

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

GONZALES, CHRISTOPHER J

ADDRESS (number and street)

209 EAST WASHINGTON AVE



Check if different than previously reported. (ACC)

SANTA ANA

CA

92701

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00944454

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

CA

47

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
06 / 02 / 2026

in the State of

CA

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
05 / 13 / 2026

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

Type or Print Name of Treasurer James, Marshal, , ,

Signature of Treasurer

James, Marshal, , ,

Date

M M / D D / Y Y Y Y
05 / 20 / 2026

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

GONZALES, CHRISTOPHER J

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	5219.50	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5219.50	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	580.64	5350.56
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	580.64	5350.56
8. Cash on Hand at Close of Reporting Period (from Line 27)	4638.86	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9267.39	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GONZALES, CHRISTOPHER J

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2026

To:

M M / D D / Y Y Y Y
05 / 13 / 2026**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).....

4916.40

0.00

(ii) Unitemized

303.10

0.00

(iii) TOTAL of contributions
from individuals ▶

5219.50

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

5219.50

0.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

5350.56

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

5350.56

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

5219.50

5350.56

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	580.64	5350.56
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
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) ►	580.64	5350.56

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5219.50
25. SUBTOTAL (add Line 23 and Line 24).....	5219.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	580.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4638.86

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 10

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)

GONZALES, CHRISTOPHER J

Full Name (Last, First, Middle Initial)

Garcia, Donald, , ,

A.

Mailing Address 40 Salt Bush

City
Irvine

State
CA

Zip Code
92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 06 2026

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sombie, Serge, , ,

B.

Mailing Address 18139 Marsh Pine Rd

City
Dumfries

State
VA

Zip Code
22026

FEC ID number of contributing
federal political committee.

C

Name of Employer
OCFO

Occupation
Appraiser

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 10 2026

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

208.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

Tardif, Michael, , ,

C.

Mailing Address 1419 E. 19th St

City
Santa Ana

State
CA

Zip Code
92705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 07 2026

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period

208.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

1416.40

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 10

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

GONZALES, CHRISTOPHER J

Full Name (Last, First, Middle Initial)

Toy, Alice, , ,

A.

Mailing Address 6009 Clementine Ln

City

Cypress

State

CA

Zip Code

90630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 25 2026

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period

3500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

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

3500.00

4916.40

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 10

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

GONZALES, CHRISTOPHER J

Full Name (Last, First, Middle Initial)

A. Hodges, Lance, , ,

Mailing Address 8 Whitewater Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2026

City
Corona Del MarState
CAZip Code
92526

FEC Identification Number

C C00944454

Purpose of Disbursement
Campiagn event - Catering

007

Amount of Each Disbursement this Period

575.00

Transaction ID : SB17.4133

☐ Memo ItemCandidate Name
GONZALES, CHRISTOPHER JCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 47

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

575.00

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

575.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 8 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4102

GONZALES, CHRISTOPHER J

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

GONZALES, CHRISTOPHER, J, ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

209 EAST WASHINGTON AVE

City

SANTA ANA

State

CA

ZIP Code

92701

☒ Personal Funds of the Candidate

Original Amount of Loan

5350.56

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5350.56

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 21 / 2026

M M / D D / Y Y Y Y

12/31/2026

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5350.56

TOTALS This Period (last page in this line only).....▶

5350.56

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 10

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

GONZALES, CHRISTOPHER J

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GONZALES, CHRISTOPHER J

Nature of Debt (Purpose):

Reimbursement for campaign email hosting -
GoDaddy.com

Mailing Address 209 EAST WASHINGTON AVE

City

SANTA ANA

State

CA

Zip Code

92701

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4142

Amount Incurred This Period

168.84

Payment This Period

0.00

Outstanding Balance at Close of This Period

168.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GONZALES, CHRISTOPHER J

Nature of Debt (Purpose):

Reimbursement for website design software -
ElegantThemes.com

Mailing Address 209 EAST WASHINGTON AVE

City

SANTA ANA

State

CA

Zip Code

92701

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4145

Amount Incurred This Period

89.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GONZALES, CHRISTOPHER J

Nature of Debt (Purpose):

Reimbursement for campaign logo and design
services - Kreative Minds

Mailing Address 209 EAST WASHINGTON AVE

City

SANTA ANA

State

CA

Zip Code

92701

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4147

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1257.84

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 10

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

GONZALES, CHRISTOPHER J

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GONZALES, CHRISTOPHER J

Nature of Debt (Purpose):

Reimbursement for 1 mo campaign website
care - GoDaddy.com

Mailing Address 209 EAST WASHINGTON AVE

City

SANTA ANA

State

CA

Zip Code

92701

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4144

Amount Incurred This Period

124.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

124.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GONZALES, CHRISTOPHER J

Nature of Debt (Purpose):

Reimbursement for campaign sign printing -
Bridgeview Press

Mailing Address 209 EAST WASHINGTON AVE

City

SANTA ANA

State

CA

Zip Code

92701

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4148

Amount Incurred This Period

2534.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2534.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

2658.99

2) **TOTALS** This Period (last page this line number only)

3916.83

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

5350.56

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

9267.39