

# Recipient Committee Campaign Statement Cover Page

Date Stamp	CALIFORNIA FORM <span style="font-size: 2em;">460</span>
Page <u>1</u> of <u>23</u>	
For Official Use Only	

<b>Statement covers period</b> from <u>09/25/2022</u>  through <u>10/22/2022</u>	<b>Date of election if applicable:</b> (Month, Day, Year)  <u>November 8, 2022</u>
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SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.**

<input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee <input type="checkbox"/> State Candidate Election Committee <input type="checkbox"/> Recall <small>(Also Complete Part 5)</small>	<input type="checkbox"/> Primarily Formed Ballot Measure Committee <input type="checkbox"/> Controlled <input type="checkbox"/> Sponsored <small>(Also Complete Part 6)</small>
<input type="checkbox"/> General Purpose Committee <input type="checkbox"/> Sponsored <input type="checkbox"/> Small Contributor Committee <input type="checkbox"/> Political Party/Central Committee	<input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee <small>(Also Complete Part 7)</small>

**2. Type of Statement:**

<input checked="" type="checkbox"/> Preelection Statement <input type="checkbox"/> Semi-annual Statement <input type="checkbox"/> Termination Statement <small>(Also file a Form 410 Termination)</small> <input type="checkbox"/> Amendment (Explain below)	<input type="checkbox"/> Quarterly Statement <input type="checkbox"/> Special Odd-Year Report
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**3. Committee Information**

I.D. NUMBER: 1453232

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Josie Gonzalez for Coachella City Council 2022

STREET ADDRESS (NO P.O. BOX)  
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Coachella</u>	<u>CA</u>	<u>92236</u>	<u>[REDACTED]</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>[REDACTED]</u>			

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Angelique Morin

MAILING ADDRESS  
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Coachella</u>	<u>CA</u>	<u>92236</u>	<u>[REDACTED]</u>

NAME OF ASSISTANT TREASURER, IF ANY  
 \_\_\_\_\_

MAILING ADDRESS  
 \_\_\_\_\_

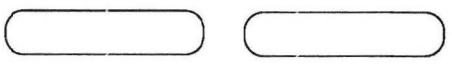
CITY	STATE	ZIP CODE	AREA CODE/PHONE
_____	_____	_____	_____

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules 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 <u>10/26/2022</u>	Date	By <u>[REDACTED]</u>	Assistant Treasurer
Executed on <u>10/26/2022</u>	Date	By <u>[REDACTED]</u>	Signature of Co-Treasurer Proponent or Responsible Officer of Sponsor
Executed on _____	Date	By _____	Signature of Controlling Officeholder, Candidate, State Measure Proponent
Executed on _____	Date	By _____	Signature of Controlling Officeholder, Candidate, State Measure Proponent



**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

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Page <u>2</u> of <u>23</u>	

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE			
Josie Gonzalez			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
Coachella City Council			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
[REDACTED]	Coachella	CA	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	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE		
BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*



# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>09/25/2022</u>	<b>CALIFORNIA FORM 460</b>
through <u>10/22/2022</u>	
Page <u>3</u> of <u>23</u>	I.D. NUMBER <b>1453232</b>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... <i>Schedule A, Line 3</i>	\$ 22,200.00	\$ 39,500.00
2. Loans Received..... <i>Schedule B, Line 3</i>	0	0
3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>	\$ 22,200.00	\$ 39,500.00
4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i>	1,063.00	1,063.00
5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i>	\$ 23,263.00	\$ 40,563.00

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

## Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... <i>Schedule E, Line 4</i>	\$ 18,375.23	\$ 21,771.18
7. Loans Made..... <i>Schedule H, Line 3</i>	0	0
8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>	\$ 18,375.23	\$ 21,771.18
9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i>	0	0
10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>	1,063.00	1,063.00
11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>	\$ 19,438.23	\$ 22,834.18

## Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

## Current Cash Statement

12. Beginning Cash Balance..... <i>Previous Summary Page, Line 16</i>	\$ 13,903.85
13. Cash Receipts..... <i>Column A, Line 3 above</i>	22,200.00
14. Miscellaneous Increases to Cash..... <i>Schedule I, Line 4</i>	0
15. Cash Payments..... <i>Column A, Line 8 above</i>	18,375.23
16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ 17,728.62

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

*If this is a termination statement, Line 16 must be zero.*

17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i>	\$ 0
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## Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... <i>See instructions on reverse</i>	\$ 0
19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ 0

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b> Page <u>4</u> of <u>23</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER <b>Josie Gonzalez For Coachella City Council 2022</b>	I.D. NUMBER <b>1453232</b>
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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/29/2022	Stronghold Power Systems 3421 Gato Court Suite C Riverside, CA 92507	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> 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	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		2000.00		
10/12/2022	Cadiz Inc. 550 South Hope Street Suite 2850 Los Angeles, CA 90071	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		4900.00		
10/11/2022	Oracio Gonzalez [REDACTED] Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Olin Stratagies Political Consultant	1000.00		
10/16/2022	VO Medical Center 1590 S Imperial Ave El Centro, CA 92243	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00		
<b>SUBTOTAL \$ 13,800.00</b>						

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ <u>22,200.00</u>
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$ <u>0</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL \$ <u>22,200.00</u></b>

\*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

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/25/2022	
through	10/22/2022	Page <u>5</u> of <u>23</u>
NAME OF FILER		I.D. NUMBER
Josie Gonzalez for Coachella City Council 2022		1453232

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/16/2022	Democratic Women of the Desert PO Box 6207 La Quinta, CA 92248-6207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		1000.00		
10/17/2022	Desert Concepts Construction, Inc. 79-775 Ave 40 Indio, CA 92203	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> 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	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2000.00		
10/07/2022	Joy Silver [REDACTED] Palm Springs, CA, 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Affordable Housing Developer	500.00		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$ 8400.00</b>						

\*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

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Josie Gonzalez from Coachella City Council 2022

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (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 RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*		(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE			
				<input type="checkbox"/> PAID \$ _____	<input type="checkbox"/> FORGIVEN \$ _____					DATE DUE	RATE	DATE INCURRED
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	\$ _____	\$ _____	_____	_____ % RATE	\$ _____	\$ _____ PER ELECTION** \$ _____			
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	\$ _____	\$ _____	_____	_____ % RATE	\$ _____	\$ _____ PER ELECTION** \$ _____			
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	\$ _____	\$ _____	_____	_____ % RATE	\$ _____	\$ _____ PER ELECTION** \$ _____			
<b>SUBTOTALS</b>								<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	

(Enter (e) on Schedule E, Line 3)

**Schedule B Summary**

- Loans received this period ..... \$ 0  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$** 0  
Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

†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

\*Amounts forgiven or paid by another party also must be reported on Schedule A.  
\*\* If required.

**Schedule B – Part 2  
Loan Guarantors**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA 460 FORM</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

I.D. NUMBER  
1453232

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
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
<b>SUBTOTAL \$ 0</b>					Enter on Summary Page, Line 17 only.	

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/25/2022	
through	10/22/2022	Page <u>8</u> of <u>23</u>
		I.D. NUMBER 1453232

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josie Gonzalez for Coachella City Council 2022

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 OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/22	Kimberly Barraza for Desert Health Care District Zone 6 2022 ID# 1452967 [REDACTED] Coachella, CA 92236	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Illuminated Vinyl Bulletin Dillion Rd: W/O Hwy 86	\$680.00	\$680.00	
10/14/22	Eduardo Garcia for Assembly 2022 ID#1435183 [REDACTED] Sacramento, CA 95815	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		One Piece direct mail program "Coachella DEM Voter Guide"	\$383.00	\$383.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 1063.00**

**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.).....	\$ 1063.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$100 .....	\$ 0
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....	<b>TOTAL \$ 1063.00</b>

\*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



**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Amounts may be rounded  
to whole dollars.

SCHEDULE D

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/18/2022	Kimberly Barraza for Desert Health Care District Zone 6 2022 ID#1452967 [REDACTED] Coachella, CA 92236	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1000.00	1000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$ 1000.00</b>						

**Schedule D Summary**

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



**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

**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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Planit Reprographics 39350 Berkey Drive Palm Desert CA 92211		Photo copies	69.02
Home Depot 42100 Jackson St Indio, CA 92201	CMP	Lumber, Screws, etc. for signs	376.58
Costco Wholesale 79797 Hwy 111 La Quinta, CA 92253	CMP		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.)	<b>TOTAL \$ 18,375.23</b>

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josie Gonzalez for Coachella City Council 2022

**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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Harbor Freight 82123 US Hwy 111 Indio, CA 92201		Saw, Blades, measuring tape and washers for putting up signs	82.60
Home Depot 42100 Jackson St Indio, CA 92201		Drill kit for making signs	172.91
Ace Hardware 49211 Grapefruit Blvd Suite 2 Coachella, CA 92236		Screws and Washers	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 be summarized on Schedule D.

**SUBTOTAL \$ 419.72**

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Josie Gonzalez for Coachella City Council 2022	I.D. NUMBER 1453232
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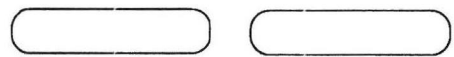
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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
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LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
www.Stripe.com		Donation transaction 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 Schedule D.

**SUBTOTAL \$ 1896.29**



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Josie Gonzalez for Coachella City Council 2022

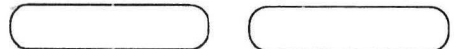
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CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION 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 supplies for office and snacks for volunteers	34.32
Farmers Boys 81959 Hwy 111 Indio, CA 92201	TRS	Food for Volunteers	42.67
Costco 79797 Hwy 111 La Quinta CA 92253		Supplies and food 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 Schedule D.

**SUBTOTAL \$ 5911.81**



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

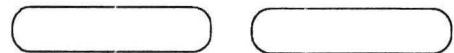
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CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Applebees 82894 Hwy 111 Indio, CA 92201	TRS		91.33
Home Depot 42100 Jackson Street Indio, CA 92201		Equipment Rental for putting up signs	74.25
Erick Lemus Indio, CA 92201		Professional Photos	150.00
Ace Hardware 49211 Grapefruit Blvd Coachella, CA 92236		Screws to fix signs	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 Schedule D.

**SUBTOTAL \$ 428.73**



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

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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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Big Lots 42225 Jackson St Indio, CA 92201	FND			240.47
KO Catering Services 85236 Araby Ave Coachella, CA 92236	FND			400.00
Studio 5 84061 Airport Blvd Thermal, CA 92274			Mailer and Walking Flyer Design, Campaign T-Shirts	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 Schedule D.

**SUBTOTAL \$ 4892.13**



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>09/25/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Josie Gonzalez for Coachella City Council 2022

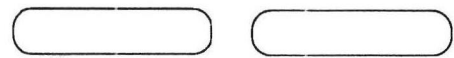
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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Hobby Lobby 78850 Hwy 11 La Quinta, CA 92253	CMP		55.40
Canva.com 2140 S Dupont Highke, CA	WEB	Subscription for graphic designs	12.99
www.CampaignVerify.org 8605 Westwood Center Dr		Campaign verification for text messaging	95.00
Fast Trip 51893 Harrison St Coachella, CA 92236		Fuel	90.46
Kassandra Ortiz [REDACTED] Coachella, CA 92236		Professional photos	250.00

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

**SUBTOTAL \$ 503.85**





**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>09/25/2022</u>	<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER 1453232	

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NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

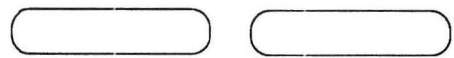
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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kimberly Barraza for Desert Health Care District Zone 6 2022 [REDACTED] Coachella, CA 92236	CTB	Donation	1000.00
City of Coachella 53990 Enterprise Way Coachella, CA 92236		Candidate statement and filing fee	625.00
Secretary of State 1500 11th St Rm 495 Sacramento, CA 95814		Committee ID Fee	50.00
USPS 1412 5th St Coachella, CA 92236		Postal fees	13.65
Fastrip 51893 Harrison St Coachella, CA 92236		Water for Volunteers	7.54

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

**SUBTOTAL \$ 1696.19**



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>09/25/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Josie Gonzalez for Coachella City Council 2022

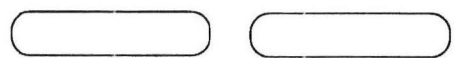
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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Dominos Pizza 51616 Cesar Chavez St. Coachella, CA 92236	TRS		43.21
Jesus Prieto Coachella, CA 92236		Campaign Video	200.00
Dollar Tree 49976 Harrison Street Coachella, CA 92236	CMP		10.88
Facebook.com		Campaign Advertising	320.00
Fastrip 51893 Harrison St Coachella, CA 92236		Fuel	130.00

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

**SUBTOTAL \$ 704.09**



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>09/25/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Josie Gonzalez for Coachella City Council 2022

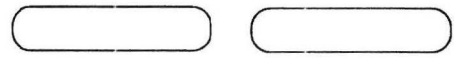
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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ruben Gonzalez [REDACTED] Coachella, CA 92236		Putting up signs	300.00
Carmen Delara [REDACTED] Indio, CA 92201	PHO		1045.50

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

**SUBTOTAL \$ 1345.50**



# Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER 1453232	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Josie Gonzalez for Coachella City Council 2022

I.D. NUMBER  
1453232

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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)

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 PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
<b>SUBTOTALS</b>		<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>

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

## Schedule F Summary

- 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.) ..... **INCURRED TOTALS \$** 0
- 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.) ..... **PAID TOTALS \$** 0
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 0

May be a negative number

FPPC Form 460 (Jan/2016))

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

[www.fppc.ca.gov](http://www.fppc.ca.gov)



**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

Statement covers period  
 from 09/25/2022  
 through 10/22/2022

SCHEDULE G

**CALIFORNIA FORM 460**

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 1453232

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
 Josie Gonzalez for Coachella City Council 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

- |                                                                   |                                               |                                                               |
|-------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| CMP campaign paraphernalia/rnisc.                                 | 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)           |

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

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

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$ 0

\* 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.



# Schedule H Loans Made to Others\*

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b> Page <u>22</u> of <u>23</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Josie Gonzalez for Coachella City Council 2022	I.D. NUMBER 1453232
-----------------------------------------------------------------	------------------------

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 OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
		<b>SUBTOTALS</b>		\$ 0	\$ 0	\$ 0	\$ 0	

\*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.

(Enter (e) on  
Schedule I, Line 3)

## Schedule H Summary

- Loans made this period.....\$ 0  
(Total Column (b) plus unitemized loans of less than \$100.)
- Payments received on loans.....\$ 0  
(Total Column (c) plus unitemized payments of less than \$100.)
- Net change this period. (**Subtract** Line 2 from Line 1.).....**NET \$ 0**  
(Enter the net here and on the Summary Page, Column A, Line 7.)

**\*\*If Required**

(May be a negative number)



**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Josie Gonzalez for Coachella City Council 2022	I.D. NUMBER 1453232
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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 0**

**Schedule I Summary**

- 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, and 3. Enter here and on the Summary Page, Line 14.) .... **TOTAL \$** 0