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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Author	orized Com	mittee		(	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing er the lines.	, type	12FE4M5	
FRIENDS TO ELEC	T LATERESA A J	ONES				
ADDRESS (number and street)	PO BOX 3475					
▼ Check if different						
than previously reported. (ACC)	PALM BEACH				FL 3	33480
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲			STATE A	ZIP CODE ▲
C C00552711		. IS THIS REPORT	NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT    FL
4. TYPE OF REPORT ( (a) Quarterly Reports:	Choose One) (b)	12-Day <b>PRE</b>	-Election Repor	t for the:		
			Primary (12P)	[	General (12	Runoff (12R)
April 15 Quarter	ly Report (Q1)		Convention (1	2C)	Special (12	S)
July 15 Quarterly	y Report (Q2)		M M /	D D /	V V V V V	in the
October 15 Qua	rterly Report (Q3)	Election on	7			in the State of
January 31 Year	-End Report (YE) (c)	30-Day POS	<b>T</b> -Election Repo	ort for the:		
		x	General (30G)	[	Runoff (30F	Special (30S)
Termination Rep	ort (TER)	Election on	M 11 /	08	y y y y 2022	in the State of
5. Covering Period	10 / D D / Y	<sup>Y</sup> 2022	through	м м 11	/ D D / 28	y y y y y 2022
I certify that I have examined Type or Print Name of Treasu	Kiger, Robert, , ,	best of my kr	nowledge and b	elief it is ti	rue, correct and	complete.
	Kiger, Robert, , ,		[Electronically F	iled][	Date 12	/ D D / Y Y Y Y Y O1 2022
NOTE: Submission of false, err	oneous, or incomplete inf	formation may	subject the pers	on signing	this Report to the	penalties of 52 U.S.C. §30109
Office						FEC FORM 3
Use Only						(Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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2022

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

#### FRIENDS TO ELECT LATERESA A JONES

10 2022 28 20 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 10.00 6255.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 10.00 6255.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 52.52 13758.10 (from Line 17) ..... (b) Total Offsets to Operating 36.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 52.52 13722.10 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 41.37 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 4682.46 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

Report of Receipts and Disbursements

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Sum-

mary Page) for the last report filed by a candidate during the current election cycle. Write or Type Committee Name FRIENDS TO ELECT LATERESA A JONES 2022 28 2022 Report Covering the Period: From: 10 20 To: 11 I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Election Cycle Total as of** Total for 80 2022 09 (date after general election) (date of general election) through 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than 28 2022 Political Committees (last day of reporting period) Itemized (use Schedule A) 0.00 3250.00 0.00 Unitemized 10.00 3005.00 10.00 (iii) Total of contributions from individuals 10.00 6255.00 10.00 Political Party Committees 0.00 0.00 0.00 Other Political Committees 0.00 0.00 0.00

Report of Receipts and Disbursements

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FEC Form 3 (Revised 1/01)

	COLUMN A	COLUMN B	COLUMN C
	Total this Period	Election Cycle Total as of * (date of general election)	Total for * (date after general election) through * (last day of reporting period)
		(* See page 5 for date)	(* See page 5 for dates)
	(d) The Candidate		
	0.00	0.00	0.00
	(e) TOTAL CONTRIBUTIONS (other than to	pans) (add Lines 11(a)(iii), (b), (c) and (d))	
		(a)	
	10.00	6255.00	10.00
12.	TRANSFERS FROM OTHER AUTHORIZED	COMMITTEES	
	0.00	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate		
	100.00	5861.86	0.00
	(b) All Other Loans		
	(b) All Other Loans		
	0.00	0.00	0.00
		3.00	7
	(c) TOTAL LOANS (add Lines 13(a) and (b)	)	
	100.00	5861.86	0.00
I /I	OFFSETS TO OPERATING EXPENDITURE	S (Refunds rehates etc.)	
	OFFICE TO OF ENAME EXPENDITIONS	(Helands, Tebates, Ctc.)	
	0.00	36.00	0.00
	0.00	30000	
15.	OTHER RECEIPTS (Dividends, Interest, etc.	)	
	0.00	0.00	0.00
16	TOTAL BECEIPTS (add 11(a) 12 13(a) 14	and 15)	
ıu.	TOTAL RECEIPTS (add 11(e), 12, 13(c), 14	anu 13)	
	110.00	12152.86	10.00
	110.00	12132.00	10.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

F	FRIENDS TO ELECT LATERESA A J	ONES	
R	eport Covering the Period: From:	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To: 11 28 2022
	II. DISBURSEMENTS		
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C  Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
7.	OPERATING EXPENDITURES		, , ,
	52.52	13758.10	0.74
8.	TRANSFERS TO OTHER AUTHORIZED COMMI	TTEES	
	0.00	0.00	0.00
9.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	date	
	0.00	1179.40	0.00
	(b) Of All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(	(a) and 19(b))	
	0.00	1179.40	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Com	nmittees	
	0.00	0.00	0.00
	(b) Political Party Committees		
	0.00	0.00	0.00

Report of Receipts and Disbursements

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	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(c) Other Political Committees (such as PA	ACs)	
	0.00	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (a	dd Lines 20(a), (b) and (c))	
	0.00	0.00	0.00
21.	OTHER DISBURSEMENTS		
	0.00	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 1	8, 19(c), 20(d) and 21)	
	52.52	14937.50	0.74
	(Note: Substitute in lieu of Line #6	THAN LOANS)  5 of Summary Page for this report only; subtraction of Summary Page for this report on the Summary Page for this report of Summ	ct Line 20(d) from Line 11(e))
	IV. NET OPERATING EXPENDITUR	RES	
	(Note: Substitute in lieu of Line	#7 of Summary Page for this report only; sub	tract Line 14 from Line 17)
	52.52	13722.10	0.74
	V. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REP	ORTING PERIOD	- 16.11
24.	TOTAL RECIEPTS THIS PERIOD (from Lin	e 16)	110.00
25.	SUBTOTAL (add Line 23 and Line 24)		93.89
26.	TOTAL DISBURSEMENTS THIS PERIOD (	from Line 22)	52.52
27.	CASH ON HAND AT CLOSE OF REPORTI	NG PERIOD (subtract Line 26 from Line 25)	41.37

#### SCHEDULE A (FEC Form 3)

PAGE OF 21 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the 11a 11b 11d 11c **Detailed Summary Page** 12 13b 14

ITEMIZED RECEIPTS **x** | 13a 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) Jones, Lateresa, A, , Date of Receipt Mailing Address PO BOX 3475 2022 31 City State Zip Code Transaction ID: SA13A.4679 FL 33480 PALM BEACH FEC ID number of contributing Amount of Each Receipt this Period C H0FL20112 federal political committee. 100.00 Name of Employer Occupation Candidate Self Memo Item Receipt For: 2024 Election Cycle-to-Date Loan to Campaign Primary General 5711.86 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... 100.00

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

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

FOR LINE NUMBER: (check only one)

**PAGE** 

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OF

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

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

FOR LINE NUMBER: (check only one)

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OF

NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERES	A A JONES	Transaction ID : SC/10.4452	
LOAN SOURCE Full Name (Last, First, Jones, Lateresa, A, ,	Middle Initial)	☐ Memo Item	
Mailing Address PO BOX 3475		Other (specify) ▼	
City	State	ZIP Code  Personal Funds of the Candidate	
PALM BEACH	FL	33480	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
96.23		60.00 36.23	
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)	
M01 <sup>M</sup> / D26 <sup>D</sup> / Y Ž02Ž Y	M M / D D	7	
List All Endorsers or Guarantors (if any	/) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	ZIP Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
0.4	7ID 0I-	Amount Guaranteed	
City	ZIP Code	Outstanding:	
4. Full Name (Last, First, Middle Initial)	4. Full Name (Last, First, Middle Initial)  Name of Employer		
Mailing Address		Occupation	
City	ZIP Code	Amount Guaranteed	
Ony	211 0000	Outstanding:	
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3.	Schedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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Transaction ID: SC/10.4512 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 210.16 0.00 210.16 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 <sup>D</sup>26<sup>D</sup> M<sub>02</sub>M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)------210.16 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

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

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

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Transaction ID: SC/10.4508 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 53.86 0.00 53.86 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 <sup>D</sup>16<sup>D</sup> M 03M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 53.86 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERES	SA A JONES	Transaction ID : SC/10.4509	
LOAN SOURCE Full Name (Last, First, Jones, Lateresa, A, ,	Middle Initial)	☐ Memo Item	
Mailing Address PO BOX 3475		Other (specify) ▼	
City	State	ZIP Code  Personal Funds of the Candidate	
PALM BEACH	FL	33480	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
67.75		60.00 7.75	
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)	
M03M / D18D / Y Ž02Ž Y	M M / D D	/ <sup>Y</sup> 12/31/2022	
List All Endorsers or Guarantors (if an	y) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Stat	e ZIP Code	Amount Guaranteed	
	e Zir Code	Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	e ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer	
Mailing Address		Occupation	
	715.0	Amount Guaranteed	
City	e ZIP Code	Outstanding:	
SUBTOTALS This Period This Page (option	SUBTOTALS This Period This Page (optional)		
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3	Schedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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OF

NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA	A A JONES	Transaction ID : SC/10.4510	
LOAN SOURCE Full Name (Last, First, Mones, Lateresa, A, ,	fiddle Initial)	☐ Memo Item	
Mailing Address PO BOX 3475		Other (specify) ▼	
City	State	ZIP Code  Region Personal Funds of the Candidate	
PALM BEACH	FL	33480	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
25.58		0.00 25.58	
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)	
M03 <sup>M</sup> / D25 <sup>D</sup> / Y Ž02Ž Y	M M / D D	/ Y12/31/2022	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
O'h	710.0-4-	Amount Guaranteed	
City	ZIP Code	Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	710.0.1	Amount Guaranteed	
City	ZIP Code	Outstanding:	
Full Name (Last, First, Middle Initial)  Na		Name of Employer	
Mailing Address		Occupation	
	710.0	Amount Guaranteed	
City	ZIP Code	Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional	)	25.58	
	TOTALS This Period (last page in this line only)		
Carry outstanding halance only to LINE 2 S	chedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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OF

		100	
NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERES	A A JONES	Transaction ID : SC/10.4544	
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2022	
Jones, Lateresa, A, ,		rimary Primary	
		General	
Mailing Address PO BOX 3475		Other (specify)   ———————————————————————————————————	
City	State	ZIP Code  Region Personal Funds of the Candidate	
PALM BEACH	FL	33480	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
503.28		500.00 3.28	
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)	
M05 <sup>M</sup> / D01 <sup>D</sup> / Y Ž02Ž Y	M M / D D	<sup>1</sup> / <sub>12/31/2022</sub> 5.00	
List All Endorsers or Guarantors (if any	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	-	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optiona	SUBTOTALS This Period This Page (optional)		
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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

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

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Transaction ID: SC/10.4573 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 <sup>D</sup>13<sup>D</sup> M 06M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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

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

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Transaction ID: SC/10.4653 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 <sup>D</sup>11 <sup>D</sup> <sup>M</sup>80<sup>M</sup> **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4679 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D31 D M 10M **Ž**02Ž Y12/31/2024 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) ...... 4682.46 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.