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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		cample: If typing ver the lines.	ı, type	12FE4M5	
FRIENDS TO ELECT L	ATERESA	A JONES				
ADDRESS (number and street)	PO BOX 3475					
Check if different						
than previously reported. (ACC)	PALM BEACH				FL L	33480
2. FEC IDENTIFICATION NU	IMBER ▼	CITY ▲			STATE A	ZIP CODE ▲
C C00552711		3. IS THIS REPORT	x NEW (N)	OR	AMENDI (A)	STATE ▼ DISTRICT FL 10
4. TYPE OF REPORT (Cho	pose One)	(b) 12-Day PRE	E-Election Repor	t for the:		
(a) Quarterly Reports:			Primary (12P)		General (12	2G) Runoff (12R)
April 15 Quarterly R	leport (Q1)	П	Convention (1)	2C)	Special (12	28)
July 15 Quarterly Re	eport (Q2)		Convention (1)		Opoolai (12	
October 15 Quarterl	ly Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
January 31 Year-End	d Report (YE)	(c) 30-Day POS	ST-Election Repo	ort for the:		
			General (30G)		Runoff (30I	R) Special (30S)
Termination Report	(TER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period 11	M / 29 /	Y Y Y Y Y 2022	through	м м 12	/ 31 /	Y Y Y Y Y 2022
I certify that I have examined thin Type or Print Name of Treasurer	s <i>Report and to</i> Kiger, Robert,		nowledge and b	elief it is tr	rue, correct and	complete.
Kiger Signature of Treasurer	r, Robert, , ,		[Electronically F	iled][Date 01	/ D D / Y Y Y Y Y Y 2023
NOTE: Submission of false, errone	ous, or incomplet	te information may	subject the person	on signing t	this Report to the	e penalties of 52 U.S.C. §30109
Office Use Only						FEC FORM 3 (Revised 05/2016)

Report Covering the Period:

SUMMARY PAGE

of Receipts and Disbursements

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2022

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2022

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To:

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS TO ELECT LATERESA A JONES

From:

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 78.58 13758.10 (from Line 17) (b) Total Offsets to Operating 36.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 78.58 13722.10 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 17.79 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 4727.46 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

FRIENDS TO ELECT LATERESA A JONES

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than Political Committees				
	(i) Itemized (use Schedule A)	0.00	3250.00		
	(ii) Unitemized	10.00	3005.00		
	(iii) TOTAL of contributions from individuals	10.00	6255.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) The Candidate (e) TOTAL CONTRIBUTIONS	0.00	0.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	10.00	6255.00		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	45.00	5861.86		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	45.00	5861.86		
4.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	36.00		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	55.00	12152.86		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	78.58	13758.10
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed	0.00	1179.40
	by the Candidate(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	1179.40
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	78.58	14937.50
	III. CASH SI	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	41.37
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	55.00
25.	SUBTOTAL (add Line 23 and Line 24)		96.37
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	78.58
27.	CASH ON HAND AT CLOSE OF REPORTIN	NG PERIOD	17.79

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

PAGE 5 OF FOR LINE NUMBER: 20 (check only one) Use separate schedule(s) for each category of the 11a 11b 11d 11c **Detailed Summary Page**

x | 13a 12 13b 14 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 27 City State Zip Code Transaction ID: SA13A.4693 FL 33480 PALM BEACH FEC ID number of contributing Amount of Each Receipt this Period C H0FL20112 federal political committee. Name of Employer Occupation Candidate Self Memo Item Receipt For: 2024 Election Cycle-to-Date Loan to Campaign **x** Primary General 45.00 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) 45.00 SUBTOTAL of Receipts This Page (optional)..... 45.00

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

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

PAGE 6 OF FOR LINE NUMBER: (check only one)

X 13a 13b

AME OF COMMITTEE (In Full) FRIENDS TO ELECT LATE	ERESA	A JONES			Transac	tion ID : SC/1	0.4163		
LOAN SOURCE Full Name (Last Jones, Lateresa, A, , Mailing Address PO BOX 3475					Memo Item	Election: ; Primary Genera Other (:	/	,	
City PALM BEACH				de Personal Funds of the Candid					andidate
Original Amount of Loan		Cumulative Pay	/ment To Da	Date Balance Outstanding at Close of This Perio					nis Period
2'	15.00	2		19.4	0			195.	.60
TERMS Date Incurred		D	ate Due		Interest Rate (If none, enter			Secured:	:
M11M / D04D / Y 2021	Y	M M / D D	[/] 12/31	1/2022 [×]	5.0	00 % (a	apr)	Yes	x No
List All Endorsers or Guarantors	s (if any) t	o Loan Source							
1. Full Name (Last, First, Middle	Initial)		N	ame of En	nployer				
Mailing Address			0	Occupation					
City	State	ZIP Code	G	mount luaranteed outstanding		7	,		
2. Full Name (Last, First, Middle	 Initial)		N	Name of Employer					
Mailing Address			0	ccupation					
City	State	ZIP Code	G	Amount Guaranteed Outstanding:					
3. Full Name (Last, First, Middle	Initial)		N	Name of Employer					
Mailing Address			0	ccupation					
City	State	ZIP Code	G	mount juaranteed jutstanding		7	,		
4. Full Name (Last, First, Middle	Initial)		N	Name of Employer					
Mailing Address			0	ccupation					
City	State	ZIP Code	G	mount Juaranteed Jutstanding		,	7	-	
SUBTOTALS This Period This Page	(optional)					,		195.	60
COTALS This Period (last page in the	is line onl	y)			····•	-	,		
Carry outstanding balance only to L	INE 3, Sc	hedule D, for this	line. If no	Schedule	D, carry forw	ard to appro	opriate lir	ne of Su	mmary.

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

PAGE OF FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.4452 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 96.23 60.00 36.23 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D26^D M01M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 36.23 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE FOR LINE NUMBER: (check only one)

X 13a 13b

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OF

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

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

FOR LINE NUMBER: (check only one)

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OF

AME OF COMMITTEE (In Full) RIENDS TO ELECT LATERE	SA A JO	NES	·	Transac	tion ID : SC/10.4496			
LOAN SOURCE Full Name (Last, First Jones, Lateresa, A, ,	Memo Item	Election: 2022 X Primary General						
Mailing Address PO BOX 3475					Other (specify) ▼			
City State ZIP			ZIP Code					
PALM BEACH	FL		33480		Personal Funds of the Candidate			
Original Amount of Loan	Cumu	ulative Pa	ment To Date	Balaı	nce Outstanding at Close of This Period			
200.00	L.		100.00		100.00			
TERMS Date Incurred		[ate Due	Interest Rate (If none, enter				
M03 ^M / D07 ^D / Y 2022 Y	M M	/ D D	[/] 12/31/2022 ^Y	5.0	0/ / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
List All Endorsers or Guarantors (if a	• •	Source						
1. Full Name (Last, First, Middle Initia	ıl)		Name of Em	ployer				
Mailing Address			Occupation	·				
City Sta	ate ZIP	Amount Guaranteed Outstanding:			9 9			
2. Full Name (Last, First, Middle Initial))		Name of Em	Name of Employer				
Mailing Address			Occupation					
a la.			Amount Guaranteed					
City	ate ZIP	Code	Outstanding		7			
3. Full Name (Last, First, Middle Initial))		Name of Em	ployer				
Mailing Address			Occupation					
City Sta	ate ZIP	Code	Amount Guaranteed					
•			_	Outstanding: Name of Employer				
4. Full Name (Last, First, Middle Initial))		Name or En	ipioyei				
Mailing Address			Occupation					
City	ate ZIP	Code	Amount Guaranteed Outstanding		7			
UBTOTALS This Period This Page (option	·			<u> </u>	100.00			
earry outstanding balance only to LINE	O Cabada I	D. 4	the Ken October	D	and to convenient the of O			

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

LOANS

20 PAGE 11 OF SCHEDULE C (FEC Form 3) Use separate schedule(s) FOR LINE NUMBER: for each category of the **X** 13a (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4509 NAME OF COMMITTEE (In Full)

RIENDS TO ELECT									
LOAN SOURCE Full Nam		ddle Initial)		[Memo Item	Election Prin			
Jones, Lateresa, A,					neral				
Mailing Address PO BOX 3475						Oth	er (specify)) ▼	
City		State	ZIP Cod	de					
PALM BEACH		FL	33480			Personal Funds of the Candidate			
Original Amount of Loan		Cumulative Pa	ayment To	Date	Bala	nce Outs	tanding at	Close of Thi	s Perioc
, , ,	67.75	2		60.0		,		7.7	75
TERMS Date Incurre	ed	I	Date Due		Interest Rate			Secured:	
M03M / D18D / Y	ž02ž ^Y	M M / D [/ Y12	/31/2022 ^Y	5.0	00	% (apr)	Yes	× No
List All Endorsers or Gua	arantors (if any)	to Loan Source	•						
1. Full Name (Last, First,	Middle Initial)			Name of E	mployer				
Mailing Address				Occupation	1				
				Amount		-			-
City	State	ZIP Code		Guaranteed Outstanding		7			
2. Full Name (Last, First, M	2. Full Name (Last, First, Middle Initial)								
Mailing Address	Mailing Address			Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding		7	7	1 /4 1	
3. Full Name (Last, First, N	Middle Initial)	'		Name of E	mployer				
Mailing Address				Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding		,	7	1 - 4 - 1	
4. Full Name (Last, First, N	Middle Initial)			Name of E	mployer				
Mailing Address				Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding		7	7		
	'	•							
SUBTOTALS This Period This	Page (optional)				▶			7.7	75
OTALS This Period (last pag	ge in this line onl	y)							
Ones and desired to the least	-b- t- 1 INT 0 0	hadda B. Co. U.	in line . If		D		,	line of O	
Carry outstanding balance o	nly to LINE 3, SC	neaule D, for thi	is line. It i	no scnedule	ש, carry forw	vard to a	ppropriate	iine of Sun	ımary.

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

PAGE 12 FOR LINE NUMBER: **X** 13a (check only one)

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OF

13b Transaction ID: SC/10.4510 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25.58 0.00 25.58 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 ^D25^D M 03M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 25.58 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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

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

PAGE FOR LINE NUMBER:

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x 13a **LOANS** (check only one) 13b 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

FOR LINE NUMBER: (check only one)

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

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

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×	13a
	13b

20

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

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

PAGE 17 OF FOR LINE NUMBER: **x** 13a (check only one)

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13b Transaction ID: SC/10.4650 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D09D M80^M **Ž**02Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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

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13b Transaction ID: SC/10.4679 NAME OF COMMITTEE (In Full) FRIENDS TO ELECT LATERESA A JONES LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary Jones, Lateresa, A, , General Mailing Address PO BOX 3475 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33480 PALM BEACH Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 5.00 D31 D M 10M **Ž**02Ž Y12/31/2024 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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/10.4693
LOAN SOURCE Full Name (Last, First, Manne) Jones, Lateresa, A, ,	☐ Memo Item	
Mailing Address PO BOX 3475	Other (specify) ▼	
City	State	ZIP Code Personal Funds of the Candidate
PALM BEACH	FL Outstand	33480 Poles of the Canadate
Original Amount of Loan 45.00	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 45.00
TERMS Date Incurred	[Date Due Interest Rate Secured:
M12 ^M / D27 ^D / Y Ž02Ž Y	M M / D D	(If none, enter 0) 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
	T	Amount Guaranteed
City	ZIP Code	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
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	i)	45.00
TOTALS This Period (last page in this line o	·	,
Carry outstanding balance only to LINE 3.5	Schedule D. for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.