

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

COVER PAGE

Date Stamp

CALIFORNIA  
FORM

**460**

Page 1 of 4

For Official Use Only

**FILED**

JUN 08 2023

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

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

**3. Committee Information**

I.D. NUMBER

1271983

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Plumas County Democratic Central Committee

STREET ADDRESS (NO. PO. BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Quincy

CA

95971

530-283-0712

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

P. O. Box 1257

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Quincy

CA

95971

530-283-0712

OPTIONAL: FAX / E-MAIL ADDRESS

**2. Type of Statement:**

<input type="checkbox"/> Preelection Statement	<input type="checkbox"/> Statement Mid-Year Report
<input checked="" type="checkbox"/> Semi-annual Statement	
<input type="checkbox"/> Termination Statement (Also file a Form 410 Termination)	<input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495
<input type="checkbox"/> Amendment (Explain below)	

**Treasurer(s)**

NAME OF TREASURER

Ruth Jackson

MAILING ADDRESS

P. O. Box 1257

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Quincy CA 95971 530-283-0712

NAME OF ASSISTANT TREASURER, IF ANY

Lori Simpson

MAILING ADDRESS

P. O. Box 432

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Quincy CA 95971 530-283-0712

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 and correct.

Executed on May 31, 2023  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure 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

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Campaign Disclosure Statement  
Summary Page**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

**460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**Plumas County Democratic Central Committee**

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3 \$ 1092.00	\$ 1092.00
2. Loans Received .....	Schedule B, Line 3 \$ 0	\$ 0
3. SUBTOTAL CASH CONTRIBUTIONS .....	Add Lines 1 + 2 \$ 1092.00	\$ 1092.00
4. Nonmonetary Contributions .....	Schedule C, Line 3 \$ 0	\$ 0
5. TOTAL CONTRIBUTIONS RECEIVED .....	Add Lines 3 + 4 \$ 1092.00	\$ 1092.00

**Expenditures Made**

6. Payments Made .....	Schedule E, Line 4 \$ 600.00	\$ 600.00
7. Loans Made .....	Schedule H, Line 3 \$ 0	\$ 0
8. SUBTOTAL CASH PAYMENTS .....	Add Lines 6 + 7 \$ 600.00	\$ 600.00
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3 \$ 0	\$ 0
10. Nonmonetary Adjustment .....	Schedule C, Line 3 \$ 0	\$ 0
11. TOTAL EXPENDITURES MADE .....	Add Lines 8 + 9 + 10 \$ 600.00	\$ 600.00

**Current Cash Statement**

12. Beginning Cash Balance .....	Previous Summary Page, Line 16 \$ 1483.76
13. Cash Receipts .....	Column A, Line 3 above \$ 1092.00
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4 \$ 0
15. Cash Payments .....	Column A, Line 8 above \$ 600.00
16. ENDING CASH BALANCE .....	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 1975.76

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

17. LOAN GUARANTEES RECEIVED .....	Schedule B, Part 2 \$ 0
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**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents .....	See Instructions on reverse \$ 0
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above \$ 0

Statement covers period from <u>1/1/22</u> through <u>10/30/22</u>	CALIFORNIA FORM Page <u>2</u> of <u>4</u>
I.D. NUMBER <u>1271983</u>	

**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 \$ 1092.00	\$ 0
21. Expenditures Made \$ 600.00	\$ 0

**Expenditure Limit Summary for State  
Candidates**

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	Total to Date
Date of Election (mm/dd/yy)	
<u>1/1</u>	\$ <u>600.00</u>
<u>1/1</u>	\$ <u>600.00</u>

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.

## **Schedule A Monetary Contributions Received**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

**SCHEDULE A**

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Plumas County Democratic Central Committee

Statement covers period		CALIFORNIA FORM	
from	<u>1/1/22</u>	460	
through	<u>6/30/22</u>	Page	<u>3</u> of <u>4</u>
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<u>1271983</u>			

## Schedule A Summary

1. Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 0
2. Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 1092.00
3. Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$ 1092.00**

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

## Schedule E Payments Made

Type or print in ink.  
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SCHEDULEE

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1271983

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

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 communications

MTG meetings and appearances

OPC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

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
Kermit Jones For Congress P.O. Box 713 Roseville, CA 95661 District 3	CTB		Campaign Contribution	\$1300.00
Belle Sandwith For Assembly P.O. Box 320, Loyalton, CA (94118 #D1446508)	CTB		Campaign Contribution	\$300.00

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

SUBTOTAL \$ 600.00

## Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) ..... \$ 1000.00
- Unitemized payments made this period of under \$100 ..... \$ 0
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL \$ 600.00**