

**Recipient Committee  
Campaign Statement  
Cover Page**

Date Stamp <b>RECEIVED</b>  JAN 24 2024	<b>CALIFORNIA FORM 460</b>
Page <u>1</u> of <u>33</u>	
For Official Use Only	

Statement covers period  
from 07/01/2023  
through 12/31/2023

Date of election if applicable:  
(Month, Day, Year)  
  
\_\_\_\_\_ **KINGS COUNTY ELECTIONS**

**1. Type of Recipient Committee** All Committees - Complete Parts 1, 2, 3, and 4

Officeholder, Candidate Controlled Committee  
 State Candidate Election Committee  
 Recall  
(Also Complete Part 5)

General Purpose Committee  
 Sponsored  
 Small Contributor Committee  
 Political Party/Central Committee

Primarily Formed Ballot Measure Committee  
 Controlled  
 Sponsored  
(Also Complete Part 6)

Primarily Formed Candidate/Officeholder Committee  
(Also Complete Part 7)

**2. Type of Statement:**

Preelection Statement  
 Semi-annual Statement  
 Termination Statement  
(Also file a Form 410 Termination)  
 Amendment (Explain Below)

Quarterly Statement  
 Special Odd-Year Report

**3. Committee Information** I.D. NUMBER **1458774**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Tyler Pepe for Supervisor 2024

STREET ADDRESS (NO P.O. BOX)  
\_\_\_\_\_  
\_\_\_\_\_  
CITY STATE ZIP CODE AREA CODE/PHONE  
Fresno, CA 93704 559-772-2458

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
5132 North Palm Avenue NUM 227  
CITY STATE ZIP CODE AREA CODE/PHONE  
Fresno, CA 93704

OPTIONAL: FAX / E-MAIL ADDRESS  
tylerpepe24@gmail.com

**Treasurer(s)**

NAME OF TREASURER  
Melissa Allen

MAILING ADDRESS  
\_\_\_\_\_  
\_\_\_\_\_  
CITY STATE ZIP CODE AREA CODE/PHONE  
Fresno, CA 93704 916-548-2825

NAME OF ASSISTANT TREASURER, IF ANY  
\_\_\_\_\_

MAILING ADDRESS  
\_\_\_\_\_  
\_\_\_\_\_  
CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS  
valleyvision559@gmail.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 complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on <u>01/11/2024</u> DATE	By <u>Melissa Allen</u> Signature of Treasurer or Assistant Treasurer
Executed on <u>01/11/2024</u> DATE	By <u>Tyler Pepe</u> Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
Executed on _____ DATE	By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent
Executed on _____ DATE	By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE			
Tyler Pepe			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
Board of Supervisors	Kings County	5	
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
[REDACTED]	Fresno, CA		93704

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy*

COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE	
BALLOT NO. OR LETTER	JURISDICTION
<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE	
<b>Identify the controlling officeholder, candidate, or state measure proponent, if any.</b>	
NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	
OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2023	
through	12/31/2023	Page <u>3</u> of <u>33</u>
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		I.D. NUMBER 1458774

Tyler Pepe for Supervisor 2024

**Contributions Received**

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3	\$ 20,280.00	\$ 77,470.00
2. Loans Received .....	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2	\$ 20,280.00	\$ 77,470.00
4. Nonmonetary Contributions .....	Schedule C, Line 3	0.00	14,101.00
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4	\$ 20,280.00	\$ 91,571.00

**Calendar Year Summary for Candidates  
Running in Both the State Primary and  
General Elections**

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ 0.00	\$ 0.00
21. Expenditures Made	\$ 0.00	\$ 0.00

**Expenditures Made**

		Column A	Column B
6. Payments Made .....	Schedule E, Line 4	\$ 30,676.08	\$ 42,948.48
7. Loans Made .....	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS.....	Add Lines 6 + 7	\$ 30,676.08	\$ 42,948.48
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment .....	Schedule C, Line 3	0.00	14,101.00
11. TOTAL EXPENDITURES MADE.....	Add Lines 8 + 9 + 10	\$ 30,676.08	\$ 57,049.48

**Expenditures Limit Summary for State  
Candidates**

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Current Cash Statement**

12. Beginning Cash Balance .....	Previous Summary Page, Line 15	\$ 44,917.60
13. Cash Receipts .....	Column A, Line 3 above	20,280.00
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4	0.00
15. Cash Payments .....	Column A, Line 8 above	30,676.08
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 34,521.52
<i>If this is a termination statement, Line 16 must be zero.</i>		
17. LOAN GUARANTEES RECEIVED.....	Schedule B, Line 2	\$ 0.00

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

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents .....	See instructions on reverse	\$ 0.00
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above	\$ 0.00

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

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>		<b>CALIFORNIA FORM 460</b>
NAME OF FILER <b>Tyler Pepe for Supervisor 2024</b>		I.D. NUMBER <b>1458774</b>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**Tyler Pepe for Supervisor 2024**

I.D. NUMBER

**1458774**

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/11/2023	Garrett Chojnacki [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Spencer Consulting	100.00	100.00	100.00 P-2024
07/11/2023	Dustin Maciel [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Loan Advisor American Pacific Mortgage	100.00	200.00	200.00 P-2024
07/11/2023	The Rolling Cones LLC [REDACTED] Hanford, CA 93230 Resp. Officer David Kahn	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	300.00	300.00 P-2024
07/12/2023	Matthew Tuttle [REDACTED] Reedley, CA 93854	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Gnardog Crossfit	100.00	100.00	100.00 P-2024
07/13/2023	Judy Mendes [REDACTED] Corcoran, CA 93212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Mendes Plumbing	200.00	360.00	360.00 P-2024

**SUBTOTAL \$ 600.00**

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

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2023	
through	12/31/2023	Page <u>5</u> of <u>33</u>

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**Tyler Pepe for Supervisor 2024**

I.D. NUMBER

1458774

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/17/2023	Brian Silva [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Kings County V-Twin	100.00	200.00	200.00 P-2024
07/17/2023	Jason Verdegaal [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Plant Manager Verdegaal Brothers	200.00	200.00	200.00 P-2024
07/19/2023	David Bodine [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales David Bodine	250.00	250.00	250.00 P-2024
07/19/2023	Johnston Calf Pens [REDACTED] Tipton, CA 93272	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	500.00 P-2024
07/21/2023	Onan Champi [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	200.00	200.00	200.00 P-2024

**SUBTOTAL \$ 1,250.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2023	
through	12/31/2023	Page <u>6</u> of <u>33</u>
NAME OF FILER <b>Tyler Pepe for Supervisor 2024</b>		I.D. NUMBER <b>1458774</b>

SEE INSTRUCTIONS ON REVERSE

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/21/2023	Jonathan Chavez [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Detentions Sergeant Kings County Sheriff's Office	200.00	200.00	200.00 P-2024
07/21/2023	Manuel Dutra [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dairyman Manuel Dutra	100.00	100.00	100.00 P-2024
07/21/2023	Nate Ferrier [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant Kings County	100.00	100.00	100.00 P-2024
07/21/2023	Gregory Lopez [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Barber Gregory Lopez	100.00	100.00	100.00 P-2024
07/21/2023	Joe Mendes [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	500.00	500.00	500.00 P-2024

**SUBTOTAL \$ 1,000.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Tyler Pepe for Supervisor 2024

I.D. NUMBER

1458774

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/21/2023	Dustin Vasquez [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Educator  HJUHS	100.00	100.00	100.00 P-2024
07/22/2023	A & M Livestock Auction [REDACTED] Hanford, CA 93230	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		400.00	2,900.00	2,900.00 P-2024
07/22/2023	Badasci Tire [REDACTED] Hanford, CA 93230	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	450.00	450.00 P-2024
07/22/2023	California Custom Covering [REDACTED] Hanford, CA 93230	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		400.00	2,900.00	2,900.00 P-2024
07/22/2023	Clearwater Pools [REDACTED] Hanford, CA 93230	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00 P-2024

**SUBTOTAL \$ 1,200.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2023	
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NAME OF FILER <b>Tyler Pepe for Supervisor 2024</b>		I.D. NUMBER <b>1458774</b>

SEE INSTRUCTIONS ON REVERSE

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/22/2023	Brooke Garcia [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant  California Department of Corrections	200.00	300.00	300.00 P-2024
07/22/2023	Michael Huddleston [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  Retired	140.00	140.00	140.00 P-2024
07/22/2023	Johnston Calf Pens [REDACTED] Tipton, CA 93272	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00	2,000.00	2,000.00 P-2024
07/22/2023	Michael Maher [REDACTED] Reedley, CA 93654	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Shiloh Venture Group	100.00	100.00	100.00 P-2024
07/22/2023	Chip Mello [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmer  Chip Mello	500.00	500.00	500.00 P-2024

**SUBTOTAL \$ 2,440.00**



**Schedule A  
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

**Tyler Pepe for Supervisor 2024**

I.D. NUMBER  
**1458774**

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/22/2023	Andrea Pepe [REDACTED] Fresno, CA 93702	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker  None	100.00	200.00	200.00 P-2024
07/22/2023	Paul J. Santos [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Specialist  Bobcat of Fresno	200.00	350.00	350.00 P-2024
07/22/2023	Mary Lou Silveira [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  Retired	200.00	300.00	300.00 P-2024
07/22/2023	Roman Sowala [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Rep  Kingsburg Orchards	100.00	100.00	100.00 P-2024
07/22/2023	Michael Watson [REDACTED] Tulare, CA 93274	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Captain  Tulare County	1,000.00	1,000.00	1,000.00 P-2024

**SUBTOTAL \$ 1,600.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
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**Tyler Pepe for Supervisor 2024**

I.D. NUMBER

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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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/14/2023	Steven G. Bogan [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  Retired	100.00	1,200.00	1,200.00 P-2024
08/14/2023	Vernon Costa [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dairy Farmer  Vernon Costa Dairy Cattle	200.00	4,150.00	4,150.00 P-2024
08/14/2023	Danell Custom Harvesting [REDACTED] Hanford, CA 93230 Resp. Officer Rance Danell, Sr.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00	6,970.00	6,970.00 P-2024
08/14/2023	Valley Oxygen [REDACTED] Hanford, CA 93230	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	4,000.00	4,000.00 P-2024
10/30/2023	PG&E Corp [REDACTED] Oakland, CA 94612	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00	2,500.00	2,500.00 P-2024

**SUBTOTAL \$ 7,300.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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**Tyler Pepe for Supervisor 2024**

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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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/06/2023	Charlene E. Fagundes [REDACTED] Clovis, CA 93619	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  Retired	350.00	350.00	350.00 P-2024
12/04/2023	Shireen Freitas [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker  None	1,000.00	1,000.00	1,000.00 P-2024
12/06/2023	Alexander Tavilan [REDACTED] Fresno, CA 93711	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Principal  Park West Associates	1,500.00	1,500.00	1,500.00 P-2024
12/11/2023	Vernon Costa [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dairy Farmer  Vernon Costa Dairy Cattle	1,100.00	5,250.00	5,250.00 P-2024
12/11/2023	Michael Huddleston [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  Retired	150.00	290.00	290.00 P-2024

**SUBTOTAL \$ 4,100.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**Tyler Pepe for Supervisor 2024**

I.D. NUMBER

**1458774**

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/11/2023	Andrea Pepe [REDACTED] Fresno, CA 93702	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker  None	100.00	300.00	300.00 P-2024
12/11/2023	John H. Pimentel [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmer  Joe V Pimentel Dairy	100.00	100.00	100.00 P-2024
12/11/2023	Dave Robinson [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sheriff  Kings County	300.00	800.00	800.00 P-2024
12/11/2023	M. R. Simas [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Ag Researcher  Agri Seed	100.00	100.00	100.00 P-2024
12/11/2023	Roman Sowala [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Rep  Kingsburg Orchards	30.00	130.00	130.00 P-2024

**SUBTOTAL \$ 630.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Tyler Pepe for Supervisor 2024

I.D. NUMBER  
1458774

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/11/2023	Gina M. Young [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Educator Hanford Joint Union High School	100.00	920.00	920.00 P-2024

**Schedule A Summary**

1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.)	\$ 20,220.00
2. Amount received this period - unitemized monetary contributions of less than \$100	\$ 60.00
3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	<b>TOTAL \$ 20,280.00</b>

\* 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

<b>SUBTOTAL \$</b>	<b>100.00</b>
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**Schedule B - Part 1  
Loans Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

**Tyler Pepe for Supervisor 2024**

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 OR FORGIVEN THIS PERIOD **	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR \$ _____ PER ELECTION**

\*  IND  COM  OTH  PTY  SCC

**Schedule B Summary**

1. Loans received this period ----- \$ 0.00  
(Total Column (b) plus unitemized loans of less than \$100.)

2. Loans paid or forgiven this period ----- \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven)  
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) ----- **NET \$** 0.00  
Enter the net here and on the Summary Page, Column A, Line 2 (May be a negative number)

\* Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

**SUBTOTALS \$**                      \$                      \$                      \$

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

(Enter (e) on Schedule E, Line 3)  
**FPPC Form 460 (Jan/2016)**  
**FPPC Advice: advice@fppc.ca.gov (866/275-3772)**  
 www.fppc.ca.gov

**Schedule B - Part 2  
Loan Guarantors**

Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
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**Tyler Pepe for Supervisor 2024**

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)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER		CALENDAR DATE	
			DATE		\$ _____ PER ELECTION (IF REQUIRED)	

**SUBTOTAL \$**

Enter on Summary  
Page, Line 17 only.

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**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**Tyler Pepe for Supervisor 2024**

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

**Schedule C Summary**

1. Amount received this period - itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$ <u>0.00</u>
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	\$ <u>0.00</u>
3. Total nonmonetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	<b>TOTAL \$ <u>0.00</u></b>

\* 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

<b>SUBTOTAL \$</b>	
--------------------	--



**Schedule D**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures, and Committees**

Amounts may be rounded  
to whole dollars.

SCHEDULE D

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2023	
through	12/31/2023	Page 17 of 33
NAME OF FILER		I.D. NUMBER
Tyler Pepe for Supervisor 2024		1458774

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SCHEDULE D SUMMARY**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ----- \$ 0.00
- Unitemized contributions and independent expenditures made this period of under \$100 ----- \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ----- **TOTAL \$ 0.00**

<b>SUBTOTAL</b>	<b>\$</b>	
-----------------	-----------	--

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**Tyler Pepe for Supervisor 2024**

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
integrated Solutions: Political [REDACTED] San Diego, CA 92116	OFC		105.00
eFundraising Connections [REDACTED] Sacramento, CA 95816	OFC		47.50
HHS Quarterback Club [REDACTED] Hanford, CA 93230	CVC		500.00
All American Publishing [REDACTED] Boise, ID 83706	CVC		295.00
<b>SUBTOTAL \$</b>			<b>947.50</b>

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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	12/31/2023	Page 19 of 33
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kings River Coatings [REDACTED] Kingsburg, CA 93631	FND		919.99
Integrated Solutions: Political [REDACTED] San Diego, CA 92116	OFC		105.00
Katelyn Monteiro [REDACTED] Hanford, CA 93230	FND	See memo items below	750.00
Valley Vision Treasury [REDACTED] Fresno, CA 93704	PRO	Treasury services	959.77

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

**SUBTOTAL \$ 2,734.76**

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	12/31/2023	Page <u>20</u> of <u>33</u>
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Tyler Pepe for Supervisor 2024		1458774

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Tyler Pepe for Supervisor 2024

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kings County Sheriff's Posse [REDACTED] Hanford, CA 93230	CVC		1,500.00
Samantha Pepe [REDACTED] Hanford, CA 93230	FND	See memo items below	850.84
Right Choice Strategies, LLC [REDACTED] Clovis, CA 93612	CNS		2,000.00
Sierra Pacific High School Booster Club [REDACTED] Hanford, CA 93230	CVC		400.00
<b>SUBTOTAL \$</b>			<b>4,750.84</b>

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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	12/31/2023	Page <u>21</u> of <u>33</u>
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/bailot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tulare Kings Right to Life [REDACTED] Exeter, CA 93221	CVC		1,600.00
Valley Vision Treasury [REDACTED] Fresno, CA 93704	PRO	Treasury services	537.68
Integrated Solutions: Political [REDACTED] San Diego, CA 92116	OFC		105.00
KCSO Explorers [REDACTED] Hanford, CA 93230	CVC		300.00
<b>SUBTOTAL \$</b>			<b>2,542.68</b>

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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

**Tyler Pepe for Supervisor 2024**

I.D. NUMBER

**1458774**

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Right Choice Strategies, LLC [REDACTED] Clovis, CA 93612	CNS		1,500.00
Right Choice Strategies, LLC [REDACTED] Clovis, CA 93612	WEB		580.56
Samantha Pepe [REDACTED] Hanford, CA 93230	OFC	See memo items below	240.00
Integrated Solutions: Political [REDACTED] San Diego, CA 92116	OFC		105.00
<b>SUBTOTAL \$</b>			<b>2,425.56</b>

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

**SUBTOTAL \$ 2,425.56**

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
COGS South Signs [REDACTED] Santa Ana, CA 92707	CMP		5,445.86
Right Choice Strategies, LLC [REDACTED] Clovis, CA 93612	CNS		1,500.00
Valley Vision Treasury [REDACTED] Fresno, CA 93704	PRO	Treasury services	388.90
Rachael Pepe [REDACTED] Hanford, CA 93230	CVC	See memo items below	200.00
<b>SUBTOTAL \$</b>			<b>7,534.76</b>

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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**Tyler Pepe for Supervisor 2024**

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Srv Screen & Image Printing [REDACTED] Hanford, CA 93230	CMP		334.62
Integrated Solutions: Political [REDACTED] San Diego, CA 92116	OFC		105.00
Valley Vision Treasury [REDACTED] Fresno, CA 93704	PRO	Treasury services	500.01
Right Choice Strategies, LLC [REDACTED] Clovis, CA 93612	CNS		2,238.36

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

**SUBTOTAL \$ 3,177.99**



**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	12/31/2023	Page <u>25</u> of <u>33</u>
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		I.D. NUMBER
Tyler Pepe for Supervisor 2024		1458774

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Tyler Pepe for Supervisor 2024

I.D. NUMBER

1458774

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Samantha Pepe [REDACTED] Hanford, CA 93230	CVC	See memo items below	400.00
Samantha Pepe [REDACTED] Hanford, CA 93230	OFC	See memo items below	207.13
Right Choice Strategies, LLC [REDACTED] Clovis, CA 93612	CNS		2,078.68
Kings County Elections [REDACTED] Hanford, CA 93230	FIL		1,328.46
<b>SUBTOTAL \$</b>			<b>4,014.27</b>

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

**SUBTOTAL \$ 4,014.27**

**Schedule E  
Payments Made**

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**Tyler Pepe for Supervisor 2024**

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kings County Elections [REDACTED] Hanford, CA 93230	FIL		732.68
Integrated Solutions: Political [REDACTED] San Diego, CA 92116	OFC		105.00
Kings County Firefighters [REDACTED] Hanford, CA 93230	CVC		500.00
Valley Vision Treasury [REDACTED] Fresno, CA 93704	PRO	Treasury services	429.23
<b>SUBTOTAL \$</b>			<b>1,766.91</b>

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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**Tyler Pepe for Supervisor 2024**

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
eFundraising Connections [REDACTED] Sacramento, CA 95816	OFC		68.00
Valley Vision Treasury [REDACTED] Fresno, CA 93704	PRO	Treasury services	489.56

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	-----	\$	<u>30,452.83</u>
2. Unitemized payments made this period of under \$100	-----	\$	<u>223.25</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	-----	\$	<u>0.00</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	-----	<b>TOTAL \$</b>	<u>30,676.08</u>

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

**SUBTOTAL \$ 557.56**

**Schedule F  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	12/31/2023	Page 28 of 33
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Tyler Pepe for Supervisor 2024		1458774

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Tyler Pepe for Supervisor 2024

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF 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

**SCHEDULE F SUMMARY**

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 0.00

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

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

Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER		I.D. NUMBER
Tyler Pepe for Supervisor 2024		1458774
NAME OF AGENT OR INDEPENDENT CONTRACTOR		
Katelyn Monteiro		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Tyler Pepe for Supervisor 2024

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Katelyn Monteiro

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
A.S. Danielson's Inc [REDACTED] Armona, CA 93202	FND		750.00

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

**TOTAL \* \$ 750.00**

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

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

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

Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**Tyler Pepe for Supervisor 2024**

NAME OF AGENT OR INDEPENDENT CONTRACTOR

**Rachael Pepe**

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Hanford FFA Parents Club [REDACTED] Hanford, CA 93230	CVC		200.00

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

**TOTAL \* \$ 200.00**

\*\* 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.

SCHEDULE G

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**Tyler Pepe for Supervisor 2024**

NAME OF AGENT OR INDEPENDENT CONTRACTOR

**Samantha Pepe**

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MTG meetings and appearances                  | RAD radio airtime and production costs                        |
| CNS campaign consultants  | OFC office expenses                           | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | PET petition circulating                      | SAL campaign workers' salaries                                |
| CVC civic donations   | PHO phone banks                               | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | POL polling and survey research               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POS postage, delivery and messenger services  | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRT print ads                                 | VOT voter registration  |
| LIT campaign literature and mailings                              |   | 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
Hanford FFA Parents Club [REDACTED] Hanford, CA 93230	CVC		400.00

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

**TOTAL \* \$ 400.00**

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

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

**Schedule H  
Loans Made to Others\***

Amounts may be rounded  
to whole dollars.

SCHEDULE H

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

**Tyler Pepe for Supervisor 2024**

I.D. NUMBER  
**1458774**

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 OR FORGIVENESS THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE	_____% RATE \$ _____	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION**

<b>SUBTOTALS</b>	\$	\$	\$	\$				
------------------	----	----	----	----	--	--	--	--

\*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E



**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

**Tyler Pepe for Supervisor 2024**

I.D. NUMBER

**1458774**

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

**Schedule I Summary**

1. Itemized increases to cash this period. -----	\$	0.00	
2. Unitemized 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	
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) -----	<b>TOTAL \$</b>	<b>0.00</b>	

**SUBTOTAL \$**