Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84	4216.5)	Statement covers period from 02/18/2024 through 06/30/2624		Date Stamp RECEIV AUG 0 1 2024 Kings County Elect	ED Pa	ALIFORNIA 460 FORM of 10 For Official Use Only
1. Type of Recipient Commi	ttee: All Committees – C	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:			
 ☒ Officeholder, Candidate Contro State Candidate Election Co Recall (Also Complete Pert 5) ☐ General Purpose Committee ○ Sponsored ○ Small Contributor Committee ○ Political Party/Central Committee 	ommittee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	☐ Preelection Statemer ☐ Semi-annual Statemer ☐ Termination Statemer (Also file a Form 410 ☐ Amendment (Explain	ent [nt [Termination)	Suppleme	Statement dd-Year Report ntal Preelection - Attach Form 495
3. Committee Information		.D. NUMBER 1303250	Treasurer(s)	***		
COMMITTEE NAME (OR CANDIDATE'S Valle for Supervisor 2024 STREET ADDRESS (NO P.O. BOX)			NAME OF TREASURER Danny Trujillo MAKLING ADDRESS CITY Corcoran	STATE CA	ZiP CODE 93212	AREA CODE/PHONE
CITY	STATE ZIP (ODE AREA CODE/PHONE	NAME OF ASSISTANT TREAS	URER, IF ANY		
Corcoran	CA 932		Denise Lewis			
MAILING ADDRESS (IF DIFFERENT)	NO. AND STREET OR P.O.	вох	MAILING ADDRESS 5445 Madison Avenue			
Post Office Box 751	STATE ZIP (CODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Corcoran	CA 932		Sacramento	CA	95841	AREA GODEN HORE
OPTIONAL: FAX / E-MAIL ADDRESS (916)348-9111 / campaigns	@rcbs.us	,	OPTIONAL: FAX / E-MAIL AD	DRESS		
Executed on 2/17 Executed on 2/17 Executed on 5	e in preparing and reviewing a	nia that the foregoing is true and copre	of Controlling Officeholder, Candidate Signature of Controlling Officeholder, Candidate Signature of Controlling Officeholder, Candidate	ant Treasurer Proponent or Responsible Officer of State Measure Proponent		
						FPPC Form 460 (Jan/2016)

Officeholder or Candidate Controlled Committee			6.	Primarily Formed Bal	llot Measure Committee				
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
Richard Valle									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AF County Supervisor Kings County Distr		R IF APPLICABI	LE)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STR	,	STATE	ZIP		Identify the controlling o	fficeholder, ca	ndidate, or sta	ate measure	proponent, if any.
<u> </u>	Corcoran	CA	93212		NAME OF OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT		
Related Committees Not Included in not included in this statement that are controlle contributions or make expenditures on behalf of	d by you or are prin	•			OFFICE SOUGHT OR HELD			DISTRICT NO.	F ANY
COMMITTEE NAME	I.D. NUN	IBER							
NAME OF TREASURER	CONTRO	DLLED COMMIT	TEE?	7.	Primarily Formed Car				
THE STATE OF THE S					officeholder(s) or candidate	s) for which th	is committee is	primarily form	rea.
COMMITTEE ADDRESS STREET ADDRESS	(NO P.O. BOX)				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	OHT OR HELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE	AREA COI	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	OHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUN	1BER			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	SHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	□ YI	DELECTION NO.			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	SHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS	(NO P.O. BOX)				,				
CITY STATE	ZIP CODE	AREA CO	DE/PHONE		Att	ach continuat	ion sheets if n	ecessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE CALIFORNIA FORM Statement covers period 02/18/2024 from . Page ____3 ___ of ____10 06/30/2024 through _ 1.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Valle for Supervisor 2024 1303250

Contributions Received	(Column A TOTALTHIS PERIOD FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	0.00	\$	0.00	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3		0.00		0.00	· · · · · · · · · · · · · · · · · · ·
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	0,00	\$	0.00	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21 Evnenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$. 0.00	\$	0.00	Made \$ \$
Expenditures Made			·		Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	4,861.59	\$	5,957.30	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	4,861.59	\$	5,957.30	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		669.17		669.17	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	5,530.76	\$	6,626.47	\$
Current Cash Statement					/\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	5,632.35	То	calculate Column B, add	
13. Cash Receipts		0.00		ounts in Column A to the responding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments		4,861.59		ort. Some amounts in lumn A may be negative	
16. ENDING CASHBALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	770.76		ures that should be stracted from previous	
If this is a termination statement, Line 16 must be zero.			pe	riod amounts. If this is first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Pert 2	\$	0.00	for	this calendar year, only ry over the amounts	
Cash Equivalents and Outstanding Debts			fro an	m Lines 2, 7, and 9 (if	
18. Cash Equivalents See instructions on reverse	\$	0.00	ŭ"	11.	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	669.17			
					FPPC Advice: advice@fopc.ca.gov (866/275-3772

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

Schedule E Payments Made	Amounts may t to whole d			Stateme	nt covers period	CALIFO FOR	
SEE INSTRUCTIONS ON REVERSE				through _	06/30/2024		of
NAME OF FILER						I.D. NUM	BER
Valle for Supervisor 2024						130325	3
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundraising events IND Independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mallings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearances ses lating	services	RAD radio a RFD returns SAL campa TEL t.v. or TRC candid TRS staff/sp TSF transfe VOT voter in	airtime and production ed contributions aign workers' salaries cable airtime and prod late travel, lodging, and pouse travel, lodging, er between committee	duction costs d meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESC	RIPTION OF PAY	YMENT		AMOUNT PAID
ATET Mobility Atlanta, GA 30353		OPC					137.79
AT&T Mobility Atlanta, GA 30353		OFC					100.00
AT&T Mobility Atlanta, GA 30353		OFC				:	237.75
* Payments that are contributions or independent expenditures n	nust also be summ	arized on Schedulo	. D.		su	BTOTAL\$	475.5
Schedule E Summary		P. (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				- поставление селетельно завение вымо	
Itemized payments made this period. (Include all Schedule)	E subtotals.)	*****************			***************************************	\$	4,810.59
Unitemized payments made this period of under \$100	•						51.00
3. Total interest paid this period on loans. (Enter amount from							0.00

Schedule E (Continuation Sheet)

Amounts may be rounded

	SCHEDULE E (CONT.
Statement covers period	CALIFORNIA 460
from02/18/2024	FORM TOO
through 06/30/2024	Page 5 of 10
	I.D. NUMBER
	1303250

to whole dollars. **Payments Made** SEE INSTRUCTIONS ON REVERSE 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. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants RFD returned contributions MTG meetings and appearances SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses CVC civic donations petition circulating TEL t.v. or cable airtime and production costs PET candidate filing/ballot fees candidate travel, lodging, and meals FIL РНО phone banks TRC FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor POS TSF ND voter registration LEG legal defense professional services (legal, accounting) VOT campaign literature and mailings PRT print ads WEB information technology costs (Internet, e-mail) LIT NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID OF COMMITTEE, ALSO ENTER I.D. NUMBER) AT&T Mobility OFC 237,62 Atlanta, GA 30353 AT&T Mobility 237.62 OFC Atlanta, GA 30353 06/22/2024, Keynote Speaker Ground Transportation for Alex Barrerra TRS 400.00 Veterans event in Corcoran, 1 Corcoran, CA 93212 Nicole Collins CMP Appetizers and Beverages Only 963.97 Corcoran, CA 93212 Nicole Collins 47.63 TRC Corcoran, CA 93212

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

SUBTOTAL \$

1,886.84

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars. SCHEDULE E (CONT.)

CALIFORNIA

Statement covers period

FORM 02/18/2024 from. 06/30/2024 through_ Page __6 of 10 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER 1303250 Valle for Supervisor 2024 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 CMP campaign paraphernalia/misc. RFD returned contributions CNS campaign consultants MTG meetings and appearances SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses CVC civic donations petition circulating t.v. or cable airtime and production costs PET candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks staff/spouse travel, lodging, and meals fundraising events polling and survey research FND POL postage, delivery and messenger services transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* TSF ND POS professional services (legal, accounting) VOT voter registration LEG legal defense PRO print ads WEB information technology costs (internet, e-mail) campaign literature and mailings PRT NAME AND ADDRESS OF PAYEE AMOUNT PAID OR DESCRIPTION OF PAYMENT CODE (IF COMMITTEE, ALSO ENTER LD. NUMBER) 04/22/2024, Constituent Meeting, 3, Candidate 137.92 Nicole Collins NTG Corcoran, CA 93212 Nicole Collins MTG 47.84 Corcoran, CA 93212 24.50 Nicole Collins MTG Corcoran, CA 93212 89.46 MTG Nicole Collins Corcoran, CA 93212 7.15 Nicole Collins MTG Corcoran, CA 93212 SUBTOTAL \$ * Payments that are contributions or independent expenditures must also be summarized on Schedule D. 306.87

Schedule (Continuat	E tion Sheet)
Payments	Made

Amounts may be rounded to whole dollars.

		JOHEDOLE E (COM)
State	ement covers period	CALIFORNIA 460
from	02/18/2024	FORM TOO
through	06/30/2024	Page7 of10
		I.D. NUMBER
		1303350

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. 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 candidate filing/ballot fees candidate travel, lodging, and meals FIL PHO phone banks TRC

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 legal defense professional services (legal, accounting) LEG PRO VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (Internet, e-mail)

CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
MTG		82.00
MTG	04/07/2024, Constituent meeting, 4, Candidate	161.94
cvc		200.00
MTG	04/27/2024, Attend Golden Boy Boxing Event,1, Candidate	300,000
CNS		400.00
	MTG CVC	MTG 04/07/2024, Constituent meeting, 4, Candidate CVC MTG 04/27/2024, Attend Golden Boy Boxing Event, 1, Candidate

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 1,143.94

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 02/18/2024 CALIFORNIA 460

through 06/30/2024 Page 8 of 10

I.D. NUMBER
1303250

BEE INSTRUCTIONS ON REVERSE				throu	gh <u>06/30/2024</u>	Page	8 of 10
IAME OF FILER						I.D. NUMBE	:R
Valle for Supervisor 2024						1303250	
CODES: If one of the following codes accurately describes campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events to independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member commetings and office expense pelition circular PHO phone banks polling and suppostage, deliper professional support print ads	nunications I appearances ses aling urvey researd very and mes	s h senger services	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment, radio airlime and production returned contributions campaign workers' salaries t.v. or cable airlime and production candidate travet, lodging, and staff/spouse travet, lodging, transfer between committees voter registration information technology costs	fuction costs d meals and meals s of the sam	·
NAME AND ADDRESS OF PAYEE (#F COMMITTEE, ALSO ENTER LD. NUMBER)		CODE O	R DES	CRIPTIO	N OF PAYMENT		AMOUNT PAID
ulicia Ramirez Jemoore, CA 93245		CNS					350.00
River City Business Services Sacramento, CA 95841		PRO					130.84
River City Business Services Sacramento, CA 95841		PRO				de de la composition della com	176.95
River City Business Services Sacramento, CA 95841		PRO				Andreas de la constantina del constantina de la constantina de la constantina del constantina de la co	157.91
River City Business Services Sacramento, CA 95841		PRO					181.74
Doumonts that are contributions or independent avacantitures must also	ho summarizad on t	Schadula D			SII	RTOTAL \$	997 44

FPPC Form 460 (Jan/2016)

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

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

	00/////
Statement covers period	CALIFORNIA 460
from 02/18/2024	STREET, MARKET BOND OF THE STREET, MARKET STREET, STRE
through <u>06/30/2024</u>	Page 9 of 10
	I.D. NUMBER
	1303250

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Valle for Supervisor 2024

Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized)				. PAID TOTALS \$	0.00	
1. Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized) 1. Total accrued expenses of \$100 or more, plus total unitemized accrued expenses of \$100 or more.	Schedule F, Column (b) su accrued expenses under \$	btotals for \$100.)	INCU	RRED TOTALS \$ _	669.17	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	0.00\$	669.17	0.00\$	669.17	
	, .					
Nicole Valle Corcoran, CA 93212	MTG 06/22/2024, Meeting with Event Speaker, 3, Candidate	0.00	403.60	0.00	403.60	
River City Business Services Sacramento, CA 95841	PRO	0.00	265.57	0.00	265.57	
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	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC dvic 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 communication MTG meetings and appearan OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and office PRO professional services (PRT print ads	earch messenger services	RAD radio airlime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airlime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/spo VOT voter registration WEB information technology costs (internet, e-mail)			

on the Summary Page, Column A, Line 9.)

NET \$ 669.17

May be a negative number

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and

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

Amounts may be rounded to whole dollars.

		SCHEDULE G
	Statement covers period	CALIFORNIA A CO
	from 02/18/2024	FORM 400
	through	Page 10 of 10
		I.D. NUMBER
		1303250

Valle for Supervisor 2024

SEE INSTRUCTIONS ON REVERSE

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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.

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 airlime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services TSF LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

^{*} 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 I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
BevMo Visalia, CA 93291	CMP	Beverages Only	576.4

Attach additional information on appropriately labeled continuation sheets.

576.43

TOTAL* \$

^{*} 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.