

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

FRIENDS TO ELECT LATERESA A JONES

ADDRESS (number and street)

Check if different than previously reported. (ACC)

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

3. IS THIS REPORT NEW (N) OR AMENDED (A)

STATE ▼ DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kiger, Robert, , ,

Signature of Treasurer Kiger, Robert, , , [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
FRIENDS TO ELECT LATERESA A JONES

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	20.00	6105.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	20.00	6105.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2282.01	12837.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	36.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2282.01	12801.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	202.55	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	4082.46	

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

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS TO ELECT LATERESA A JONES

Report Covering the Period: From: / / To: / /

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		
(i) Itemized (use Schedule A).....	0.00	3250.00
(ii) Unitemized.....	20.00	2855.00
(iii) TOTAL of contributions from individuals ▶	20.00	6105.00
(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
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	20.00	6105.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	3000.00	5261.86
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	3000.00	5261.86
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	36.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	3020.00	11402.86

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2282.01	12837.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	620.00	1179.40
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	620.00	1179.40
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) ►	2902.01	14017.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	84.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3020.00
25. SUBTOTAL (add Line 23 and Line 24).....	3104.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2902.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	202.55

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 5 OF 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS TO ELECT LATERESA A JONES

A. Full Name (Last, First, Middle Initial)
Jones, Lateresa, A, ,

Mailing Address PO BOX 3475

City PALM BEACH State FL Zip Code 33480

FEC ID number of contributing federal political committee. **C** H0FL20112

Name of Employer Self Occupation Candidate

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5111.86

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2022

Transaction ID : SA13A.4616

Amount of Each Receipt this Period
 3000.00

Memo Item
 Loan to Campaign

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	3000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS TO ELECT LATERESA A JONES

Full Name (Last, First, Middle Initial) A. FEC Infusion		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2022
Mailing Address PO Box 3475		FEC Identification Number C C00552711
City Palm Beach	State FL	Zip Code 33480
Purpose of Disbursement Accounting & Compliance	Category/ Type 001	Amount of Each Disbursement this Period 587.00
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL District: 10	Transaction ID : SB17.4632 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2022
Mailing Address PO Box 2463		FEC Identification Number C C00552711
City Houston	State TX	Zip Code 77252
Purpose of Disbursement Fuel	Category/ Type 002	Amount of Each Disbursement this Period 72.12
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL District: 10	Transaction ID : SB17.4626 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2022
Mailing Address PO Box 2463		FEC Identification Number C C00552711
City Houston	State TX	Zip Code 77252
Purpose of Disbursement Fuel	Category/ Type 002	Amount of Each Disbursement this Period 50.00
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL District: 10	Transaction ID : SB17.4631 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	709.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS TO ELECT LATERESA A JONES

Full Name (Last, First, Middle Initial) A. Sparkle On Custom Designs		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2022
Mailing Address 1644 NE 22nd Ave Suite C		FEC Identification Number C C00552711
City Ocala	State FL	Zip Code 34470
Purpose of Disbursement Printing/Campaign Shirts	Category/Type 006	Amount of Each Disbursement this Period 271.78
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL	District: 10	Transaction ID : SB17.4623 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. United State Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2022
Mailing Address 400SW 1st Ave		FEC Identification Number C C00552711
City Ocala	State FL	Zip Code 33478
Purpose of Disbursement Postage	Category/Type 001	Amount of Each Disbursement this Period 311.10
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL	District: 10	Transaction ID : SB17.4620 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. United State Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2022
Mailing Address 400SW 1st Ave		FEC Identification Number C C00552711
City Ocala	State FL	Zip Code 33478
Purpose of Disbursement Postage	Category/Type 001	Amount of Each Disbursement this Period 13.10
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL	District: 10	Transaction ID : SB17.4628 <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	595.98
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS TO ELECT LATERESA A JONES

Full Name (Last, First, Middle Initial) A. Verizon			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2022		
Mailing Address 4602 Sw College Rd Suite 102			FEC Identification Number C C00552711		
City Ocala	State FL	Zip Code 34474	Amount of Each Disbursement this Period 229.34		
Purpose of Disbursement Telephone Services-Cell Phone		Category/ Type 001	Transaction ID : SB17.4621		
Candidate Name FRIENDS TO ELECT LATERESA A JONES		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: FL District: 10					

Full Name (Last, First, Middle Initial) B. Verizon			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2022		
Mailing Address 4602 Sw College Rd Suite 102			FEC Identification Number C C00552711		
City Ocala	State FL	Zip Code 34474	Amount of Each Disbursement this Period 350.74		
Purpose of Disbursement Telephone Services-Cell Phone		Category/ Type 001	Transaction ID : SB17.4625		
Candidate Name FRIENDS TO ELECT LATERESA A JONES		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: FL District: 10					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	580.08
TOTAL This Period (last page this line number only).....▶	1885.18

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 20	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS TO ELECT LATERESA A JONES

Full Name (Last, First, Middle Initial) A. Jones, Lateresa, A, ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2022
Mailing Address PO BOX 3475		FEC Identification Number C C00552711
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement Repayment of Loan	Category/ Type 009	Amount of Each Disbursement this Period 500.00
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL District: 10	Transaction ID : SB19A.4619 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Jones, Lateresa, A, ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2022
Mailing Address PO BOX 3475		FEC Identification Number C C00552711
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement Repayment of Loan	Category/ Type 009	Amount of Each Disbursement this Period 60.00
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL District: 10	Transaction ID : SB19A.4624 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Jones, Lateresa, A, ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2022
Mailing Address PO BOX 3475		FEC Identification Number C C00552711
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement Repayment of Loan	Category/ Type 009	Amount of Each Disbursement this Period 60.00
Candidate Name FRIENDS TO ELECT LATERESA A JONES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: FL District: 10	Transaction ID : SB19A.4635 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	620.00
TOTAL This Period (last page this line number only).....▶	620.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4163**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 215.00	Cumulative Payment To Date 19.40	Balance Outstanding at Close of This Period 195.60
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TERMS	Date Incurred M 11 / D 04 / Y 2021	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4452**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 96.23	Cumulative Payment To Date 60.00	Balance Outstanding at Close of This Period 36.23
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TERMS	Date Incurred M 01 / D 26 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4512**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 210.16	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 210.16
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TERMS	Date Incurred M 02 / D 26 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4496**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 200.00	Cumulative Payment To Date 100.00	Balance Outstanding at Close of This Period 100.00
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TERMS	Date Incurred M 03 / D 07 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4508**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 53.86	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 53.86
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TERMS	Date Incurred M 03 / D 16 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4509**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 67.75	Cumulative Payment To Date 60.00	Balance Outstanding at Close of This Period 7.75
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TERMS	Date Incurred M 03 / D 18 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4510**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 25.58	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25.58
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TERMS	Date Incurred M 03 / D 25 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4544**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 503.28	Cumulative Payment To Date 500.00	Balance Outstanding at Close of This Period 3.28
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TERMS	Date Incurred M 05 / D 01 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4565**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 350.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 350.00
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TERMS	Date Incurred M 06 / D 07 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4573
FRIENDS TO ELECT LATERESA A JONES

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Jones, Lateresa, A, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475		
City PALM BEACH	State FL	ZIP Code 33480
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100.00
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TERMS	Date Incurred M 06 / D 13 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4616**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jones, Lateresa, A, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 3475			
City PALM BEACH	State FL	ZIP Code 33480	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 3000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3000.00
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TERMS	Date Incurred M 07 / D 18 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	3000.00
TOTALS This Period (last page in this line only).....▶	4082.46

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