

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. 12FE4M5 FRIENDS TO ELECT LATERESA A JONES

ADDRESS (number and street) PO BOX 3475 PALM BEACH FL 33480 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00552711 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT FL 10

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 MM/DD/YYYY in the State of

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

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

Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 04/01/2022 through 06/30/2022

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 MM/DD/YYYY 07/03/2022

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

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)).... | 1680.00 | 6085.00 |
| (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))..... | 1680.00 | 6085.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 2563.22 | 10555.65 |
| (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))..... | 2563.22 | 10519.65 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 84.56 | |
| 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)..... | 1702.46 | |

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)..... | 1500.00 | 3250.00 |
| (ii) Unitemized..... | 180.00 | 2835.00 |
| (iii) TOTAL of contributions from individuals ▶ | 1680.00 | 6085.00 |
| (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)).. | 1680.00 | 6085.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 1053.28 | 2261.86 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 1053.28 | 2261.86 |
| 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)..... ▶ | 2733.28 | 8382.86 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 2563.22 | 10555.65 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 200.00 | 559.40 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 200.00 | 559.40 |
| 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) ► | 2763.22 | 11115.05 |

III. CASH SUMMARY

| | |
|---|---------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 114.50 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 2733.28 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 2847.78 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 2763.22 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 84.56 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | | | |
|---|-------------------------------------|-------------------------------------|------------------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 5 OF 24 | |
| <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 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)
Nappi, Monique, , ,

Mailing Address 75 Oakwood Ave

| | | |
|--------------|-------------|-------------------|
| City Lynn | State MA | Zip Code 01902 |
|--------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------|
| Name of Employer Self | Occupation Doctor |
|--------------------------|----------------------|

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2022

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period
500.00

Memo Item Contribution

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

Mailing Address 2506 NW 71st PL

| | | |
|---------------------|-------------|-------------------|
| City Gainesville | State FL | Zip Code 32653 |
|---------------------|-------------|-------------------|

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

| | |
|---------------------------------|-------------------------------------|
| Name of Employer State of FL | Occupation Florida State Senator |
|---------------------------------|-------------------------------------|

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2022

Transaction ID : SA11AI.4530

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 1500.00 |
| 1500.00 |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 24 |
| | <input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

| | | | | | |
|---|-------------|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Jones, Lateresa, A, , | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 12 / 2022 | | |
| Mailing Address PO BOX 3475 | | | Transaction ID : SA13A.4524 | | |
| City PALM BEACH | State FL | Zip Code 33480 | Amount of Each Receipt this Period _____ 100.00 | | |
| FEC ID number of contributing federal political committee. C H0FL20112 | | | <input type="checkbox"/> Memo Item Candidate Loan to Campaign | | |
| Name of Employer Self | | Occupation Candidate | | | |
| Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ _____ 1158.58 | | | |

| | | | | | |
|---|-------------|---|---|--|--|
| Full Name (Last, First, Middle Initial) B. Jones, Lateresa, A, , | | | Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2022 | | |
| Mailing Address PO BOX 3475 | | | Transaction ID : SA13A.4544 | | |
| City PALM BEACH | State FL | Zip Code 33480 | Amount of Each Receipt this Period _____ 503.28 | | |
| FEC ID number of contributing federal political committee. C H0FL20112 | | | <input type="checkbox"/> Memo Item Loan to Campaign May 2022 | | |
| Name of Employer Self | | Occupation Candidate | | | |
| Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ _____ 1661.86 | | | |

| | | | | | |
|---|-------------|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Jones, Lateresa, A, , | | | Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 07 / 2022 | | |
| Mailing Address PO BOX 3475 | | | Transaction ID : SA13A.4565 | | |
| City PALM BEACH | State FL | Zip Code 33480 | Amount of Each Receipt this Period _____ 350.00 | | |
| FEC ID number of contributing federal political committee. C H0FL20112 | | | <input type="checkbox"/> Memo Item Loan to Campaign | | |
| Name of Employer Self | | Occupation Candidate | | | |
| Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ _____ 2011.86 | | | |

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | _____ 953.28 |
| TOTAL This Period (last page this line number only)..... ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 24
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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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 ▼
2111.86

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA13A.4573

Amount of Each Receipt this Period
100.00

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).....▶ | 100.00 |
| TOTAL This Period (last page this line number only).....▶ | 1053.28 |

**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 24 | |
| | <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. Circle K | | Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2022 |
| Mailing Address 1130 W Warner Rd | | FEC Identification Number C C00552711 |
| City Tempe | State AZ | Zip Code 85284 |
| Purpose of Disbursement Fuel | Category/ Type 002 | Amount of Each Disbursement this Period 42.33 |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.4551 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: FL District: 10 | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Circle K | | Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2022 |
| Mailing Address 1130 W Warner Rd | | FEC Identification Number C C00552711 |
| City Tempe | State AZ | Zip Code 85284 |
| Purpose of Disbursement Fuel | Category/ Type 002 | Amount of Each Disbursement this Period 20.05 |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.4552 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: FL District: 10 | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. FEC Infusion | | Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 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 400.00 |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.4563 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: FL District: 10 | <input type="checkbox"/> Memo Item |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 462.38 |
| 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 9 OF 24 | |
| | <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. Florida Department of Corporations | | Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2022 |
| Mailing Address 215 Monroe St Suite 810 | | FEC Identification Number C C00552711 |
| City Tallahassee | State FL | Zip Code 32303 |
| Purpose of Disbursement Registration Fees/Annual Report | Category/Type 001 | |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 138.75 |
| 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) ▼ | Transaction ID : SB17.4523 <input type="checkbox"/> Memo Item |
| State: FL | District: 10 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Kiger, Robert, , , | | Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022 |
| Mailing Address 235 Flagler Lane | | FEC Identification Number C C00552711 |
| City West Palm Beach | State FL | Zip Code 33407 |
| Purpose of Disbursement Treasurer Fee | Category/Type 001 | |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 102.50 |
| 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) ▼ | Transaction ID : SB17.4516 <input type="checkbox"/> Memo Item |
| State: FL | District: 10 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Shell | | Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 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 | |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 54.53 |
| 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) ▼ | Transaction ID : SB17.4548 <input type="checkbox"/> Memo Item |
| State: FL | District: 10 | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 295.78 |
| 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 10 OF 24 | |
| | <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. Shell | | Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 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 |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 84.77 |
| 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) ▼ | Transaction ID : SB17.4547 |
| State: FL District: 10 | | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Shell | | Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 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 |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 20.00 |
| 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) ▼ | Transaction ID : SB17.4549 |
| State: FL District: 10 | | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Shell | | Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 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 |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 80.04 |
| 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) ▼ | Transaction ID : SB17.4546 |
| State: FL District: 10 | | <input type="checkbox"/> Memo Item |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 184.81 |
| 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 11 OF 24 | |
| | <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. Shell | | | Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2022 | |
| Mailing Address PO Box 2463 | | | FEC Identification Number C C00552711 | |
| City Houston | State TX | Zip Code 77252 | Amount of Each Disbursement this Period 32.12 | |
| Purpose of Disbursement Fuel | | Category/ Type 002 | Transaction ID : SB17.4564 | |
| 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. Shell | | | Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2022 | |
| Mailing Address PO Box 2463 | | | FEC Identification Number C C00552711 | |
| City Houston | State TX | Zip Code 77252 | Amount of Each Disbursement this Period 52.29 | |
| Purpose of Disbursement Fuel | | Category/ Type 002 | Transaction ID : SB17.4571 | |
| 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. Shell | | | Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2022 | |
| Mailing Address PO Box 2463 | | | FEC Identification Number C C00552711 | |
| City Houston | State TX | Zip Code 77252 | Amount of Each Disbursement this Period 87.57 | |
| Purpose of Disbursement Fuel | | Category/ Type 002 | Transaction ID : SB17.4594 | |
| 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 | | | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 171.98 |
| 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 12 OF 24 | |
| | <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. Shell | | Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 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 | |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 75.00 |
| 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) ▼ | Transaction ID : SB17.4610 <input type="checkbox"/> Memo Item |
| State: FL District: 10 | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Verizon | | Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2022 |
| Mailing Address 4602 Sw College Rd Suite 102 | | FEC Identification Number C C00552711 |
| City Ocala | State FL | Zip Code 34474 |
| Purpose of Disbursement Telephone Services-Cell Phone | Category/ Type 001 | |
| Candidate Name FRIENDS TO ELECT LATERESA A JONES | | Amount of Each Disbursement this Period 230.87 |
| 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) ▼ | Transaction ID : SB17.4562 <input type="checkbox"/> Memo Item |
| 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 |
| Purpose of Disbursement | Category/ Type | |
| Candidate Name | | Amount of Each Disbursement this Period |
| 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) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 305.87 |
| TOTAL This Period (last page this line number only).....▶ | 1420.82 |

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 13 OF 24 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input checked="" 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. Jones, Lateresa, A, , | | | Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2022 | |
| Mailing Address PO BOX 3475 | | | FEC Identification Number C C00552711 | |
| City PALM BEACH | State FL | Zip Code 33480 | Amount of Each Disbursement this Period 100.00 | |
| Purpose of Disbursement Repayment of Loan | | Category/ Type 009 | Transaction ID : SB19A.4526 | |
| 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. Jones, Lateresa, A, , | | | Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2022 | |
| Mailing Address PO BOX 3475 | | | FEC Identification Number C C00552711 | |
| City PALM BEACH | State FL | Zip Code 33480 | Amount of Each Disbursement this Period 100.00 | |
| Purpose of Disbursement Repayment of Loan From Candidate | | Category/ Type 009 | Transaction ID : SB19A.4527 | |
| 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).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | 200.00 |

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 |
|-----------------------------------|-------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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 0.00 | Balance Outstanding at Close of This Period 96.23 |
|----------------------------------|------------------------------------|--|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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).....▶ | 96.23 |
| 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 |
|-----------------------------------|------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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 |
|-----------------------------------|--------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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 |
|----------------------------------|------------------------------------|--|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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 0.00 | Balance Outstanding at Close of This Period 67.75 |
|----------------------------------|------------------------------------|--|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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).....▶ | 67.75 |
| 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 |
|----------------------------------|------------------------------------|--|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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/10.4524**

| | | | |
|---|-------------|------------------------------------|---|
| 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 100.00 | Cumulative Payment To Date 100.00 | Balance Outstanding at Close of This Period 0.00 |
|-----------------------------------|--------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| TERMS | Date Incurred M 04 / D 12 / 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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).....▶ | 0.00 |
| 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/10.4544**

| | | | |
|---|-------------|------------------------------------|---|
| 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 0.00 | Balance Outstanding at Close of This Period 503.28 |
|-----------------------------------|------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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).....▶ | 503.28 |
| 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 |
|-----------------------------------|------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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) **FRIENDS TO ELECT LATERESA A JONES** Transaction ID : **SC/10.4573**

| | | | |
|---|-------------|------------------------------------|---|
| 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 100.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 100.00 |
|-----------------------------------|------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|--------------------------------------|--|---|
| 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 |
|--------------|---------------------------------------|--------------------------------------|--|---|

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).....▶ | 1702.46 |

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