				COVER PAGE
Recipient Committee Campaign Statement Cover Page	Type or print in	ink.	RECEIVED	california 460
(Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable:	MAY 2 0 2022 MADOR COUNTY ELECTIONS	Page1 of1 For Official Use Only
4. The of Book land Committees and		2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T	t Spe	arterly Statement cial Odd-Year Report plemental Preelection ement - Attach Form 495 n/Employer Info.
	D. NUMBER 445158	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Oneto for Supervisor 2018 STREET ADDRESS (NO P.O. BOX)		NAME OF TREASURER Eugene J. Lowe MAILING ADDRESS CITY		CODE AREA CODE/PHONE
CITY STATE ZIP CO	DDE AREA CODE/PHONE	Jackson NAME OF ASSISTANT TREASU		42
Drytown CA 95699 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E	9	Brian Oneto MAILING ADDRESS		
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY		CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	9	OPTIONAL: FAX / E-MAIL ADD	CA 956	669
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on Date Executed on Date Date	a that the foregoing is true and correct. By	owledge the information contained h	at Francisco A	
Executed on	Ву	Cincetus of Controlling Officialidas Considerta	State Manage Prepagant	

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2					
	ORNIA DRM	460			
Page _	2	of2			

Officeholder or Candidate Controlled Cor	nmittee	6.	Primarily Formed Ballo	t Measure Commi	tee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Brian Oneto			Y		······································	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
Supervisor District 5						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling offi	ceholder, candidate,	or state measur	e proponent, if an
			NAME OF OFFICEHOLDER, CAN	DIDATE, OR PROPONENT		
Related Committees Not Included in this not included in this statement that are controlled by a contributions or make expenditures on behalf of your	you or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT N	D. IF ANY
COMMITTEE NAME	I.D. NUMBER					
		7	Primarily Formed Cand	lidate/Officeholde	r Committee	List names of
NAME OF TREASURER	CONTROLLED COMMITTEE?	•	officeholder(s) or candidate(s) for which this commit	ee is primarily fo	ormed.
	YES NO		NAME OF OFFICEHOLDER OR O	ANDIDATE TOFFICE	SOUGHT OR HEL	D I _
COMMITTEE ADDRESS (NO P	.O. BOX)		NAIVIE OF OFFICEROLDER OR C	ANDIDATE	5555,,,, 5111,22	SUPPORT OPPOSE
CITY STATE :	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR O	ANDIDATE OFFICE	SOUGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR O	CANDIDATE OFFICE	SOUGHT OR HEL	D SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE OFFICE	SOUGHT OR HEL	D SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P	.O. BOX)					

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Amounts may be rounded to whole dollars.

NAME OF FILER 1445158 **Brian Oneto** Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE General Elections 30505.94 1. Monetary Contributions Schedule A, Line 3 1/1 through 6/30 7/1 to Date 3500.00 2. Loans Received Schedule B. Line 3 20. Contributions 34005.94 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 Received 5203.00 4. Nonmonetary Contributions Schedule C. Line 3 21. Expenditures 39208.94 Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ **Expenditures Made Expenditure Limit Summary for State** 18335.33 Candidates 6. Payments Made Schedule E, Line 4 7. Loans Made Schedule H, Line 3 22. Cumulative Expenditures Made* 18335.33 (If Subject to Voluntary Expenditure Limit) SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 Total to Date Date of Election (mm/dd/yy) 5203.00 10. Nonmonetary Adjustment Schedule C, Line 3 23538.33 Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add 34005.94 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous increases to Cash Schedule I. Line 4 from Column B of your last reported in Column B. 18335.33 report. Some amounts in 15. Cash Payments Column A, Line 8 above Column A may be negative 15670.61 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents See instructions on reverse \$ FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink. Amounts may be rounded

SCHEDULE A Statement covers period CALIFORNIA 1/1/22 **FORM** from _ 4/23/22 through

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER 1445158 Brian Oneto PER ELECTION AMOUNT CUMULATIVE TO DATE IF AN INDIVIDUAL, ENTER FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR RECEIVED THIS DATE CALENDAR YEAR TO DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) IND Brian Oneto Rancher ПСОМ 1000.00 2/17/22 □ OTH Drytown, CA 95699 ☐ PTY SCC □ IND G & bO Truck Parts □ COM 1500.00 3/23/22 ✓ OTH Jackson, CA 95642 □ PTY SCC **✓**IND Carol Sleeper Farmer ПСОМ 100.00 3/31/22 Потн Plymouth, CA 95669 □ PTY SCC MIND Dave Wardel Retired СОМ 300.00 3/31/22 □отн Ione, CA 95640 □ PTY SCC IND Susan Brown Retired □ COM 100.00 3/31/22 \square OTH Carson City, NV 89706 PTY □scc SUBTOTAL\$ 3000.00 *Contributor Codes Schedule A Summary IND - Individual 1. Amount received this period - itemized monetary contributions. 20000.00 COM - Recipient Committee (Include all Schedule A subtotals.)\$ (other than PTY or SCC) 10505.94 OTH - Other (e.g., business entity) 2. Amount received this period – unitemized monetary contributions of less than \$100\$ PTY - Political Party SCC - Small Contributor Committee 3. Total monetary contributions received this period. 30505.94

FPPC Form 460 (January/05)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CO

CALIFORNIA ACO

Statement covers period

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				through4/2	23/22	Page 2		
NAME OF FILER Brian Oneto)					1.D. NUMBE 1445158		
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 CALENDAR \() (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)	
3/31/22	michael Preskar D.D.S. Ione, CA 95640	☑IND □COM □OTH □PTY □SCC		500.00				
2/31/22	Plymouth, CA 95669	□HŃD □COM □OTH □PTY □SCC	Teacher	100,00				
3/31/22	Sutter creek, CA 95 685	□IND □COM □ØTH □PTY □SCC		150.00				
3/31/22	Janet Wardell	□HND □COM □OTH □PTY □SCC	Retired	100-00				
3/31/22	Dlymouth, CA 95664	□ GM □ COM □ OTH □ PTY □ SCC	Farmer	1530.00				
			SUBTOTAL	\$ 2380.00	E Cam Pa			

*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

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

SUBTOTAL\$ 1/50.00

nonotary .		to whole do	ollars.	from 1/1/22		FORM 400		
NAME OF FILER Brian Oneto	1			through		I.D. NUM 144515	MBER	
DATE RECEIVED	(IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	_
3/31/22	Anne Heissenbuttle Pine Grove, CA 95665	☑IND □COM □OTH □PTY □SCC	Retired	250.00				
331/22	Tom Onttein	☐#ND ☐COM ☐OTH ☐PTY ☐SCC	Retired	500.00				
4/3/22	Ione, CA 95640	☐ COM ☐ COTH ☐ PTY ☐ SCC	cometologist spoiled Rotton salon	100,00				
4/4/22	shungle Springs, CA 95682	☐HND ☐COM ☐OTH ☐PTY ☐SCC	Metropolitian crime tree solution INC.	200.00				
4/4/22	Jean-Paul Soures	☐ COM ☐ COM ☐ OTH ☐ PTY ☐ SCC	Restived	100.00				

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PTY - Political Party

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

SCHEDULE A	(CONT.)
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Statement covers period

Monetary Contributions Received		Amounts may to whole d		Statement covers period 1/1/22		CALIFORNIA 460		
				through4/2	23/22		4 of 14	
NAME OF FILER Brian Oneto						1.D. NUM 14451	10	
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 CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)	
206/22	Dim Spinetta Plymouth CA 95669	☑IND □COM □OTH □PTY □SCC	wine mater spinetta Uinery	150.00				
4/06/22	Dlymouth CA 95669	□IND □COM □PTY □SCC		500.00				
4/12/22	Drytown, CA 95699	DAND □COM □OTH □PTY □SCC	SR mapping 651 manager	106.00				
4/12/22	Robertson Ranches	□IND □COM □MOTH □PTY □SCC		500.00				
4/12/22	Plymouth CA 95669 Veer Kamp Engineering Placerville CA 95667	☐IND☐COM☐OTH☐PTY☐SCC		500.00				
			SUBTOTAL	\$ 1750.00				

*Contributor Codes

IND - individual

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(other than PTY or SCC)

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PTY - Political Party

Type or print in ink. Amounts may be rounded SCHEDULE A (CONT.)

Monetary	onetary Contributions Received		e rounded ollars.	Statement cove		CALIF(FOI		460
AME OF FILER Brian Oneto				through 4/2	JI EL	I.D. NUMI 144515	BER	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	TOE	ECTION DATE QUIRED)
4/14/22	Plymouth, CA 95669	☑IND □COM □OTH □PTY □SCC	Retired	100.00				
4/15/22	cole Bratton sackson CA 95642	☑MÑD □COM □OTH □PTY □SCC	Programmanagen St. of CA	200.00				
4/18/22	Pine Grove CA 95665	GOM GOTH DTY SCC	Ratired	500.00				
4/18/22	annosonn Green	COM COM OTH PTY	Retired	100.00				
4/18/22	amador Barnowl Box Co. Fiddletown, CA 95629	☐IND ☐COM ☐OTH ☐PTY ☐SCC		100.00				
			SUBTOTAL	\$ 1000.00		7 3		

*Contributor Codes

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(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in Ink.

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)

CALIFORNIA

FORM

Statement covers period

1/1/22

NAME OF FILER Brian Oneto				through 4/2	3/22	Page I.D. NUM 14451	
	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 OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
4/18/22	Fiddletown, CA 95629	☑IND □COM □OTH □PTY □SCC	ceo coach Adjunct Group LLC	100-00			
4/22/22	Fiddletown, CA 95629 J.E. & Carol Greene	DIND COM OTH PTY SCC	×	200.00			
4/19/22	J.E. & Carol Greene Pine Grove CA 95665	☐ COM ☐ COTH ☐ PTY ☐ SCC	Restured	100~047			
Higher	Pine Grove CA 95665	☐HND ☐COM ☐OTH ☐PTY ☐SCC	Retired	150.00			
4/19/2	- a country on ance	COM COM OTH PTY	Retired	100.00			
			SUBTOTAL	\$ 650.00			

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PTY - Political Party

SCC - Small Contributor Committee

FPPC Tojl-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)

CALIFORNIA ACO

Statement covers period

•		to Allole de	onara,	from 1/1/	22	FO	RM TOU
				through4/2	3/22	Page	
NAME OF FILER Brian Oneto						1.D. NUM 144515	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR \ (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
4/21/22	Plymouth, CA 95669	☑IND ☐COM ☐OTH ☐PTY ☐SCC		200.00			
4/21/22	O.c. Wich	DIND COM	Feed Store Owner function Out let	100.00			-
4/21/22	Pine Grove CA 95665	□ COM □ OTH □ PTY □ SCC	Rotired	100.00			
4hihr	michael Lawson tone CA 95640	□ COM □ OTH □ PTY □ SCC	Musician Lawson Music	200.00			
4/22/22	Switter Creek, CA 95685	□ COM □ COM □ OTH □ PTY □ SCC	Farrier Mashan Faster Horseshoeing	200.00			
			SUBTOTAL	\$ 800.00			

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

SCHEDULE A (CONT.)

Statement covers period

Monetary (Contributions Received	Amounts may be to whole do		from 1/1/ through 4/2	-	CALIF FO	ORNIA 460 8 of 134
NAME OF FILER Brian Oneto)					1,D. NUM 14451	
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 OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVET CALENDAR ' (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)
4/22/22	Brad & mary Robertson Plymouth, CA 95669	DOM COM COTH PTY SCC	Robertson Ranches	200.00			
4/22/22	plymouth, cA 95669 Chery Clark Jone CA 95640	COM COM OTH PTY	Haygrower	300.00			
4/20/22	Jett Reed modesto CA 95354	☐ COM ☐ COM ☐ OTH ☐ PTY ☐ SCC	manfacturer Basic Resources INC.	100.00			
4/22/22	SwHer Creek CA 95685	COM COM OTH PTY	Retired	100.00			
4/23/22	Tomaca Wagstaft	DIND COM OTH PTY SCC	Retired	150.00			
			SUBTOTAL	\$ 850,00			

*Contributor Codes

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(other than PTY or SCC) OTH - Other (e.g., business entity)

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Type or print in Ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

1/1/22

NAME OF FILER Brian Oneto				through 4/2	3/22	Page		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERILD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTERNAME OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	ÆAR	PER ELECTION TO DATE (IF REQUIRED)	
4/22/22	Jackson CA 95640	☑IND □COM □OTH □PTY □SCC	sales happresentative TSPN TV	100.00				
4/22/22	Pine Grove CA 95665	GMD COM OTH PTY SCC	Retired	100,00				
4/22/22	O la Cornadone	☐ÍND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00				
4/22/22	Ione CA 9564V	☐TÑD ☐COM ☐OTH ☐PTY ☐SCC	Rancher	100.00				
4/22/22	Ione CA 95640 RATAGRI Consulting INC. Fore CA 95640.	□IND □COM □OTH □PTY □SCC		100.00				
	SUBTOTAL\$ 500.00							

*Contributor Codes

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(other than PTY or SCC)
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PTY - Political Party

Schedule A (Continuation Sheet) Mone

Type or print in ink.

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may be to whole d		trom	/22			460 14
NAME OF FILER		FILL CONTRACTOR OF THE PROPERTY OF THE PROPERT				1.D. NU		
Brian Oneto					-	14401		
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVET CALENDAR	YEAR	PER ELE TO D (IF REQ	DATE

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERILD, 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)
Harta	Jone CA 95640	☑IND □COM □OTH □PTY □SCC	Retired	,00.00		
4/22/22	Plymouth, CA 95669	DIND COM OTH PTY SCC	Retired	708.00		
4/22/22	Jackson CA 95642	□IND □COM □PTY □SCC	×	250.00		
4/22/22	Jackson, CA 95642	□ZHÑD □COM □OTH □PTY □SCC	Electrician	100.00		
4/22/22	Plymouth CA 95669	COM COM DOTH PTY	Grape Geover	500,00		
			SUBTOTAL	\$ 1650.00		

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(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in lnk.

Amounts may be rounded to whole dollars.

SCHEDULE A (CC

CALIFORNIA 460

Statement covers period

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				through4/2	3/22	Page	11 of 14	
NAME OF FILER						I.D. NUN		
Brian Oneto)				V-10-10-10-10-1	14451	06	1
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERLD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)	
4/22/22		☑IND □COM □OTH □PTY	Retired	200,00				
	Ione, CA 95640	SCC		200200				_
4/22/22	Jackson CA 95642	□ SCC		100,00				
4/22/22	John & Jeanne Plasse Jackson CA 95642	DIND COM	Ranchel	400.00	-			
4/22/22	SACramento, CA	☐COM ☐COM ☐OTH ☐PTY ☐SCC	walker Development	100.00				
4/22/22		□ SCC	Rancher	100.00				
			SUBTOTAL	\$ 900.00				

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(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

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Statement covers period 1/1/22	CALIFORNIA 460
through4/23/22	Page 12 of 14
	I,D. NUMBER
	1445158

Brian Oneto PER ELECTION IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR RECEIVED THIS CALENDAR YEAR TO DATE DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * (IF REQUIRED) (JAN, 1 - DEC, 31) PERIOD RECEIVED (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) Sierra Hearth & Home MND 4/22/22 COM POTH □ PTY Proneer CA 95666 100.00 □scc anne Heissen buttel DAND Retured ПСОМ Потн Pine Grove, CA 95665 PTY 150.00 □scc Barbora Miller DIND 4/22/22 Псом Refuned **□**OTH 200.00 □ PTY Ione CA 95640 TSCC. Frank moveno []HND 4/22/22 ПСОМ ПОТН □ PTY 500,00 Plymouth 95 66 9 □ scc Richard Way Staff Retured 4/22/22 □ COM □ OTH 100.00 □ PTY Suffer Creek, CA95685 □SCC SUBTOTAL\$ 1050.00

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OTH - Other (e.g., business entity)

PTY - Political Party

NAME OF FILER

Type or print in Ink.

Amounts may be rounded to whole dollars.

	SCHEDULE A (CONT.
Statement covers period from 1/1/22	CALIFORNIA 460
through 4/23/22	Page 13 of 14
	I,D. NUMBER
	4445450

Brian Onet	0		74)		1445	158
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERILD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF BELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/28/2-	Caul McDaniel Fiddletown, CA 95629	☑IND □COM □OTH □PTY □SCC	candy maker Drowns' English Taffee	100.00		
4/22/22	Campbell Construction General Engineering INC Sutter creek CA	□IND □COM □OTH □PTY □SCC		830.00		
414/22	Pine Grove, CA 95665	COM COM TOTH TY SCC) (II) X	100.00		
4/22/22	Jackson CA 95642	☐ tND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Forester	100.00		
4/22/22	Plymouth Sand & Bravel Plymouth Cit 95669	□IND □COM □ØTH □PTY □SCC		1000.00		
			SUBTOTAL	\$ 2130.00		MER LEVEL

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

NAME OF FILER

Brian Oneto

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

	SCHEDU	LEA (CONT.)
_	CALIFORNIA FORM	460

I.D. NUMBER

1445158

Statement covers period

from -

through.

1/1/22

4/23/22

Dilai, Giloi	.					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERLD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4(22/22	Shamarie tong Shingle Springs CA 95682	DIND COM OTH PTY scc	Metropolitians Crime Free Solution	× 680,00		
3/25/22	Plymouth, CA 95669	COM COM OTH PTY SCC		1,00.00		
4/22/22	Neal Swann Plymouth 95669	DAND COM OTH PTY	Kancher	700.00	×.	
4/22/22	Plymouth CH 95669	□IND □COM □OTH □PTY □SCC		210.00		
4/22/22	Jim Spinetta Plymonth, CH95669	GIND COM OTH PTY		500.0v		
***************************************			SUBTOTAL	\$ 2190,00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Sched	ule	B-	Part	1
Loans	Red	eiv	ed	

** If required.

Type or print in ink.

SCHED	JLEB-	PART 1
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Schedule B – Part 1 Loans Received	Type or print in ink. Amounts may be rounded to whole dollars.				Statement cov	ers period 1/22	CALIFORNI FORM	^A 460
SEE INSTRUCTIONS ON REVERSE					through4	/23/22	Page1 1.D. NUMBER 1445158	of1
Brian Oneto				y	7.75	T 23		(g)
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 PAI OR FORGIVE THIS PERIO	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Brian & Janine Oneto	Rancher			PAID				CALENDAR YEAR
Drytown, CA 95699				\$FORGIVEN	\$	RATE %	\$	\$ PER ELECTION**
† prind □ com □ oth □ pty □ scc		\$	\$900.00	\$	DATE DUE	\$	3/10/22 DATE INCURRED	\$
Brian & Janine Oneto				PAID				CALENDAR YEAR
Drytown, CA 95699				\$FORGIVEN	. \$	RATE	\$	\$ PER ELECTION **
TIND □ COM □ OTH □ PTY □ SCC		\$	s_2600.00	\$	DATE DUE	\$	3/17/22 DATE INCURRED	\$
				☐ PAID				CALENDAR YEAR
				\$		RATE	\$	PER ELECTION**
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	s
	2.2.4	SUBTOTALS \$	3500.00	\$	\$	\$		
Schedule B Summary						(Enter (e) on Schedule E, Line	3)	
Loans received this period				\$ _	3500.00	= 9		
(Total Column (b) plus uniternized loan				,		ſ	†Contributor Codes	3
2. Loans paid or forgiven this period					PTY or SCC) business entity) by			
Net change this period. (Subtract Line 2 from Line 1.)						butor Committee		
*Amounts forgiven or paid by another party also	must be reported on Schedule A.)						

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 1/1/22 CALIFORNIA 460 FORM 4/23/22 Page 1 of 1.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1445158 **Brian Oneto** CUMULATIVE TO PER ELECTION AMOUNT/ IF AN INDIVIDUAL, ENTER DATE **DESCRIPTION OF** FULL NAME, STREET ADDRESS AND CONTRIBUTOR TO DATE FAIR MARKET OCCUPATION AND EMPLOYER DATE GOODS OR SERVICES CALENDAR YEAR ZIP CODE OF CONTRIBUTOR CODE * (IF REQUIRED) VALUE (IF SELF-EMPLOYED, ENTER RECEIVED (JAN 1 - DEC 31) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) NAME OF BUSINESS) □IND □ COM materials 750.00 HTOF Value □PTY □scc Gioello Winery HIND 240,00 wilne COM **⊡**OTH Fiddletown CH95629 □SCC Deaven Winery wine ☐ COM 240,00 HTGG \square PTY SCC

Attach additional information on appropriately labeled continuation sheets.

4/2/2 Justin Trick Auctioner

Galt CA 95632

SUBTOTAL \$ 1730,00

500,00

Schedule	C	Sum	mary
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□COM □OTH □PTY

□SCC

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 1/1/22 CALIFORNIA 460 FORM 460 through 4/23/22 Page 2 of 5

I.D. NUMBER 1445158

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Brian Oneto

Dilan One	310						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)
4/22/22	1 mg 1 95640	MND COM OTH PTY SCC		Raggle Pnzes	#637,		
4/22/22	Alexandra, VA 22210	□COM □OTH □PTY □SCC	N.	Paffle	A 230.		
4/22/80	Michelle Forgan	□COM □OTH □PTY □SCC		Raffle	#280.		
4/22/88	Cale Krastore	□COM □OTH □PTY □SCC		Russe	\$332.		
-	ditional information on appropriately labe	led continua	tion sheets.	SUBTOTAL	\$ 1469.00		

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.

(Include all Schedule C subtotals.)......\$

2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$

 *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

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

SCHEDULE C Statement covers period CALIFORNIA ACO

						from	1/1/22		FOR	VI -	·UU
						thro	4/23/2	2	Page 3	of S	5
SEE INSTRUCT	IONS ON REVERSE					GIIO	uyn.		I.D. NUMBER		_
A									1445158	•	
Brian One	eto										
DATE RECEIVED	FULL NAME, STREET ADDR ZIP CODE OF CONTRIB (IF COMMITTEE, ALSO ENTER I.D	UTOR	NTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELEC TO DA (IF REQU	ΤE
	Poaring Campr.	95665	□IND □COM □OTH □PTY □SCC		Raffe		\$330.				
	Jim Eakin Fillle town, Ca		ZIND COM OTH PTY SCC		Rask		&3as.				
	Sulson, Ca 95 Desse Garfinles	[ZĪND □COM □OTH □PTY □SCC		Paffe		\$150.				
	Dessie Garfinles Plymouth, Ca		☐IND ☐COM ☐OTH ☐PTY ☐SCC		Raffe		# 250.				
Attach ad	ditional information on appr	opriately labeled	continuati	on sheets.	SUBT	OTAL	\$ 945.00				
1. Amount (Include	e C Summary received this period – itemize all Schedule C subtotals.)					\$ ₋		_ IND	ntributor Cod I – Individual M – Reciplent (other the H – Other (e.	Committee an PTY or S	

2. Amount received this period – unitemized nonmonetary contributions of less than \$100

3. Total nonmonetary contributions received this period.

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE C

onmonetary Contributions Received				from VIII				
EEE INSTRUCTIONS ON REVERSE				thro	ough/		I.D. NUME	4_ of _5_
Brian Oneto							149	45188
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 SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
Plymouth, Ca. 95469	☑IND □COM □OTH □PTY □SCC		Raffie		#300.			
Plymouth, Ca 95669 Amader Flower Farm	□IND □COM ØOTH □PTY □SCC		Rasse		\$150.			
	□IND □COM □OTH □PTY □SCC		Refle		\$150.			
Phymouth Ca 95669 Ray One to Sacken, Ca 95642	COM OTH PTY SCC	*	Paffe		\$1as.			
Attach additional information on appropriately labele	d continuation	sheets.	SUBT	OTAL:	\$ 725,00			
Schedule C Summary I. Amount received this period – itemized nonmoneta (Include all Schedule C subtotals.)	etary contribut	ions of less than \$100		\$_		IND COM	(other th I – Other (e ′ – Political	nt Committee nan PTY or SCC) .g., business entity)
(Add Lines 1 and 2. Enter here and on the Summa	iry Page, Colui	mn A, Lines 4 and 10.)	101/	4L \$_		_		

3. Total nonmonetary contributions received this period.

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period from 1/1/22 CALIFORNIA 460 FORM

through 4/33/22 Page 5 of 5

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1445158 Brian Ometo CUMULATIVE TO IF AN INDIVIDUAL, ENTER PER ELECTION AMOUNT/ FULL NAME, STREET ADDRESS AND DESCRIPTION OF DATE CONTRIBUTOR OCCUPATION AND EMPLOYER DATE TO DATE FAIR MARKET ZIP CODE OF CONTRIBUTOR CALENDAR YEAR GOODS OR SERVICES CODE' RECEIVED (IF SELF-EMPLOYED, ENTER (IF REQUIRED) VALUE (IF COMMITTEE, ALSO ENTER LD. NUMBER) (JAN 1 - DEC 31) NAME OF BUSINESS) 244,00 ☐ COM DOTH □ PTY □scc Псом □ OTH □ PTY SCC Псом □ oth □ PTY SCC □ IND □ COM OTH □ PTY SCC SUBTOTAL \$ 2 444 00 Attach additional information on appropriately labeled continuation sheets. Schedule C Summary *Contributor Codes IND - Individual 1. Amount received this period – itemized nonmonetary contributions. COM - Recipient Committee (Include all Schedule C subtotals.).....\$ (other than PTY or SCC) OTH - Other (e.g., business entity)

2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)......TOTAL \$

FPPC Form 460 (Jan/2016))

SCC - Small Contributor Committee

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

PTY - Political Party

www.fppc.ca.gov

Schedule E **Payments Made**

Type or print in ink. Amounts may be rounded

	SCHEDULEE
Statement covers period	CALIFORNIA ACO
from1/1/22	FORM 400
through4/23/22	Page1 _ of5
	I.D. NUMBER
	1445158

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER **Brian Oneto**

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Amador Ledger Print Jackson CA 95642	FON copies/Tickets	5/0,19
staples Tackson CA 9564C	copies/Ink	167.83
A mader Ledger Print JACKSON CA 95642	Tickets	1 48.69

SUBTOTAL\$ 826,7/ * Payments that are contributions or independent expenditures must also be summarized on Schedule D. Schedule E Summary

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....\$

SC	HEDL	ИE	E	CON	IT.)
-			_		,

CMP campaign paraphernalia/misc.

CNS campaign consultants

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

MBR member communications

OFC office expenses

MTG meetings and appearances

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

	00,10000000000
Statement covers period	CALIFORNIA 460
from1/1/22	FORM TOO
4/23/22	Page 2 of 5
	I.D. NUMBER
	1445158

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER **Brian Oneto**

CTB CVC Fil. FND ND LEG LIT	contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mallings	PET petition c PHO phone ba POL polling at a/opposing others (explain)* POS postage,			ulating		t.v. or cable airtime and production co- candidate travel, lodging, and meals staff/spouse travel, lodging, and meal transfer between committees of the s voter registration information technology costs (internet	able airtime and production costs te travel, lodging, and meals buse travel, lodging, and meals between committees of the same candidate/sponsor gistration	
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER ID, NUMBER)			CODE O	R	DESCRIPTION	ON OF PAYMENT	AMOUNT PAID	
-	amador Ledge Disputch Jackson CA 95642 Amador Ledger Print		8		ads			306.00	
	Amador Ledger Print			стр	*			150_85	
- 1	Tom Patton Volcano, Ca 95689			FNA		-		291,86	
	Jeanne Deaver			FNO			A. H	148.34	
	plymouth CA 95669 Beth Sogaard Contering Plymonth, Ca 95669			FND		11	F. 20	58 92.00	

SUBTOTAL \$ 6789

SCHEDL	11 -	max	NIT
SCHEDL	11. [IVI.

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Brian Oneto

through 4/23/22
Page 3 of 5

I.D. NUMBER
1445158

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. radio airtime and production costs member communications CMP campaign paraphernalla/misc. returned contributions MTG meetings and appearances campaign consultants CNS campaign workers' salaries office expenses SAL OFC CTB contribution (explain nonmonetary)* t.v. or cable airtime and production costs PET petition circulating civic donations CVC candidate travel, lodging, and meals phone banks PHO candidate fling/ballot fees FIL staff/spouse travel, lodging, and meals polling and survey research POL fundraising events FND transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF POS independent expenditure supporting/opposing others (explain)* ND voter registration professional services (legal, accounting) VOT PRO LEG legal defense information technology costs (Internet, e-mail) campaign literature and mailings PRT print ads LΠ AMOUNT PAID DESCRIPTION OF PAYMENT NAME AND ADDRESS OF PAYEE CODE OR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) US Postal Service 174,00 POS Jackson CA95642

Amador Count Electon Dept

Jackson CA95692

US POSTAL Service

Jackson CA 95642

Sharleen Schulling,

Ripon CA 95366

Amador Ledger Dispatch

PRT

350.00

Tackson CA95642

POS

Flyers

153.60

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

SUBTOTAL \$ 3316,26

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

Statement covers period CALIFORNIA **FORM** 1/1/22 from 4/23/22 Page 4 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1445158 **Brian Oneto**

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. radio airtime and production costs CMP campaign paraphernalia/misc. member communications meetings and appearances RFD returned contributions CNS campaign consultants SAL campaign workers' salaries OFC office expenses СТВ contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations candidate travel, lodging, and meals TRC FIL candidate filing/ballot fees phone banks staff/spouse travel, lodging, and meals TRS polling and survey research FND fundraising events transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF independent expenditure supporting/opposing others (explain)* ND voter registration professional services (legal, accounting) VOT LEG legal defense Information technology costs (internet, e-mail) WEB PRT print ads campaign literature and mailings LIT AMOUNT PAID NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 26th District Ag ASSOC. FND 1700.00 Plymouth, CA 95669 Richard Gorreman Jenks, OK 74037 cocial Media

New Website Host WIX5 241.60 WEB

WEB

amador Ledge; Dispatch 153,00 FND Jackson, CA

Merzlak Signs

Jackson CA 95642

CMO

210,11

500,00

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

SCHEDU	11 6	= =	100	MT
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Type or print in lnk. Amounts may be rounded to whole dollars.

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Stateme	nt covers period	CALIFORNIA /	n	
from	1/1/22	FORM T	טק	
through	4/23/22	Page 5 of 5		
		I.D. NUMBER		
		1445158		

SEE INSTRUCTIONS ON REVERSE NAME OF FILER **Brian Oneto**

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs member communications campaign paraphernalia/misc. returned contributions meetings and appearances campaign consultants CNS campaign workers' salaries SAL OFC office expenses contribution (explain nonmonetary)* CTB t.v. or cable airtime and production costs TEL PET petition circulating civic donations CVC candidate travel, lodging, and meals TRC phone banks PHO candidate filing/ballot fees staff/spouse travel, lodging, and meals TRS polling and survey research POL fundraising events FND transfer between committees of the same candidate/sponsor TSF postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* POS ND voter registration VOT professional services (legal, accounting) LEG legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings LIT AMOUNT PAID NAME AND ADDRESS OF PAYEE DESCRIPTION OF PAYMENT CODE OR (IF COMMITTEE, ALSO ENTER I.Q. NUMBER) Amador Ledger Disputch 267.75 PRT Jackson CA 95642 ard Gorreman Web 1000.00 Jenks, OK 74037 Staples

183.19 OFC Jackson CA 95642 capital Promotions 890,00 Signs Glenside, PA 19038 450.00 ohoto

ackson, Ca. 95642 * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2790,94