

**Recipient Committee
Campaign Statement
Cover Page**

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from July 1, 2022
through September 15, 2022

Date of election if applicable:
(Month, Day, Year)
November 8, 2022

COVER PAGE

Date Stamp

CALIFORNIA FORM 460

RECEIVED
CITY OF HANFORD
SEP 20 2022

Page 1 of 15
For Official Use Only

CITY CLERK

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"/> 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 5)	
<input type="checkbox"/> General Purpose Committee	<input type="checkbox"/> Primarily Formed Candidate/ Officeholder Committee
<input type="radio"/> Sponsored	(Also Complete Part 6)
<input type="radio"/> Small Contributor Committee	
Political Party/Central Committee	

3. Committee Information

I.D. NUMBER

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

ELECT Mark Kairis - Hanford City Council 2022

STREET ADDRESS (NO P.O. BOX)

2093 W. Liberty Street

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Hanford

CA

93230

5593625349

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

PO Box 1895

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Hanford

CA

93232

OPTIONAL: FAX / E-MAIL ADDRESS

makairis@aol.com

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and certify under penalty of perjury under the laws of the State of California that the

Executed on September 15, 2022

Date

Executed on September 15, 2022

Date

Executed on _____

Date

Executed on _____

Date

Treasurer(s)

NAME OF TREASURER

Brenda Tangeman

	STATE	ZIP CODE	AREA CODE/PHONE
Hanford	CA	93230	5599046064

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS


Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____ 
Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)

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

www.fppc.ca.gov

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

COVER PAGE - PART 2

CALIFORNIA FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Mark Kairis

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Hanford City Council - District E

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
2093 W. Liberty Street Hanford CA 93230

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
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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
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6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSER

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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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 July 1, 2022
through September 15, 2022

**CALIFORNIA
FORM**

460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council (District E)

I.D. NUMBER

1451588

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ <u>5,734.43</u>	\$ <u>5,734.43</u>
2. Loans Received	Schedule B, Line 3	\$ <u> </u>	\$ <u> </u>
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ <u>5,734.43</u>	\$ <u>5,734.43</u>
4. Nonmonetary Contributions	Schedule C, Line 3	\$ <u>1,250.00</u>	\$ <u>1,250.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ <u>6,984.43</u>	\$ <u>6,984.43</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	\$ <u> </u>	\$ <u> </u>
21. Expenditures Made	\$ <u> </u>	\$ <u> </u>

Expenditures Made

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

**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
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>

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

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ <u> </u>
13. Cash Receipts	Column A, Line 3 above	\$ <u>5,734.43</u>
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$ <u> </u>
15. Cash Payments	Column A, Line 8 above	\$ <u>4,336.74</u>
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>1,397.69</u>

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

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

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from July 1, 2022
through September 15, 2022

SCHEDULE A
CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

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I.D. NUMBER

1451588

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 4,750.00

2. Amount received this period – unitemized monetary contributions of less than \$100 \$ 984.43

3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$ 5734.43**

*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
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from July 1, 2022
through September 15, 2022

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

I.D. NUMBER
1451588

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)
07/06/2022	Gerald Pierce [REDACTED] San Diego, CA 92128	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250.00		
07/06/2022	Gerald Pierce [REDACTED] San Diego, CA 92128	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250.00	\$500.00	
07/11/2022	Barbara Curry [REDACTED] Clovis, New Mexico 88101	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$200.00		
07/13/2022	Susan Martins-Froley [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager OneMain Financial	\$100.00		
07/13/2022	Jon Nelson [REDACTED] Visalia, CA 93291	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Jon Nelson Insurance & Bonding Services Inc	\$250.00		
SUBTOTAL \$ \$1,050.00						

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 4,750.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 984.43
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$ 5,734.43**

*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
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

CALIFORNIA **460**
FORM

Statement covers period
from July 1, 2022

through September 15, 2022

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

I.D. NUMBER
1451588

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)
07/15/2022	John Draxler [REDACTED] W. Sacramento, CA 93691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
07/16/2022	Donald Maciel [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
07/14/2022	Kenneth and Nancy Silva [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
07/15/2022	Jeff Kahn [REDACTED] Reno, NV 89521	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$150.00		
07/23/2022	Veronica Miller [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
SUBTOTAL \$ \$550.00						

Schedule A Summary

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

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
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Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from July 1, 2022
through September 15, 2022

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NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

I.D. NUMBER
1451588

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)
07/26/2022	Robert and Judy Cardoza [REDACTED] Laton, CA 93242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	Kelly and Lisa Olson [REDACTED] Bakersfield, CA 93312	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	Susan Pitts [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	Ernest Drewry [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	Scott and Melanie Goddard [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Law Enforcement California Highway Patrol	\$100.00		
SUBTOTAL \$ \$500.00						

Schedule A Summary

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

*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
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from July 1, 2022

through September 15, 2022

CALIFORNIA **460**
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

I.D. NUMBER
1451588

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)
08/07/2022	William Teale [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	Frank Giannola [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$500.00		
08/07/2022	Angle Campa [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Insurance Agent Farmers Insurance	\$100.00		
08/07/2022	Reynaldo Da Rosa [REDACTED] San Diego, CA 92129	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker/Owner The Realty	\$100.00		
08/07/2022	Joseph Dixon [REDACTED] W. Sacramento, CA 95891	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
SUBTOTAL \$ 900.00						

Schedule A Summary

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

*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
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from July 1, 2022
through September 15, 2022

CALIFORNIA **460**
FORM

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

I.D. NUMBER
1451588

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)
08/07/2022	Brad Beaumont [REDACTED] Hot Springs Village, AR 71909	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	Matt Radke [REDACTED] Roseville, CA 95747	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	Douglas Peters [REDACTED] Bakersfield, CA 93308	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/07/2022	David Urena [REDACTED] Visalia, CA 93291	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Law Enforcement California Highway Patrol	\$100.00		
08/07/2022	Norman Macedo [REDACTED] Lemoore, CA 93245	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farming Norman Macedo Farms	\$100.00		
SUBTOTAL \$ \$500.00						

Schedule A Summary

1. Amount received this period – itemized monetary contributions.

(Include all Schedule A subtotals.)\$ _____

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

3. Total monetary contributions received this period.

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

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
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Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from July 1, 2022

CALIFORNIA **460**
FORM

through September 15, 2022

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

I.D. NUMBER

1451588

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)
08/09/22	Kirk and Sue Sorensen [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/21/22	Rick and Susan Wehmueler [REDACTED] Visalia, CA 93291	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/21/22	Larry and Kaylene McGuire [REDACTED] Greenville, TN 37745	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/21/22	Charles Forsythe [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
08/29/22	Barbara Robinson [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Robinson's Interiors Flooring/Carpet	\$250.00		
SUBTOTAL \$ \$850.00						

Schedule A Summary

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

*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
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from July 1, 2022

CALIFORNIA **460**
FORM

through September 15, 2022

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

I.D. NUMBER

1451588

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)
08/29/2022	Michael Mayer OD [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor of Optometry Mayer & Shah OD	\$500.00		
08/31/2022	Bill and Mary Ann Landis [REDACTED] Hanford, CA 93230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00		
		<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				
		<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				
SUBTOTAL \$ \$600.00						

Schedule A Summary

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

*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 C
Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.

Statement covers period
from July 1, 2022

SCHEDULE C

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis _ Hanford City Council 2022

I.D. NUMBER
1451588

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)
08/10/22	Brittany Nielsen <i>W. Sacramento, ca 95821</i>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Brittany Mae Creative	Political Campaign Design (Signs, Door Hanger, Sticker)	\$1,000.00		
09/01/22	Gary Kazanjian <i>Sacramento, ca 95230</i>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kazanjian Photography	Campaign Photographs	\$250.00		
		<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 \$ \$1,250.00

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.).....

\$ 1,250.00

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

\$ _____

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.).....

TOTAL \$ \$1,250.00

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

Schedule E Payments Made

SCHEDULE E

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

Amounts may be rounded
to whole dollars.

Statement covers period
from July 1, 2022

through September 15, 2022

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I.D. NUMBER

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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

OFC 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
California Secretary of State [REDACTED] Sacramento, CA 95814	FIL		FPPC Form 410 Filing	\$50.00
Vista Print [REDACTED] Waltham, MA 02451	PRT		Campaign Yard Signs and Door Hangers	\$2,295.29
4 Pens.com [REDACTED] Boynton Beach, FL 33426	CMP		Campaign Pens	\$113.99

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

SUBTOTAL \$ 2,459.28

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 4,336.74
2. Unitemized payments made this period of under \$100.	\$ _____
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ _____
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 4,336.74

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT Mark Kairis - Hanford City Council 2022

Amounts may be rounded
to whole dollars.

Statement covers period
July 1, 2022
from _____
through September 15, 2022

SCHEDULE E (CONT.)
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I.D. NUMBER
1451588

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
Sign Ranch - Rod Johnson [REDACTED] Reedley, CA 93654	CMP		4' x 4' Campaign Signs	\$734.26
CAL Voter Guide - Budget Watchdog Newsletter [REDACTED] Torrance, CA 90505	LIT		Mailers	\$213.00
CAL Voter Guide - Election Digest [REDACTED] Torrance, CA 90505	LIT		Mailers	\$96.00
CAL Voter Guide [REDACTED] Torrance, CA 90505	LIT		Mailers	\$83.00
CAL Voter Guide - Senior Advocate [REDACTED] Torrance, CA 90505	LIT		Mailers	\$76.00

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

SUBTOTAL \$ \$1,202.26

FPPC Form 460 (Jan/2016)

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

www.fppc.ca.gov

