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FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Cor			Office Use Only
1. NAME OF COMMITTEE (in	TYPE OR PRIN		example: If typing, ty	/pe 12FE4M5	
FRIENDS TO	ELECT LATERESA				
ADDRESS (number ar	PO BOX 3475				
▼ Check if dit					33480
reported. (A		CITY A		STATE A	ZIP CODE A
2. FEC IDENTIFIC	CATION NUMBER ▼				STATE ▼ DISTRICT
C C005527	11	3. IS THIS REPORT	x NEW (N) C	AMENDE (A)	
	PORT (Choose One)	(b) 12-Day <b>PR</b>	<b>E</b> -Election Report fo	or the:	
(a) Quarterly R			Primary (12P)	General (12	PG) Runoff (12R)
April 15	5 Quarterly Report (Q1)		Convention (12C	) Special (12	S)
July 15	Quarterly Report (Q2)		M M / D	D / Y Y Y Y	in the
Octobe	r 15 Quarterly Report (Q3)	Election of	n		State of
<b>X</b> January	/ 31 Year-End Report (YE)	(c) 30-Day <b>PO</b>	ST-Election Report	for the:	
			General (30G)	Runoff (30F	Special (30S)
Termina	ation Report (TER)	Election of	M M / D	D / Y Y Y Y	in the State of
5. Covering Period	M M / D D /	2021	through	M M / D D / 12 / 31	Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z Z Z Z
I certify that I have e	examined this Report and to Kiger, Robert		knowledge and belie	of it is true, correct and	complete.
Type or Print Name	of Treasurer				
Signature of Treasure	Kiger, Robert, , ,		[Electronically Filed	Date 01	08 / 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
NOTE: Submission of	false, erroneous, or incomple	ete information may	subject the person	signing this Report to the	e penalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

2021

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2021

12

To:

Write or Type Committee Name

Report Covering the Period:

#### FRIENDS TO ELECT LATERESA A JONES

From:

10

01

**COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 3695.00 3695.00 (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) 3695.00 3695.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 5304.66 5304.66 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 5304.66 5304.66 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 1402.69 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 195.60 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

#### FRIENDS TO ELECT LATERESA A JONES

Report Covering the Period: From: 10 01 2021 To: 12 31 2021

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
1. (	CONTRIBUTIONS (other than loans) FROM:				
(	a) Individuals/Persons Other Than				
	Political Committees (i) Itemized (use Schedule A)	1250.00	1250.00		
		2445.00	2445.00		
	(ii) Unitemized(iii) TOTAL of contributions	2443.00	2443.00		
	from individuals	3695.00	3695.00		
(	b) Political Party Committees	0.00	0.00		
,	c) Other Political Committees	2 2 2			
	(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))	3695.00	3695.00		
		, , , , , , , , , , , , , , , , , , , ,			
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
		7	, , , , , , , , , , , , , , , , , , , ,		
	LOANS:  a) Made or Guaranteed by the				
`	Candidate	555.00	555.00		
(	b) All Other Loans	0.00	0.00		
,	c) TOTAL LOANS		7 7 7		
	(add Lines 13(a) and (b))	555.00	555.00		
ļ. (	OFFSETS TO OPERATING				
	EXPENDITURES	0.00	0.00		
(	Refunds, Rebates, etc.)	, ,	9 9		
	OTHER RECEIPTS	0.00	0.00		
	Dividends, Interest, etc.)	0.00	0.00		
1	<b>FOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15)	1050.00	1000.00		
(	Carry Total to Line 24, page 4)	4250.00	4250.00		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 05/2016)

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**COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 5304.66 5304.66 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 359.40 359.40 by the Candidate..... 0.00 0.00 (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS 359.40 359.40 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 0.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) ..... TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS ...... 22. TOTAL DISBURSEMENTS 5664.06 5664.06 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 2816.75 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 4250.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 7066.75 25. SUBTOTAL (add Line 23 and Line 24)..... 5664.06 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 1402.69 (subtract Line 26 from Line 25).....

### 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	1	7		
(check only	one)							
<b>X</b> 11a	11b		11c	110	d			
12	13a		13b	14	Γ		15	

	he name and address of any political committee	e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERE	SA A JONES						
Full Name (Last, First, Middle Initial)  Christensen, James, , ,  Mailing Address 2067 E Pheasant Circle		Date of Receipt					
City	Chata 7:- Cada	10 06 2021					
City Holladay	State Zip Code UT 84121	Transaction ID : SA11AI.4105					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period					
Name of Employer SNMC	Occupation Executive	250.00					
Receipt For: 2022   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼  250.00	Memo Item					
Full Name (Last, First, Middle Initial)  Williams, George, , ,  Mailing Address 3121 Faculty Rd	Date of Receipt						
City Bay Minette	State Zip Code AL 36507	11 09 2021 Transaction ID : SA11AI.4131					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  1000.00  Memo Item					
Name of Employer Retired	Occupation Retired						
Receipt For: 2022   ✓ Primary General  Other (specify) ▼	Primary General						
Full Name (Last, First, Middle Initial)	ı	Data of Respire					
Mailing Address		Date of Receipt					
City	State Zip Code						
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period					
Name of Employer	Occupation						
Receipt For:  Primary General  Other (specify) ▼	Election Cycle-to-Date	Memo Item					
SUBTOTAL of Receipts This Page (optional)		1250.00					
TOTAL This Period (last nage this line number	c only)	1250.00					

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

	FC	OR LINE I	NU	MBER:	PAGE	(	6 OF	•	17
Use separate schedule(s)	(cł	neck only	or	ne)					
for each category of the		11a		11b	11c		11d		
Detailed Summary Page		12	X	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 Full Name (Last, First, Middle Initial) Jones, Lateresa, , , Date of Receipt Mailing Address 761 NE 31st St 2021 18 City State Zip Code Transaction ID: SA13A.4166 FL 34479 Ocala FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 100.00 Name of Employer Occupation Candidate Self Memo Item Receipt For: 2022 Election Cycle-to-Date Primary General 100.00 Other (specify) Full Name (Last, First, Middle Initial) Jones, Lateresa, , , Date of Receipt Mailing Address 761 NE 31st St 23 2021 10 City State Zip Code Transaction ID: SA13A.4157 Ocala FL 34479 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 25.00 Name of Employer Occupation Self Candidate Memo Item Receipt For: 2022 Election Cycle-to-Date **✗** Primary General 125.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Jones, Lateresa, , , Date of Receipt Mailing Address 761 NE 31st St 23 City State Zip Code Transaction ID: SA13A.4160 FL Ocala 34479 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 65.00 Name of Employer Occupation Self Candidate Memo Item Receipt For: 2022 Election Cycle-to-Date Primary General 190.00 Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

	FOR LINE NUMBER: PAGE 7 OF	17
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	11a 11b 11c 11d _	
Detailed Summary Fage	12   <b>X</b>   13a   13b   14	15
and the second decreased the second		

				person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERES	SA A JONE	ES .	
Α.	Full Name (Last, First, Middle Initial) Jones, Lateresa, , , Mailing Address 761 NE 31st St			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ocala	State FL	Zip Code 34479	Transaction ID : SA13A.4163
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Self	Occupation Candidate		7 7
	Receipt For: 2022  X Primary General Other (specify)	Election Cyc	le-to-Date 405.00	Memo Item
В.	Full Name (Last, First, Middle Initial)  Kiger, Robert, , ,  Mailing Address 235 Flagler Lane			Date of Receipt
	City West Palm Beach	State	Zip Code 33407	11 10 2021 Transaction ID : SA13A.4135
	FEC ID number of contributing federal political committee.	C	33407	Amount of Each Receipt this Period
	Name of Employer Self	Occupation Treasurer		125.00 Memo Item
	Receipt For: 2022   ✓ Primary General  Other (specify) ▼	Election Cyc	le-to-Date ▼ 125.00	
_	Full Name (Last, First, Middle Initial)  Kiger, Robert, , ,			Date of Receipt
C.	Mailing Address 235 Flagler Lane			11 10 2021
	City West Palm Beach	State FL	Zip Code 33407	Transaction ID : SA13A.4136
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Self	Occupation Treasurer		25.00
	Receipt For: 2022  X Primary General Other (specify)	Election Cyc	le-to-Date T50.00	Memo Item
	SUBTOTAL of Receipts This Page (optional)			365.00
	**************************************			555.00

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

PAGE 8 17 FOR LINE NUMBER: Use separate schedule(s) (check only one) **X** 17 18 19a 20a 20b 20c

for each category of the 19b Detailed Summary Page 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) Date of Disbursement A. Appel, James, , , 10 2021 Mailing Address 1809 Francis Ct. 13 City State Zip Code **FEC Identification Number** MD Annapolis 21401 Purpose of Disbursement C00552711 001 Candidate Name Amount of Each Disbursement this Period Category/ FRIENDS TO ELECT LATERESA A JONES Type Disbursement For: 2022 Office Sought: House 1500.00 Senate Primary General Transaction ID: SB17.4116 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Hernando County Republican Party Date of Disbursement Mailing Address 10515 Northcliffe Blvd 01 2021 10 City State Zip Code **FEC Identification Number** FL 34608 Spring Hill Purpose of Disbursement Lincoln Day C00552711 007 Candidate Name Amount of Each Disbursement this Period Category/ FRIENDS TO ELECT LATERESA A JONES Type 300.00 Disbursement For: 2022 Office Sought: House 495 Senate Primary General Transaction ID: SB17.4150 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) c. Kiger, Robert, , , Date of Disbursement Mailing Address 235 Flagler Lane 80 2021 City State Zip Code **FEC Identification Number** West Palm Beach FL 33407 Purpose of Disbursement C00552711 001 Candidate Name Amount of Each Disbursement this Period Category/ FRIENDS TO ELECT LATERESA A JONES Type Office Sought: Disbursement For: 2022 500.00 House Senate Primary General Transaction ID: SB17.4142 President Other (specify) Memo Item State: FL District: 11 SUBTOTAL of Disbursements This Page (optional)..... 2300.00 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 LII	NE	NUMBE	PA	GE	9	0	F	17	
(check	onl	y one)							
	×	17	18			19a			191
		20a	20b			20c			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) Date of Disbursement Red Fox Strategies, LLC 2021 10 08 Mailing Address 3919 Valley Ridge Dr City State Zip Code FEC Identification Number VA Fairfax 22033 Purpose of Disbursement Fundraiser C00552711 003 Candidate Name Amount of Each Disbursement this Period Category/ FRIENDS TO ELECT LATERESA A JONES Type Disbursement For: 2022 Office Sought: House 727.00 Senate Primary General Transaction ID: SB17.4108 Other (specify) President Memo Item FL State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 727.00 TOTAL This Period (last page this line number only)..... 3027.00

Senate

District:

State:

FL

President

11

Primary

SUBTOTAL of Disbursements This Page (optional).....

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

Other (specify)

General

PAGE 10 OF 17 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS 17 **X** 19a 18 19b Detailed Summary Page 20a 20b 20c 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) Date of Disbursement A. Jones, Lateresa, , , 29 2021 Mailing Address 761 NE 31st St 10 City State Zip Code **FEC Identification Number** FΙ Ocala 34479 Purpose of Disbursement C00552711 009 Candidate Name Amount of Each Disbursement this Period Category/ FRIENDS TO ELECT LATERESA A JONES Type Disbursement For: 2022 Office Sought: House 100.00 Senate Primary General Transaction ID: SB19A.4347 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Jones, Lateresa, , , Date of Disbursement Mailing Address 761 NE 31st St 29 2021 City State Zip Code **FEC Identification Number** FL 34479 Ocala Purpose of Disbursement C00552711 009 Candidate Name Amount of Each Disbursement this Period Category/ FRIENDS TO ELECT LATERESA A JONES Type 25.00 Disbursement For: 2022 Office Sought: House Senate Primary General Transaction ID: SB19A.4349 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Jones, Lateresa, , , Mailing Address 761 NE 31st St 10 2021 City State Zip Code **FEC Identification Number** Ocala FL 34479 Purpose of Disbursement C00552711 009 Candidate Name Amount of Each Disbursement this Period Category/ FRIENDS TO ELECT LATERESA A JONES Type Disbursement For: 2022 65.00 Office Sought: House

190.00

Transaction ID: SB19A.4350

Memo Item

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE	NUMBE		PAGI	≣ 11	OF	17	
Use separate schedule(s) for each category of the Detailed Summary Page	(check or	_						
		17		18	×	19a		19b
Detailed Summary Page		20a	20b		20c		21	
y not be sold or used by any person for the purpose of soliciting contributions								
dress of any political committee to solicit contributions from such committee.								

				I	20a     20b     20c     21
	y information copied from such Reports and Stat for commercial purposes, other than using the n	•		, , ,	on for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA	A A JONE	S		
_	Full Name (Last, First, Middle Initial)  Jones, Lateresa, , ,				Date of Disbursement
Α.					M M / D D / Y Y Y Y
	Mailing Address 761 NE 31st St		_		11 04 2021
	City	State FL	Zip Code		FEC Identification Number
	Ocala Purpose of Disbursement	1 -	34479		С
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburse	ement For:		31	19.40
	Senate	Primary	General		Transaction ID : SB19A.4167
	State: District:	Other (spec	сіту) 🔻		Memo Item
	Full Name (Last, First, Middle Initial)				
В.	Kiger, Robert, , ,				Date of Disbursement
	Mailing Address 235 Flagler Lane				12 08 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code		FEC Identification Number
	West Palm Beach	FL	33407		
	Purpose of Disbursement Repay Loan			009	C C00552711
	Candidate Name FRIENDS TO ELECT LATERES	A A JONE	ES	Category/ Type	Amount of Each Disbursement this Period
		٦	2022		125.00
	Senate x	Primary Other (spec	General		Transaction ID : SB19A.4140
	State: FL District: 11	(C)	-·· <b>·/</b>		Memo Item
	Full Name (Last, First, Middle Initial)				Date of Disbursement
C.	Kiger, Robert, , ,				
	Mailing Address 235 Flagler Lane				12 08 2021
	City	State	Zip Code		FEC Identification Number
	West Palm Beach Purpose of Disbursement	FL	33407		C C00552711
	Répay Loan			009	
	Candidate Name FRIENDS TO ELECT LATERES	A A JONF	ES	Category/ Type	Amount of Each Disbursement this Period
		ement For: 2		.,,,,,	25.00
	Senate x	_	General		Transaction ID : SB19A.4141
	State: FL District: 11	Other (spec	Ully) ▼		Memo Item
	SUBTOTAL of Disbursements This Page (optional	l)			169.40
					9 9 9 9 9
•	TOTAL This Period (last page this line number or	าly)			359.40

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

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.4166 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, , , General Mailing Address 761 NE 31st St Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 34479 Ocala Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 100.00 100.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 5.00 D 18D 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)..... 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.

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

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.4157 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, , , General Mailing Address 761 NE 31st St Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 34479 Ocala Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 25.00 25.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 5.00 <sup>D</sup>23<sup>D</sup> 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)..... 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.

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

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.4160 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, , , General Mailing Address 761 NE 31st St Other (specify) City State ZIP Code X Personal Funds of the Candidate FL 34479 Ocala Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 65.00 65.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 5.00 <sup>D</sup>23<sup>D</sup> 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)..... 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.

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

FOR LINE NUMBER: (check only one)

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OF

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	ME OF COMMITTEE (In Full) RIENDS TO ELECT LATE	RESA	A JONES		Transa	ction ID : SC/10.4163
	LOAN SOURCE Full Name (Last, Jones, Lateresa, , ,	, First, Mic	ddle Initial)		☐ Memo Item	Election: 2022    Primary   General
	Mailing Address 761 NE 31st St					Other (specify)
	City		State	ZIP Co 34479		Personal Funds of the Candidate
	Ocala  Original Amount of Loan		Cumulative Pay			lance Outstanding at Close of This Period
		5.00	3		19.40	195.60
	TERMS Date Incurred		C	ate Due	Interest Ra (If none, ente	
	M11 <sup>M</sup> / D04 <sup>D</sup> / Y Ž02ť	Y	M M / D D	/ <sup>Y</sup> 12	2/31/2022 <sup>Y</sup> 5	5.00 % (apr) Yes X No
	List All Endorsers or Guarantors	(if any) t	o Loan Source			
	1. Full Name (Last, First, Middle	Initial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	<u>, , , , , , , , , , , , , , , , , , , </u>
	2. Full Name (Last, First, Middle I	nitial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	y y
	3. Full Name (Last, First, Middle I	nitial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	y y
	4. Full Name (Last, First, Middle I	nitial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7
Ş	UBTOTALS This Period This Page	(ontional)	'			10000
	OTALS This Period (last page in thi					195.60
	CLO Tillo Follow (last page in the		, ······			, , , , , , , , , , , , , , , , , , ,
C	Carry outstanding balance only to L	INE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry for	ward 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

			100
AME OF COMMITTEE (In FUFRIENDS TO ELECT	•	A JONES	Transaction ID : SC/10.4135
LOAN SOURCE Full Nam	ne (Last, First, Mic	Idle Initial)	Memo Item Election: 2022
Kiger, Robert, , ,			x Primary General
Mailing Address 235 Flagler Lane			Other (specify) ▼
City		State	ZIP Code  Personal Funds of the Candidate
West Palm Beach		FL	33407
Original Amount of Loan		Cumulative Pa	ayment To Date Balance Outstanding at Close of This Period
, ,	125.00		125.00 0.00
TERMS Date Incurre	ed	С	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D10D / Y	Ź02Ť <sup>Y</sup>	M M / D D	5.00 % (apr) Yes X No
List All Endorsers or Gua	arantors (if any) to	o 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, I	Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, I	Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, I	Middle Initial)	•	Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This	s Page (optional)		0.00
TOTALS This Period (last page	ge in this line only	y)	······································
Carry outstanding balance o	nly to LINE 3, Sch	nedule D, for this	is 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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Transaction ID: SC/10.4136 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Kiger, Robert, , , General Mailing Address 235 Flagler Lane Other (specify)  $\blacktriangledown$ State ZIP Code City Personal Funds of the Candidate FL 33407 West Palm Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25.00 25.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 M 1 1 M <sup>D</sup>10<sup>D</sup> Ž021 Y12/15/2021 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)..... 0.00 TOTALS This Period (last page in this line only) ..... 195.60 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.