De cluient Oceanitée				COVER PAGE
Recipient Committee Campaign Statement Cover Page			Date Stamp	california 460 form
	Statement covers period from 09/25/2022	Date of election if applicable: (Month, Day, Year) November 8, 2022		Page of For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through			
1. Type of Recipient Committee: All Committees - Con	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored <i>liso Complete Part 6)</i> Primarily Formed Candidate/ Officeholder Committee <i>liso Complete Part 7)</i>	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be	rmination)	rterly Statement cial Odd-Year Report
3. Committee information). NUMBER 453232	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
Josie Gonzalez for Coachella City Council 2022		Angelique Morin		
		MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP C	ODE AREA CODE/PHONE
		Coachella	CA 922	
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR		
Coachella CA 92236				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO)	C	MAILING ADDRESS		
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE ZIP C	ODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	SS	
4. Verification		a ta banda ka manan 1971 di Kabupatén Kabupatén Kabupatén Kabupatén Kabupatén Kabupatén Kabupatén Kabupatén Kab	ilinaistaine of latin and Constitution in the factor of	
I have used all reasonable diligence in preparing and reviewing	-	nowledge the information contained	herein and in the attached sc	hedules is true and complete. I
certify under penalty of perjury under the laws of the State of	California that the foregoing is true			

Executed on 10/26/2022		Ву			
	Date	Dy		Assistant Treasurer	
Executed on	Date	BySignature of	of Co	asure Proponent or Responsible Officer of Sponsor	•
Executed on	Date	Ву	Signature of Controlling Officeholder, C	andidate, State Measure Proponent	
Executed on	Date	Ву	Signature of Controlling Officeholder, C	andidate, State Measure Proponent	
				FPPC Advice: advice@	FPPC Form 460 (Jan/2016)) Dfppc.ca.gov (866/275-3772) www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page — Part 2



5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS Coachella City Council	STRICT NUMBER I	APPLICA	ABLE)
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY Coachella	STATE CA	ZIP 92236

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME		1.	D. NUMBE	R
NAME OF TREASURER		0	CONTROL	LED COMMITTEE?
			YES	NO NO
COMMITTEE ADDRESS	STREET ADDRESS (N	O P.O. BO	X)	
CITY	STATE	ZIP COD	DE	AREA CODE/PHONE
COMMITTEE NAME		1	D. NUMBE	R
NAME OF TREASURER		(CONTROL	LED COMMITTEE?
			YES	D NO
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BO.	X)	
CITY	STATE	ZIP COD	DE	AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	SUPPORT
----------------------	--------------	---------

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

from 09			from2	ment covers period 25/2022 10/22/2022	CALIFORNIA FORM 460 Page 3_ of 33		
NAME OF FILER Josie Gonzalez for Coachella City Council 2022							1.D. NUMBER 1453232
Contributions Received	(1	Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)		Column CALENDAR TOTAL TO D	YEAR		mary for Candidates e State Primary and
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	22,200.00 0 22,200.00 1,063.00 23,263.00	\$ \$	39,500.00 0 39,500.00 1,063.00 40,563.00		1/1 tf 20. Contributions Received \$ 21. Expenditures	arough 6/30 7/1 to Date \$ \$
Expenditures Made 6. Payments Made Schedule E, Line 4 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 10. Nonmonetary Adjustment Schedule C, Line 3 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ \$	18,375.23 0 18,375.23 0 1,063.00 19,438.23	\$	21,771.18 0 21,771.18 0 1,063.00 22834.18			Summary for State ve Expenditures Made* Voluntary Expenditure Limit) Total to Date \$\$
Current Cash Statement 12. Beginning Cash Balance 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Cash Equivalents and Outstanding Debts	\$	13,903.85 22,200.00 0 18,375.23 17,728.62 0	a a o a b s p th i o fr	o calculate Colu dd amounts in C to the correspo mounts from Co f your last repor mounts in Colur e negative figure nould be subtra- revious period a his is the first rep ed for this caler nly carry over th om Lines 2, 7, a	Column nding Jumn B t. Some nn A may es that cted from mounts. If port being ndar year, ie amounts	*Amounts in this section reported in Column B.	\$may be different from amounts
18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ \$	0	a	ny).		FPPC Advice: adv	FPPC Form 460 (Jan/2016)) vice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule	Α		ts may be rounded				SCHEDULE A		
Monetary	Contributions Received	to	whole dollars.	Statement cov	ers period	CALIFORNIA 460			
				from		FC	DRM TOO		
SEE INSTRUCTIO	DNS ON REVERSE			through	2	Page	4_of 23		
NAME OF FILER						I.D. NU	IMBER		
Josie Gonza	alez For Coachella City Council 2022					14532	32		
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE T	D DATE	PER ELECTION		
RECEIVED	CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-IEMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALENDAR Y (JAN. 1 - DEC		TO DATE (IF REQUIRED)		
09/29/2022	Stronghold Power Systems 3421 Gato Court Suite C Riverside, CA 92507	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		4900.00					
10/02/2022	California Real Estate Political Action Committee (CREPAC) #890106 C/O Reed & Davidson LLP 515 S. Figueroa St, Ste 1110 Los Angeles, CA 90071	☐ IND ☐ COM ☐ OTH ☐ PTY ✔ SCC		2000.00					
10/12/2022	Cadiz Inc. 550 South Hope Street Suite 2850 Los Angeles, CA 90071	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		4900.00					
10/11/2022	Oracio Gonzalez Sacramento, CA 95818	<pre>✓ IND □ COM □ OTH □ PTY □ SCC</pre>	Olin Stratagies Political Consultant	1000.00					
10/16/2022	VO Medical Center 1590 S Imperial Ave El Centro, CA 92243	☐ IND ☐ COM ✔ OTH ☐ PTY ☐ SCC		1000.00					
			SUBTOTAL	\$ 13,800.00					
Schedule /	A Summary				and the second se	ntributor C			
	ceived this period – itemized monetary contributions		\$ <u>2</u> 2	2,200.00			ual ient Committee than PTY or SCC)		
2. Amount re	ceived this period – uniternized monetary contributio	ns of less tha	n \$100\$. <u>0</u>		PTY	- Politica	(e.g., business entity) al Party Contributor Committee		
3. Total mone (Add Lines	etary contributions received this period. 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1	l.) TOTAL \$. <u>2</u> 2	2,200.00		FPP	C Form 460 (Jan/2016))		
				F	PPC Advice: adv	ice@fppo	c.ca.gov (866/275-3772) www.fppc.ca.gov		

	A (Continuation Sheet)	Amounts may					SCHEDULE A (CONT.)
Monetary	Contributions Received	to whole o	ioliars.	Statement coverse from 09/25/2022	ers period		ORNIA 460
				through	2	Page _	5 of 23
NAME OF FILER Josie Gonza	alez for Coachella City Council 2022					1.D. NU 14532	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR (JAN. 1 - DEC	(EAR	PER ELECTION TO DATE (IF REQUIRED)
10/16/2022	Democratic Women of the Desert PO Box 6207 La Quinta, CA 92248-6207	□IND □COM □OTH □PTY ▼SCC	×.	1000.00			
10/17/2022	Desert Concepts Construction, Inc. 79-775 Ave 40 Indio, CA 92203	□IND □COM ☑OTH □PTY □SCC		4900.00			
10/19/2022	Building a Stronger CA Sponsored by Southwest Regional Council of Carpenters ID# 870169 533 Southwest Fremont Avenue 10th Floor Los Angeles, CA 90071	IND COM OTH PTY SCC		2000.00			
10/07/2022	Joy Silver Palm Springs, CA, 92264	<pre>✓ IND □ COM □ OTH □ PTY □ SCC</pre>	Affordable Housing Developer	500.00			
		IND COM OTH PTY SCC					
			SUBTOTAL	\$ 8400.00			

*Contributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH -- Other (e.g., business entity) PTY -- Political Party SCC -- Small Contributor Committee

	۵m	ounts may be rou	unded				SCHED	ULE B - PART 1
Schedule B – Part 1		to whole dollars			Statement cov	ers period	CALIFORN	^A 460
Loans Received					from _09/25/2022		FORM	400
							10	20
SEE INSTRUCTIONS ON REVERSE					through	22	Page	of 35
NAME OF FILER							I.D. NUMBER	
Josie Gonzalez from Coachella City Cour	ncil 2022						1453232	
	IF AN INDIVIDUAL, ENTER	(a) OUTSTANDING	(b) AMOUNT	(c) AMOUNT PA	(d) AID OUTSTANDING	(e) INTEREST	(f) ORIGINAL	(g) CUMULATIVE
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER	OUTSTANDING BALANCE BEGINNING THIS	RECEIVED THIS	AMOUNT PA OR FORGIV THIS PERIC	EN BALANCE AT	PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
	NAME OF BUSINESS)	PERIOD	1 EKIOD		PERIOD			CALENDAR YEAR
				\$	\$	%	\$	\$
					N			PER ELECTION**
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID				CALENDAR YEAR
				\$	\$	%	\$	\$
					N	RATE		PER ELECTION**
				\$		\$	_	s
		\$	\$		DATE DUE		DATE INCURRED	
								CALENDAR YEAR
				3	\$	%	\$	\$
					N	RAIE		PER ELECTION**
		\$	\$	\$		\$	_	\$
					DATE DUE		DATE INCURRED	
	5	SUBTOTALS	5 0	\$ 0	\$ 0	\$ 0		
Schedule B Summary						(Enter (e) on Sch	edule E, Line 3)	
-				¢ (0			
1. Loans received this period (Total Column (b) plus unitemized loar						-		
2. Loans paid or forgiven this period				\$	0		†Contributor Codes	6
(Total Column (c) plus loans under \$10							IND – Individual COM – Recipient C	ommittee
(Include loans paid by a third party tha		edule A.)			0			PTY or SCC)
3. Net change this period. (Subtract Lin				NET \$ _			OTH – Other (e.g.,	
Enter the net here and on the Summa	ry Page, Column A, Line 2.						PTY – Political Par SCC – Small Contr	
					(May be a negative number)	C		
*Amounts forgiven or paid by another party also m	nust be reported on Schedule A	r						
** If required.								n 460 (Jan/2016))
						FPPC Advice: a	advice@fppc.ca.go	
								www.fppc.ca.gov

Schedule B – Part 2 Loan Guarantors		Amounts may be rounded to whole dollars.	CALIFORNIA FORM			
SEE INSTRUCTIONS ON REVERSE				through	Page	_ of <u>33</u> _
NAME OF FILER Josie Gonzalez for Coachella City Council 202	22				I.D. NUMBER 1453232	2
FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE [*]	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	□IND □ COM		LENDER		CALENDAR YEAR	
	□OTH □PTY □SCC		DATE		PER ELECTION (IF REQUIRED) \$	
			LENDER		CALENDAR YEAR	
			DATE		PER ELECTION (IF REQUIRED)	
			LENDER		CALENDAR YEAR	
	□COM □OTH □PTY □SCC		DATE		PER ELECTION (IF REQUIRED) \$	
			LENDER		CALENDAR YEAR	
			DATE		PER ELECTION (IF REQUIRED)	
				BTOTAL \$ 0	Summary Page, Line 17 only.	

Schedu	ile C		Amounts may be rounded						SCHEDULE
Nonmo	netary Contributions Received		to whole dollars.		fror	Statement covers p m09/25/2022	period	CALIFO FOI	RM 460
	CTIONS ON REVERSE				thro	ough		Page _	5_ of 33
IAME OF FIL Josie Gon	ER nzalez for Coachella City Council 2022							I.D. NUME 145323	
DATE RECEIVED	FULL NAME: STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SER		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
10/17/2 2	Kimberly Barraza for Desert Health Care District Zone 6 2022 ID# 1452967 Coachella, CA 92236	IND COM OTH PTY SCC		lluminated Vi Bulletin Dillion Rd: W Hwy 86		\$680.00	\$680.00	D	
10/14/2 2	Eduardo Garcia for Assembly 2022 ID#1435183 Sacramento, CA 95815	IND COM OTH PTY SCC		One Piece di mail program "Coachella D Voter Guide"	i i	\$383.00	\$383.0	0	
		IND COM OTH PTY SCC							
		IND COM OTH PTY SCC							
Attach ad	ditional information on appropriately labeled	continuation	sheets.	SUBT	OTAL	\$ 1063.00			
1. Amount (Include	le C Summary t received this period – itemized nonmonetar e all Schedule C subtotals.) t received this period – unitemized nonmone				\$ _ \$ _	1063.00 0		(other th I – Other (e – Political	nt Committee an PTY or SCC) .g., business entity)
3. Total no (Add Lir	onmonetary contributions received this period nes 1 and 2. Enter here and on the Summar	d. y Page, Colu	mn A, Lines 4 and 10.)	тот	AL \$_	1063.00	_		
								FPPC F	orm 460 (Jan/2016)

(

FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Supportin Candidate	D of Expenditures ng/Opposing Other es, Measures and Committees ONS ON REVERSE	Amounts may be r to whole dolla		Statement covers from		CALIFO FOR Page	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIV CALENDA (JAN. 1 - I	RYEAR	PER ELECTION TO DATE (IF REQUIRED)
10/18/2022	Kimberly Barraza for Desert Health Care District Zone 6 2022 ID#1452967 Coachella, CA 92236	Monetary Contribution		1000.00	1000.00		
	Support Oppose	 Monetary Contribution Normonetary Contribution Independent Expenditure Monetary Contribution Normonetary Contribution 					
	Support Oppose	Independent Expenditure	SUBTOTAL	\$ 1000.00			

Schedule D Summary

1.	. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	1000.00
2.	. Unitemized contributions and independent expenditures made this period of under \$100	0
3.	. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	1000.00

Schedule E Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through	Page 10 of 22
NAME OF FILER			I.D. NUMBER
Josie Gonzalez for Coachella City Council 2022			1453232

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Planit Reprographics 39350 Berkey Drive Palm Desert CA 92211	Pho	oto copies	69.02
Home Depot 42100 Jackson St Indio, CA 92201	CMP Lur	nber, Screws, etc. for signs	376.58
Costco Wholesale 79797 Hwy 111 La Quinta, CA 92253	СМР		131.12

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 576.72

Schedule E Summary

_

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	18,375.03
2. Unitemized payments made this period of under \$100\$	00.20
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	18,375.23

Schedule E Amounts may be to whole de to whole d				Statement covers period 09/25/2022 from	CALIFC FOR	
SEE INSTRUCTIONS ON REVERSE				through <u>10/22/2022</u>	Page 1	of <u>22</u>
Josie Gonzalez for Coachella City Council 2022					1.D. NUM 145323	
CODES: If one of the following codes accurately describe	es the payment, yo	ou may ent	er the code. Othe	rwise, describe the payment.		
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonrnonetary)* CVC civic donations FIL cancidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and su POS postage, delin PRO professional s PRT print ads	appearances es ating irvey research very and mess	n eenger services	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, an TRS staff/spouse travel, lodging, f TSF transfer between committees VOT voter registration WEB information technology costs	luction costs d meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	R DES	CRIPTION OF PAYMENT		AMOUNT PAID
Harbor Freight 82123 US Hwy 111 Indio, CA 92201			Saw, Blades, me up signs	easuring tape and washers for	putting	82.60
Home Depot 42100 Jackson St Indio, CA 92201			Drill kit for makin	ng signs		172.91
Ace Hardware 49211Grapefruit Blvd Suite 2 Coachella, CA 92236			Screws and Wa	shers		10.26
www.GoDaddy.com 2155 E GoDaddy Way			Website			16.99
Mariscos El Capitan 52565 Harrison St Coachella, CA 92236		TRS				136.96
* Payments that are contributions or independent expenditures must also b	be summarized on Sche	dule D.	L	SI	JBTOTAL	\$ 419.72

Schedule E (Continuation Sheet) Payments Made Amounts may to whole d SEE INSTRUCTIONS ON REVERSE NAME OF FILER Josie Gonzalez for Coachella City Council 2022				Statement covers period 09/25/2022 from	SCHEDULE E (C CALIFORNIA FORM Page 2 of 2 I.D. NUMBER 1453232	cont.) 60 ろ
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member comm MTG meetings and OFC office expens PET petition circult PHO phone banks POL polling and su POS postage, deliv PRO professional s PRT print ads	munications appearances es ating urvey researc very and mes	n senger services	rwise, describe the payment. RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, an TRS staff/spouse travel, lodging, TSF transfer between committees VOT voter registration WEB information technology costs	uction costs d meals and meals s of the same candidate/spo	onsor
IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DES		AMOUNT P.	AID
www.Stripe.com			Donation transa	ction fee	14.80	
99 Cent Store 50249 Harrison St Coachella CA 92236		CMP			14.35	
USPS 1412 6th Street Coachella CA 92236			EDDM Flyers		927.71	
USPS 1412 6th Street Coachella CA 92236			EDDM Flyers		909.18	
Postal Annex 83103 Ave 48 Ste 1B Coachella, CA 92236			Notary service		30.25	
* Payments that are contributions or independent expenditures must also	be summarized on Sche	dule D.		SI	JBTOTAL \$ 1896.29	

Schedule E (Continuation Sheet) Payments Made	Amounts may be to whole do			Statement covers period 09/25/2022 from	CALIFC FOR	
SEE INSTRUCTIONS ON REVERSE				through <u>10/22/2022</u>	Page	<u>か of みか</u>
NAME OF FILER Josie Gonzalez for Coachella City Council 2022					1.D. NUM 145323	
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL cancidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MBR metings and OFC office expens PET petition circul: PHO phone banks POL polling and su POS postage, deliv PRO professional s PRT print ads	munications appearances es ating urvey research very and mess	n senger services	rwise, describe the payment. RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, an TRS staff/spouse travel, lodging, TSF transfer between committees VOT voter registration WEB information technology costs	luction costs d meals and meals s of the same	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Next Day Flyers 8000 Haskell Ave Van Nuys, CA 91406		PRT	Printed Mailers			5529.50
Walmart 79295 Hwy 111 La Quinta, CA 92253			Cleaning suppli	es for office and snacks for vo	lunteers	34.32
Farmers Boys 81959 Hwy 111 Indio, CA 92201		TRS	Food for Volunt	eers		42.67
Costco 79797 Hwy 111 La Quinta CA 92253			Supplies and for	od for volunteers		182.08
Smart and Final 49978 Grapefruit Blvd Coachella CA 92236		FND				123.24
* Payments that are contributions or independent expenditures must also	be summarized on Sche	dule D.		SI	JBTOTAL	\$ 5911.81

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE				Statement covers period 09/25/2022 from through <u>10/22/2022</u>		$\frac{1}{100} = \frac{1}{100} $
NAME OF FILER Josie Gonzalez for Coachella City Council 2022					1.D. NUMBER 1453232	2
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CVC civic donations OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FND fundraising events POL phone banks TRC candidate travel, lodging, and meals ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the sa LIT campaign literature and mailings PRT print ads WEB information technology costs (internet,						
Applebees 82894 Hwy 111 Indio, CA 92201		CODE C	DR DES	CRIPTION OF PAYMENT	ç	amount paid 91.33
Home Depot 42100 Jackson Street Indio, CA 92201			Equipment Ren	tal for putting up signs		74.25
Erick Lemus Indio, CA 92201			Professional Ph	lotos		150.00
Ace Hardware 49211 Grapefruit Blvd Coachella, CA 92236			Screws to fix sig	gns	2	29.35
Tower Market 83498 Ave 50 Coachella, CA 92236			Fuel			83.80
* Payments that are contributions or independent expenditures must also be	summarized on Sche	dule D.		SI	JBTOTAL \$ 4	428.73

Schedule E Amounts mail to whole (Continuation Sheet) To whole Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Josie Gonzalez for Coachella City Council 2022			Statement covers period 09/25/2022 from	CALIFORNIA 460 FORM 460 Page 5 of 33	
CODES: If one of the following codes accurately describes the payment CMP campaign paraphernalia/misc. MBR member of CNS campaign consultants MTG meetings CTB contribution (explain nonmonetary)* OFC office exp CVC civic donations PET petition ci FIL cancidate filing/ballot fees PHO phone bat FND fundraising events POL polling arr IND independent expenditure supporting/opposing others (explain)* POS postage, LEG legal defense PRO professic LIT campaign literature and mailings PRT print ads	n costs duction costs nd meals and meals se of the same candidate/sp is (internet, e-mail)	oonsor			
Big Lots 42225 Jackson St Indio, CA 92201	FND		CRIPTION OF PAYMENT	AMOUNT F	PAID
KO Catering Services 85236 Araby Ave Coachella, CA 92236	FND			400.00	
Studio 5 84061 Airport Blvd Thermal, CA 92274		Mailer and Wall Campaign T-Sh	king Flyer Design, iirts	754.06	
5th Town Music 53400 Avenida Rubio La Quinta, CA 92253	FND	Music		400.00	
Electroneon Lago Xochimilco Esq Con Lago Erie #831 Col Xochimilco, Mexicali BC 21380		Signs		3097.60	
* Payments that are contributions or independent expenditures must also be summarized on S	chedule D.		S	UBTOTAL \$ 4892.13	

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			Statement covers period 09/25/2022 from	CALIFO FOR	M 400
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Josie Gonzalez for Coachella City Council 2022				through <u>10/22/2022</u>	Page I.D. NUME 1453232	BER
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member comm MTG meetings and OFC office expense PET petition circula PHO phone banks POL polling and su POS postage, delix PRO professional s PRT print ads	munications appearances es ating urvey research very and mess	n senger services	rwise, describe the payment. RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and proc TRC candidate travel, lodging, an TRS staff/spouse travel, lodging, TSF transfer between committee VOT voter registration WEB information technology costs	duction costs id meals and meals s of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Hobby Lobby 78850 Hwy 11 La Quinta, CA 92253		СМР				55.40
Canva.com 2140 S Dupont Highke, CA		WEB	Subscription for	graphic designs		12.99
www.CampaignVerify.org 8605 Westwood Center Dr			Campaign verifi	ication for text messaging		95.00
Fast Trip 51893 Harrison St Coachella, CA 92236			Fuel			90.46
Kassandra Ortiz Coachella, CA 92236			Professional ph	otos		250.00
* Payments that are contributions or independent expenditures must also	be summarized on Sche	dule D.	1	S	UBTOTAL	\$ 503.85

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			Statement covers period 09/25/2022 from	SC CALIFOI FORI	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Josie Gonzalez for Coachella City Council 2022				through <u>10/22/2022</u>	Page	
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL cancidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. ernalia/misc. MBR member communications RAD radio airtime and production costs ants MTG meetings and appearances RFD returned contributions sin nonmonetary)* OFC office expenses SAL campaign workers' salaries llot fees PET petition circulating TEL t.v. or cable airtime and production costs anture supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the sam PRO professional services (legal, accounting) VOT voter registration				costs luction costs d meals and meals s of the same	candidate/sponsor
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Kimberly Barraza for Desert Health Care District Zone 6 20 Coachella, CA 92236	22	СТВ	Donation			1000.00
City of Coachella 53990 Enterprise Way Coachella, CA 92236			Candidate state	ement and filing fee		625.00
Secretary of State 1500 11th St Rm 495 Sacramento, CA 95814			Committee ID F	ee		50.00
USPS 1412 5th St Coachella, CA 92236			Postal fees			13.65
Fastrip 51893 Harrison St Coachella, CA 92236			Water for Volun	teers		7.54
* Payments that are contributions or independent expenditures must also	be summarized on Sche	dule D.	<u></u>	SI	JBTOTAL \$	1696.19
					EDDC E	orm 460 (lan/2016))

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			Statement covers period 09/25/2022 from	CALIFO FOR	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Josie Gonzalez for Coachella City Council 2022				through <u>10/22/2022</u>	Page I.D. NUME 145323	
CODES:If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.MPcampaign paraphernalia/misc.MBRmember communicationsRADradio airtime and production costsNScampaign consultantsMTGmeetings and appearancesRFDreturned contributionsCODES:contribution (explain nonmonetary)*OFCoffice expensesSALcampaign workers' salariesVCcivic donationsPETpetition circulatingTELt.v. or cable airtime and production costsILcanclidate filing/ballot feesPHOphone banksTRCcandidate travel, lodging, and mealsNDfundraising eventspolling and survey researchTRSstaff/spouse travel, lodging, and mealsILcampaign literature and mailingsPRTprint adsVOTvoter registrationVDprofessional services (legal, accounting)VOTvoter registrationVDprint adsPRTprint adsWEBinformation technology costs (internet, dot				duction costs nd meals and meals and meals es of the same	e candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Dominos Pizza 51616 Cesar Chavez St. Coachella, CA 92236		TRS				43.21
Jesus Prieto Coachella, CA 92236			Campaign Vide	0		200.00
Dollar Tree 49976 Harrison Street Coachella, CA 92236		CMP				10.88
Facebook.com			Campaign Adve	ertising		320.00
Fastrip 51893 Harrison St Coachella, CA 92236			Fuel			130.00
* Payments that are contributions or independent expenditures must also t	be summarized on Sche	dule D.	L	S	UBTOTAL	\$ 704.09

	ounts may be to whole dol			Statement covers period 09/25/2022 from	CALIFORNIA FORM Page of I.D. NUMBER 1453232	60 33
LEG legal defense PRO professional LIT campaign literature and mailings PRT print ads			munications RAD radio airtime and production cos d appearances RFD returned contributions les SAL campaign workers' salaries lating TEL t.v. or cable airtime and productin TRC candidate travel, lodging, and m			ponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Ruben Gonzalez		CODE C	PR DES	SCRIPTION OF PAYMENT	AMOUNT 300.00	PAID
Coachella, CA 92236						
Carmen Delara Indio, CA 92201		РНО			1045.50	
* Payments that are contributions or independent expenditures must also be summar	ized on Sche	dule D.	<u></u>	S	UBTOTAL \$ 1345.50	

					SCHEDULE F
Amounts may be rounded to whole dollars.			Statement cove from	ers period C	FORM 460
SEE INSTRUCTIONS ON REVERSE			through	22	Page 20 of 23
NAME OF FILER Josie Gonzalez for Coachella City Council 2022					I.D. NUMBER 1 453232
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	s the payment, you may MBR member communicatio MTG meetings and appearar OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and r PRO professional services (I PRT print ads	ns nces earch nessenger services	RAD radio airtime ar RFD returned contril SAL campaign work TEL t.v. or cable air TRC candidate trave TRS staff/spouse trave	nd production costs butions ters' salaries time and productio el, lodging, and me avel, lodging, and r en committees of th on	n costs ials neals he same candidate/sponsor
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(C) AMOUNT PAI THIS PERIOI (ALSO REPORT OI	D BALANCE AT CLOSE
* Payments that are contributions or independent expenditures must also be					
summarized on Schedule D.	SUBTOTALS	\$U	\$ 0	\$ 0	\$ 0

Schedule F Summary

1.	Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)IN	ICURRED TOTALS \$
2.	Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	
3.	Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	
		FPPC Form 460 (Jan/2016))
1		FPPC Advice: advice@fppc.ca.gov (866/275-3772)
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Schedule G

Payments Made by an Agent or Independe Contractor (on Behalf of This Committee)		from 09/25/2022	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through	Page DL of D
NAME OF FILER			I.D. NUMBER
Josie Gonzalez for Coachella City Council 2022			1453232
NAME OF AGENT OR INDEPENDENT CONTRACTOR			
CODES: If one of the following codes accurately descr	ibes the payment, you may enter the code. Oth	erwise, describe the payment.	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production of	costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions	
CTB contribution (explain nonmonetary)* CVC civic donations	OFC office expenses	SAL campaign workers' salaries TEL t.v. or cable airtime and produ	ution costs
FIL candidate filing/ballot fees	PET petition circulating PHO phone banks	TRC candidate travel, lodging, and	
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and	

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

- IND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LIT campaign literature and mailings

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR AMOUNT PAID CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.



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transfer between committees of the same candidate/sponsor

WEB information technology costs (internet, e-mail)

TSF

VOT voter registration

Schedule H Loans Made to Others*			ay be rounded le dollars.		Statement cove from09/25/2022 through10/22/202		CALIFORN FORM Page	IA 460
NAME OF FILER Josie Gonzalez for Coachella City Council	2022						1.D. NUMBER	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT FORGIVENES THIS PERIO	SS CLOSE OF THIS	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(9) CUMULATIVE LOANS TO DATE
		\$	\$	PAID S FORGIVEN	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
		\$	\$	PAID S FORGIVEN S		% RATE \$	\$	CALENDAR YEAR \$ PER ELECTION** \$
*Loans that are contributions to another candidate or also be summarized on Schedule D. Loans forgiven reported on Schedule E.	must also he	SUBTOTALS	\$0	\$ 0	\$ 0	\$ 0	DATE INCURRED	
Schedule H Summary 1. Loans made this period (Total Column (b) plus unitemized loans 2. Payments received on loans	of less than \$100.)				0	(Enter (e) on Schedule I, Line 3)		**If Required
(Total Column (c) plus uniternized payme3. Net change this period. (Subtract Line 2 (Enter the net here and on the Summary)	from Line 1.)				NET \$			

(May be a negative number)

Schedule I	Amounts may be rounded		SCHEDULE I
Miscellaneous Increases to Cash	to whole dollars.	Statement covers period from 09/25/2022	california 460
		through	Page D of D
SEE INSTRUCTIONS ON REVERSE			I.D. NUMBER
Josie Gonzalez for Coachella City Council 2022			1453232
DATE FULL NAME AND ADDRESS OF SOURCE RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	D	ESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
		an a	
Attach additional information on appropriately labeled continuation shee	ets.	SUBTOTA	L\$ 0
Schedule I Summary	n an an stad an a far an	0	
1. Itemized increases to cash this period.		\$_0	_
2. Unitemized increases to cash of under \$100 this period		\$_0	_
3. Total of all interest received this period on loans made to others.	(Schedule H, Column (e).)	\$_0	_
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2 Summary Page, Line 14.)	2, and 3. Enter here and on the	0	
			FPPC Form 460 (Jan/2016)) vice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov