano	ibe the payment.  o airtime and production med contributions paign workers' salaries or cable airtime and prod lidate travel, lodging, and (spouse travel, lodging, a	uction costs	
ND independent expenditure supporting/opposing others (explain)* EG legal defense Campaign literature and mailings	POS postage, de	livery and m	essenger services egal, accounting)	TSF trans VOT votes	spoose traver, longing, a fer between committees r registration mation technology costs	of the sar	
NAME AND ADDRESS OF PAYEE (IFCOMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR DESC	RIPTION OF P	AYMENT		AMOUNT PAID
T&T Mobility	- 100	OFC					236.68
T&T Mobility tlanta, GA 30353		OFC					236.68
icole Collins orcoren, CA 93212		FND	09/16/022,Fundrasi	ng Event,	25, Candidate		854.14
Payments that are contributions or independent expenditures n	must also be summ	arized on S	Schedule D.		SUE	STOTAL \$	1,327.50
chedule E Summary							
. Itemized payments made this period. (Include all Schedule	E subtotals.)					\$	10,593.27
. Unitemized payments made this period of under \$100	*************************		******************************	•••••••		\$	57.75
. Total interest paid this period on loans. (Enter amount from	Schedule B, Part 1	, Column	(e).)		***********************	\$	0.00
Total payments made this period. (Add Lines 1, 2, and 3. Er	nter here and on th	ie Summa	ry Page, Column A, Li	ine 6.)	тот	AL \$	10,651.02

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

Amounts may be rounded to whole dollars.

State	ement covers period	CALIFORNIA	460
from	07/01/2022	FORM	<del></del>
through	12/31/2022	Page 9 of	19
		I.D. NUMBER	

1303250

Valle for Supervisor 2024

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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 MBR member communications campaign paraphemalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* TEL tv. or cable airtime and production costs petition circulating PET CVC civic donations TRC candidate travel, lodging, and meals phone banks PHO candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals polling and survey research POL fundraising events TSF transfer between committees of the same candidate/sponsor postage, delivery and messenger services independent expenditure supporting/opposing others (explain)\* POS IND VOT voter registration professional services (legal, accounting) PRO LEG legal defense WEB information technology costs (internet, e-mail) PKI print ads campaign literature and mailings

	NAME AND ADDRESS OF PAYEE IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Nicole Collins Corcoran, CA 93212		TRC	08/28/2022, Candidate	Veterans Reconization Dinner, 5,	495.56
Nicole Collins Corcoran, CA 93212		TRC	08/30/2022, Candidate	Latino Heritage Event Dinner, 2,	130.00
Nicole Collins Corcoran, CA 93212		TRC	08/31/2022, Candidate	Latino Heritage Event Dinner, 2,	96.26
Nicole Collins Corcoran, CA 93212		TRC	08/30/2022, Candidate	Hotel stay for Latino Heritage Event, 2,	193.64
Nicole Collins Corcoran, CA 93212		FND	09/16/022,F	undrasing Event, 25, Candidate	3,000.00
***	one or independent expenditures must also be summarized on	Schedule	<u> </u>	SUBTOTAL	\$ 3,915.46

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

Schedule E
(Continuation Sheet)
Payments Made

Schedule E					SCH	EDULE E (CONT.	
(Continuation Sheet)	Amounts may be rounded			Statement covers period	CALIFORN		
Payments Made	to whole do	ollars.		from07/01/2022	FORM		
SEE INSTRUCTIONS ON REVERSE				through 12/31/2022	Page 10	of19	
NAME OF FILER					I.D. NUMBER		
Valle for Supervisor 2024					1303250		
CODES: If one of the following codes accurately descril  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)**  CVC civic donations  FIL candidate filing/ballot fees  fundraising events  independent expenditure supporting/opposing others (explain)*  LEG legal defense  campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circui PHO polling and s POS postage, deli	munications d appearan ses lating survey rese very and m	s ces	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaried two or cable airtime and productions SAL campaign workers' salaried two or cable airtime and production TRC candidate travel, lodging, a staff/spouse travel, lodging transfer between committed voter registration websites.	t. on costs s oduction costs nd meals i, and meals es of the same c		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT		AMOUNT PAID	
Nicole Collins Corcoran, CA 93212		TRC	11/17/2022, Atten Officeholder	d Annual CSAC Conference, 1	,	440.83	
Nicole Collins Corcoran, CA 93212		MTG				40.00	
Community Action Partnership of Kern (CAPK) Bakersfield, CA 93309		CVC				500.00	
King Productions Clovis, CA 93619		FND	09/16/2022, Fundra	aiser Entertainment		500.00	
Cing Productions		cvc				150.00	
Payments that are contributions or independent expenditures must al	so be summarized on S	chedule D.		su	BTOTAL \$	1,630.83	

Schedule E				SCHEDULE E (CONT
(Continuation Sheet)	Amounts may be	rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dol		from 07/01/2022	FORM <b>400</b>
SEE INSTRUCTIONS ON REVERSE			through 12/31/2022	Page 11 of 19
NAME OF FILER		····		I.D. NUMBER
Valle for Supervisor 2024				1303250
CODES: If one of the following codes accurately desc	cribes the payment, yo	ou may enter the code. Ot	herwise, describe the paymer	nt.
CMP campaign paraphemalia/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 common MTG meetings and OFC office expension circulty PHO phone banks POL polling and services postage, deli	nunications Lappearances ses ating	RAD radio airtime and producti RFD returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and p TRC candidate travel, lodging, TRS staff/spouse travel, lodging	on costs es production costs and meals g, and meals tees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE		CODE OR D	ESCRIPTION OF PAYMENT	AMOUNT PAID

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Nan Gomez-Heitzeberg for KCCD Trustee 2022 (ID# 1411051) Bakersfield, CA 93306	СТВ			500
Portriat of a Warrior Bakersfield, CA 93301	cvc			360.
Alicia Ramirez Lemoore, CA 93245	CNS			300.
Alicia Ramirez Lemoore, CA 93245	CNS			300.
River City Business Services Sacramento, CA 95841	PRÓ			154.
* Payments that are contributions or independent expenditures must also be summari	zed on Schedule	D.	SUBTOTA	L\$ 1,614.

	Amounts may be rounded to whole dollars.		from	07/01/2022	CALIFORNIA FORM	460	
SEE INSTRUCTIONS ON REVERSE				through	12/31/2022	Page 12 of	f <u>19</u>
Valle for Supervisor 2024						LD. NUMBER 1303250	
CODES: If one of the following codes accurately described campaign paraphemalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member commeetings an OFC office exper PET petition circu phone banks POL polling and sepos postage, del	nmunications d appearances ises ilating	enger services	RAD rad RFD ref SAL ca TEL t.v TRC ca TRS sta TSF tra VOT vo	escribe the payment. dio airtime and production turned contributions impaign workers' salaries or cable airtime and production and cattle travel, lodging, and aff/spouse travel, lodging, ansier between committees ter registration formation technology costs	costs duction costs d meals and meals s of the same candid	late/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD, NUMBER)		CODE OR	D	ESCRIPTION O	FPAYMENT	AMOU	NT PAID

* Payments that are contributions or independent expenditures must also be summarized of	n Schedule D		SUBTOTAL	\$ 655.18
Sacramento, CA 9584I				134.65
River City Business Services	PRO		,	
River City Business Services Sacramento, CA 95841	PRO			137.11
River City Business Services Sacramento, CA 95841	PRO			123.00
River City Business Services Sacramento, CA 95841	PRO			139.47
River City Business Services Sacramento, CA 95841	PRO			120.95
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

NAME OF FILER		I.D.	NUMBER
Valle for Supervisor 2024		13	03250
CTB contribution (explain nonmonetary)*  CYC civic donations  FIL candidate filing/ballot fees  FND fundraising events  ND independent expenditure supporting/opposing others (explain)*  OFC office expendence of petition circuit phone bank problem.  PHO phone bank polling and polling and postage, de	mmunications nd appearances enses ulating	nerwise, describe the payment.  RAD radio airtime and production costs returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and mea staff/spouse travel, lodging, and m transfer between committees of the voter registration WEB information technology costs (inter-	n costs Is neals ne same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTES, ALSO ENTER I.D. NUMBER)	CODE OR DE	ESCRIPTION OF PAYMENT	AMOUNT PAID
River City Business Services Sacramento, CA 95841	PRO		216.5
River City Business Services Sacramento, CA 95841	PRO		115.09
River City Business Services Sacramento, CA 95841	PRO		155.89
River City Business Services Sacramento, CA 95841	PRO		164.90
River City Business Services Sacramento, CA 95841	PRO		105.58
* Payments that are contributions or independent expenditures must also be summarized on	1 Schedule D.	SUBTO	TAL \$ 757.96

Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 757.

Out a date #					9	CHEDULE E (CONT.)
Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			Statement covers p	eriod CALIFO	RNIA 160
SEE INSTRUCTIONS ON REVERSE				through 12/31/202	3 -	14 of 19
NAME OF FILER					I.D. NUMB	ER
Valle for Supervisor 2024					130325	0
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment radio airtime and production readio airtime and production reconsultants office expenses office					production costs utions rs' salaries ne and production costs lodging, and meals el, lodging, and meals committees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DES	SCRIPTION OF PAYMENT	Table 1	AMOUNT PAID
River City Business Services Sacramento, CA 95841		PRO			·	491.37
The Latino Caucus of California Counties  Commerce, CA 90022		OFC				200.00
					,	
* Payments that are contributions or independent expenditures must a	lso be summarized on	Schedule D.			SUBTOTAL \$	691.37

					SCHEDULEF	
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	led	Statement cover	EO.	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE			through 12/31/2	022 Page	<u>15</u> of <u>19</u>	
NAME OF FILER				I.D. NUM	BER	
Valle for Supervisor 2024				13032	50	
CODES: If one of the following codes accurately described CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services of	ns nces earch messenger services	RFD returned contrib SAL campaign works TEL t.v. or cable airt TRC candidate travel TRS staff/spouse tra TSF transfer betwee VOT voter registratio	a production was soutions costs of a production costs of a production costs, lodging, and meals of the sail of the	me candidate/sponsor	
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	
ATET Mobility Atlanta, GA 30353	OFC	0.00	236.68	0.00	236.68	
Nicole Collins Corcoran, CA 93212	OPC	0.00	130.88	0.00	130.88	
River City Business Services Sacramento, CA 95841	PRO	164.90	0.00	164.90	0.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 164.90	367.56	164.90	367.56	
Schedule F Summary  1. Total accrued expenses incurred this period. (Include all Saccrued expenses of \$100 or more, plus total unitemized  2. Total accrued expenses paid this period. (Include all Schaccrued expenses of \$100 or more, plus total unitemized	accrued expenses under edule F. Column (c) subto	\$100.) otals for payments on	i			

FPPC Form 460 (Jan/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

NAME OF FILER

Valle for Supervisor 2024

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA 460

Statement covers period	CALIFORNIA 46	1
from07/01/2022	FORM 40	
	1	

through 12/31/2022 Page 16 of 19

1.D. NUMBER 1303250

SCHEDULE F (CONT.)

1.D. NUMBER

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 tv. 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)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) 105.58	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD 0.00
River City Business Services Sacramento, CA 95841	PRO	105.58	0.00		
River City Business Services Sacramento, CA 95841	PRO	155.85	0.00	155.85	0.00
River City Business Services Sacramento, CA 95841	PRO	115.05	0.00	115.05	0.00
River City Business Services Sacramento, CA 95841	PRO	216.58	0.00	216.58	0.00
	SUBTOTALS \$	593.06\$	0.00\$	593.06\$	0.00

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

Amounts may be rounded to whole dollars.

**CALIFORNIA** Statement covers period **FORM** 07/01/2022 through 12/31/2022 Page 17 of 19 I.D. NUMBER 1303250

NAME OF FILER

Valle for Supervisor 2024

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

campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations

candidate filing/ballot fees FND fundraising events

IND.

campaign literature and mailings LIT

OFC office expenses PET PHO

independent expenditure supporting/opposing others (explain)\* legal defense

POL polling and survey research postage, delivery and messenger services POS

professional services (legal, accounting) PRO print ads PRT

MBR member communications

petition circulating

phone banks

MTG meetings and appearances

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

TEL Lv. or cable airtime and production costs TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
River City Business Services Sacramento, CA 95841	PRO	134.65	0.00	134.65	0.00
River City Business Services Sacramento, CA 95841	PRO	137.11	0.00	137.11	0.00
River City Business Services Sacramento, CA 95841	PRO	123.00	0.00	123.00	0.00
River City Business Services Sacramento, CA 95841	PRO	139.47	0.00	139.47	0.00
	SUBTOTALS	\$ 534.23	0.00	534.23	\$ 0.00

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

Amounts may be rounded to whole dollars.

 Statement covers period

 from
 07/01/2022
 CALIFORNIA FORM
 460

 through
 12/31/2022
 Page
 18
 of
 19

 I.D. NUMBER

1303250

NAME OF FILER

ш

Valle for Supervisor 2024

campaign literature and mailings

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

campaign paraphemalia/misc. MBR member communications CNS campaign consultants MTG meetings and appearances contribution (explain nonmonetary)\* OFC office expenses CVC civic donations petition circulating PET candidate filing/ballot fees FIL PHO phone banks FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)\* POS LEG legal defense

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 tv. 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)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
River City Business Services Sacramento, CA 95841	PRO	120.95	0.00	120.95	
River City Business Services Sacramento, CA 95841	PRO	0.00	455.01	0.00	455.01
	SUBTOTALS	\$ 120.95\$	455.01	120.95	455.01

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

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA	1
from <u>07/01/2022</u>	FORM	41

through 12/31/2022

Page 19 of 19

SCHEDULE G

I.D. NUMBER

WEB information technology costs (internet, e-mail)

1303250

Valle for Supervisor 2024

SEE INSTRUCTIONS ON REVERSE

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

Nicole Collins

NAME OF FILER

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

PRT print ads

CMP	campaign paraphemalia/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
ND	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

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Lake Bottom	FND	09/16/022,Fundraising Event, 25, Candidate	3,000.00
Corcoran, CA 93212			
		·	
·			

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

3,000.00

<sup>\*</sup> 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.