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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 For An	Authorized Con	nmittee		Office Use Only
NAME OF COMMITTEE (in full) TYPE OR PR		xample: If typing, t	ype 12FE4M5	
FRIENDS TO ELECT LATERES	A A JONES			1
ADDRESS (number and street)	75 			
Check if different				
than previously reported. (ACC)	CH 		FL	33480
2. FEC IDENTIFICATION NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00552711	3. IS THIS REPORT	NEW (N)	OR AMEND (A)	STATE ▼ DISTRICT FL 10 10
4. TYPE OF REPORT (Choose One)	 (b) 12-Day PR	E -Election Report f	or the	
(a) Quarterly Reports:	(2) 12 Bay 111			П
April 15 Quarterly Report (Q1)		Primary (12P)	General (1	2G) Runoff (12R)
July 15 Quarterly Report (Q2)	ш	Convention (120	Special (1)	2S)
October 15 Quarterly Report (Q3)	Election or	M M / I) D / Y Y Y Y	in the State of
January 31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Report	for the:	
		General (30G)	Runoff (30	PR) Special (30S)
Termination Report (TER)	Election or	M M / [) D / Y Y Y Y	in the State of
5. Covering Period 01 01 01	/ Y Y Y Y Y 2023	through	M M / D D /	Y Y Y Y Y 2023
I certify that I have examined this Report and Kiger, Rob Type or Print Name of Treasurer		nowledge and beli	ef it is true, correct and	l complete.
Kiger, Robert, , , Signature of Treasurer		[Electronically Filed	d] Date	07 / Y Y Y Y Y Y Y 2023
NOTE: Submission of false, erroneous, or incom	plete information may	subject the person	signing this Report to the	ne penalties of 52 U.S.C. §30109
Office Use Only				FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

2023

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2023

03

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name FRIENDS TO ELECT LATERESA A JONES

01

01

Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 31.00 51.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 31.00 51.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 78.21 157.53 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 78.21 157.53 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of -29.42Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 4727.46 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

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Write or Type Committee Name

FRIENDS TO ELECT LATERESA A JONES

Report Covering the Period: From: 01 01 2023 To: 03 31 2023

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(i) Itemized (use Schedule A)	7 7 7	7
	(ii) Unitemized	31.00	51.00
	(iii) TOTAL of contributions from individuals	31.00	51.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	31.00	51.00
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	45.00
	(b) All Other Loans(c) TOTAL LOANS	0.00	0.00
	(add Lines 13(a) and (b))	0.00	45.00
	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	31.00	96.00

DETAILED SUMMARY PAGE

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	78.21	157.53
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	78.21	157.53
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		17.79
24	TOTAL RECEIPTS THIS PERIOD (from Line	31.00	
25.	SUBTOTAL (add Line 23 and Line 24)		48.79
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		
27.	CASH ON HAND AT CLOSE OF REPORTIN	G PERIOD	– 29.42

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 5 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: SC/10.4163 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 215.00 19.40 195.60 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 11M 5.00 D04D Ž021 Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 195.60 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

Use separate schedule(s) FOR LINE NUMBER: for each category of the **X** 13a **LOANS** (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4452 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 96.23 60.00 36.23 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D26^D M01M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding:

SUBTOTALS This Period This Page (optional)..... 36.23 TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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OF

Transaction ID: SC/10.4512 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 210.16 0.00 210.16 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D26^D M₀₂M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 210.16 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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OF

13b Transaction ID: SC/10.4496 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 200.00 100.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D07D M 03M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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for each category of the **X** 13a **LOANS** (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4508 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 53.86 0.00 53.86 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D16^D M 03M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 53.86 TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4509 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 67.75 60.00 7.75 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D 18D M 03M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 7.75 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4510 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25.58 0.00 25.58 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D25^D M 03M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 25.58 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4544 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 503.28 500.00 3.28 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D01D M 05M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3.28 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4565 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 350.00 0.00 350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D07D M 06M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 350.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4573 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D13^D M 06M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4616 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D 18D M 07M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4650 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D09D M80^M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4653 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D11 ^D ^M80^M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4679 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D31 D M 10M **Ž**02Ž Y12/31/2024 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4693 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 45.00 0.00 45.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 M 12M ^D27^D **Ž**02Ž Y12/31/2024 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 45.00 TOTALS This Period (last page in this line only) 4727.46 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.