мајог Donor and Independent Expenditure Committee Campaign Statement		Date Stamp	CALIFORNIA 461			
SEE INSTRUCTIONS ON INVERSE	from throug	01/01/2023 06/30/2023	Date of election if applicable: (Month, Day, Year)	7728PM5:23	Page 1 of 2 For Official Use Only	
. Name and Address of Filer			3. Summary	tand to the total		
NAME OF FILER			(Amounts may be rounded to whole dollars	·) —		
Yvonne K. Ayers			Expenditures and contrib (including loans) of \$100 or	\$ 25,000.00		
RESIDENTIAL OR MAILING ADDRESS	(NO. ANI	O STREET)	made this period. (Part 5.)		\$ 23,000.00	
			2. Unitemized expenditures			
CITY	STATE	ZIP CODE	contributions (including load \$100 made this period	ns) under	\$_0.00	
RESPONSIBLE OFFICER (If filer is other than an individual)		DDE/DAYTIME PHONE	 3. Total expenditures and commade this period. (Add Line 4. Total expenditures and commade from prior statement. 	\$ 25,000.00		
2. Nature and Interests of Filer (Complete each applicable section.) A FILER WHO IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS			amount from Line 5 of last s filed. If this is the first states the calendar year, enter ze	statement ment for	\$ 0.00	
NAME OF EMPLOYER/BUSINESS BUSINESS I		BUSINESS INTERESTS	Total expenditures and co			
Retired		Retired	(including loans) made sind	ce		
ADDRESS OF EMPLOYER/BUSINESS		January 1 of the current ca (Add Lines 3 + 4.)	\$ 25,000.00			
A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE ENGAGED	HE BUSINESS ACT	IVITY IN WHICH IT IS			ng this statement. I have	
A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS			reviewed the statement and to the best of my knowledge the information contained herein 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.			
A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY			Executed On <u>07/13/2023</u> DATE	By SIGN RESPONSIB	NATURE OF INDIVIDUAL DONOR OR LE OFFICER, IF OTHER THAN AN INDIVIDUAL	
☐ Amendment (Explain):			*************************************	1000		

Major Donor and Independent Expenditure Committee Campaign Statement

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA / C1
from	01/01/2023	FORM 401
through .	06/30/2023	Page1of2

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Yvonne K. Ayers

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (If Other than Monetary Contribution or Loan)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATED TO THIS CANDIDATE, MEASURE, OR COMMITTEE
03/24/2023	Committee for a Safer Merced 9460 Tegner Road	Monetary Contribution Loan		Merced Vital City Services Protection Measure	25,000.00	25,000.00
	Hilmar, CA 95324 1458901	Non-Monetary Contribution Independent Expenditure		X SUPPORT ☐ OPPOSE		

SUBTOTAL \$

25,000.00