COVER PAGE Recipient Committee Date Stamp CALIFORNIA Campaign Statement **FORM Cover Page** FILED of $_{-}^{5}$ Page _1 Statement covers period Date of election if applicable: (Month, Day, Year) from $\frac{1}{1}$ JUL 1 3 2022 For Official Use Only through $\underline{6/30/2022}$ Redlands City Clerk SEE INSTRUCTIONS ON REVERSE 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: Officeholder, Candidate Controlled Committee ☐ Primarily Formed Ballot Measure Preelection Statement Quarterly Statement State Candidate Election Committee Semi-annual Statement Committee Special Odd-Year Report ○ Recall Termination Statement Controlled (Also file a Form 410 Termination) (Also Complete Part 5) Sponsored (Also Complete Part 6) Amendment (Explain below) General Purpose Committee Primarily Formed Candidate/ Sponsored Small Contributor Committee Officeholder Committee Political Party/Central Committee (Also Complete Part 7) I.D. NUMBER 3. Committee Information Treasurer(s) 1430386 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Dolores Armstead JENNA GUZMAN-LOWERY FOR REDLANDS CITY COUNCIL 2020 MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY ZIP CODE AREA CODE/PHONE San Bernardino CA 92407 CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY Redlands CA 92374 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY AREA CODE/PHONE CITY STATE ZIP CODE ZIP CODE STATE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 7/13/2022 Assistant Treasurer

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on .

Executed on _

FPPC Form 460 (Jan/2016))

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIFORNIA 460							
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Officeholder or Candidate Controlled Co	mmittee			6.	Primarily Formed Ballo	t Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE			.
JENNA GUZMAN LOWERY								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND	DISTRICT NUMB	BER IF APPLIC	CABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
CITY OF REDLANDS, CITY COUNCIL, DIST	TRICT 4							☐ OPPOSE
RESIDENT!AL/BUSINESS ADDRESS (NO. AND STREE	T) CITY Redlands	STATE CA	2IP 92376		Identify the controlling office	holder, candi	date, or state measure p	roponent, if any.
	Rediands	- C/1	74370		NAME OF OFFICEHOLDER, CA	NDIDATE, OR F	PROPONENT	
Related Committees Not Included in this not included in this statement that are controlled by y contributions or make expenditures on behalf of your	ou or are primai				OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUM	BER					l .	
NAME OF TREASURER	CONTRO	DLLED COMM		7.	Primarily Formed Cand officeholder(s) or candidate(s,	for which this	committee is primarily fo	rmed.
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HI	SUPPORT OPPOSE
	ZIP CODE		DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HI	SUPPORT
COMMITTEE NAME	I,D. NUM				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	
NAME OF TREASURER	☐ YE	S N			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)							L OFFOSE
CITY STATE	ZIP CODE	AREA CO	DE/PHONE		Atta	ch continuati	ion sheets if necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period from_7/1/2021

SUMMARY PAGE

· · · · · · · · · · · · · · · · · · ·	
hrough 12/31/2021	Page _3 of _5
	I.D. NUMBER

th SEE INSTRUCTIONS ON REVERSE NAME OF FILER JENNA GUZMAN-LOWERY FOR REDLANDS CITY COUNCIL 2020 1430386

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$\frac{0}{25,00}\$ \$\frac{25,00}{0}\$ \$\frac{25,00}{25,00}\$	\$\frac{0}{25.00}\$ \$\frac{25.00}{0}\$ \$\frac{25.00}{25.00}\$	1/1 through 6/30 7/1 to Date 20. Contributions Received \$\$ 21. Expenditures Made \$\$ \$
Expenditures Made 6. Payments Made	\$ \frac{97.30}{0} \$ \frac{97.30}{0} \frac{0}{0} \$ \frac{97.30}{0}	\$\frac{97.30}{0}\$ \$\frac{97.30}{0}\$ \[\begin{pmatrix} \text{97.30} \\ \text{97.30} \\ \text{97.30} \\ \text{97.30} \\ \text{97.30} \\ \text{97.30} \\ \qq \qquad \qquad	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	\$\frac{71.79}{25.00} 0 97.30 \$\frac{-0.51}\$ \$\frac{0}{0}\$	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. FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

	Δm	Amounts may be rounded				SCHEDULE B - PART 1					
Schedule B – Part 1 Loans Received	A	to whole dollars.					CALIFORNIA 460				
					from <u>7/1/2021</u>		FORW				
SEE INSTRUCTIONS ON REVERSE					through _12/31/2	021	Page <u>4</u>	of_5			
NAME OF FILER	W-N .			<u> </u>			I.D. NUMBER				
JENNA GUZMAN-LOWERY FOR REDLAN	DS CITY COUNCIL 2020						1430386				
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	I BALANCE AT	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE			
Jenna Guzman Lowery	Jenna Guzman Lowery			PAID \$	\$ 25.00	,% RATE	\$ <u>25.00</u>	\$ 25.00			
Redlands CA 92374		0	25.00	FORGIVEN	12/31/20	8	4/28/2022	PER ELECTION**			
TIND □ COM □ OTH □ PTY □ SCC		<u> </u>		•	DATE DUE	V	DATE INCURRED	φ			
				PAID				CALENDAR YEAR			
				\$	\$	% RATE	\$	\$			
				☐ FORGIVEN		RNIE		PER ELECTION**			
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$			
				PAID				CALENDAR YEAR			
				\$	\$	RATE	\$	\$			
				☐ FORGIVEN		KAIE		PER ELECTION**			
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$			
	S	SUBTOTALS \$	25.00	\$	\$ 25.00	\$	A consequence of the consequence	1			
Schedule B Summary						(Enter (e) on Sche	dule E, Line 3)				
Loans received this period (Total Column (b) plus unitemized loan	n of loss than \$100.)		•••••••••••	\$.00						
Loans paid or forgiven this period (Total Column (c) plus loans under \$10	***************************************		•••••	\$. 11	Contributor Codes ND – Individual				
(Include loans paid by a third party tha		dule A.)				c	OM – Recipient C	ommittee PTY or SCC)			
Net change this period. (Subtract Line Enter the net here and on the Summar	e 2 from Line 1.)			.NET \$.00	l F	OTH – Other (e.g., PTY – Political Part	business entity) ty			
	, 0:, ::::::::::::, =:::-					S	CC – Small Contri	butor Committee			

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

** If required.

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(May be a negative number)

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Amounts may be rounded to whole dollars.				Statement covers period from $\frac{1/1/2022}{\text{through}}$			CALIFORNIA 46 FORM Page 5 of 5 I.D. NUMBER		
JENNA GUZMAN-OWERY FOR REDLANDS CITY COUNCIL 2 CODES: If one of the following codes accurately describes compaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	s the payment, y MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and s POS postage, deli	munication: I appearant ies ating urvey resea very and mi	s ces	RA RF SA TE TR TR TS VO	D radio airtime am returned contrib L campaign worke L t.v. or cable airti C candidate travel S staff/spouse trav	payment. d production costs utions ers' salaries me and production l, lodging, and me vel, lodging, and m n committees of the	n costs als neals ne same candid	date/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPT	TON OF PAYMENT		AM	MOUNT PAID	
4		·							
* Payments that are contributions or independent expenditures must also be	summarized on Sche	dule D.				SUBTO	TAL \$		

1. Itemized payments made this period. (Include all Schedule E subtotals.).....\$

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