



POLITICAL COMMITTEE
CITY/TOWN OF Chandler
CAMPAIGN FINANCE REPORT
2012 August/November Regular Election

FOR OFFICE USE ONLY

RECEIVED

DEC -7 2012

CITY OF CHANDLER
 CITY CLERK

1. Elect Nora Ellen
 Full Name of Committee
883 N. Sicily Drive
 Address
Chandler 85226 Maricopa 480.496.7114
 City ZIP Code County Phone
 2. _____
 Sponsoring Organization or Candidate and office

 Name of Candidate and Office Sought (if applicable)

 E-Mail Address Fax #

3A. ID#
 C12-02

4. **REPORTING PERIOD** (Please check appropriate box) **DUE BETWEEN**
- January 31 Report - For Period of _____ * thru December 31, 2011 January 1, 2012 and January 31, 2012
- June 30 Report - For Period of January 1, 2012 thru May 31, 2012 June 1, 2012 and June 30, 2012
- Pre-Primary Election Report - For Period of June 1, 2012 thru August 16, 2012 August 17, 2012 and August 24, 2012
- Post-Primary Election Report - For Period of August 17, 2012 thru September 17, 2012 September 18, 2012 thru September 27, 2012
- Pre-General Election Report - For Period of September 18, 2012 thru October 25, 2012 October 26, 2012 and November 2, 2012
- Post-General Election Report - For Period of October 26, 2012 thru November 26, 2012 November 27, 2012 and December 6, 2012
- ** January 31, Report - For Period of November 27, 2012 thru December 31, 2013 January 1, 2014 and January 31, 2014

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		
5b Cash on Hand at the Beginning of this Reporting Period	0	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$10,564.00	\$10,564.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	\$10,564.00	\$10,564.00
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]	0	0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$125.69	\$125.69
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	\$10,438.31	\$10,438.31

*Insert date which is 21 days after date of last election (A.R.S. §16-913).
 **Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Nora Ellen for Chandler City Council
 3. Report covering period from 1/1/12 Thru 5/31/12

2. ID#

RECEIPTS		COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:			
(a) Individuals - more than \$25 (Total from Schedule A)		1,410.00	1,410.00
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)		.00	.00
(c) Political Committees (Total from Schedule B)		.00	.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]		1,410.00	1,410.00
(e) Refund of contributions (Total from Schedule F-2)		.00	.00
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		1,410.00	1,410.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		9,100.00	9,100.00
(b) All other loans (Total from Schedule C-1)		.00	.00
(c) Total Loans [add 5(a) and 5(b)]		9,100.00	9,100.00
6. In-kind contributions (Total from Schedule E)		54.00	54.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		.00	.00
8. Total Receipts [add 4(f), 5(c), 6, and 7]		10,564.00	10,564.00
QUALIFYING CONTRIBUTION RECEIPTS			
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2)		.00	.00
DISBURSEMENTS			
9. Expenditures for operating expenses (Total from Schedule D)		71.69	71.69
10. Independent Expenditures (Total from Schedule D-1)		54.00	54.00
11. Value of In-kind expenditures (Total from Schedule E)		.00	.00
12. Loans made by reporting committee (Total from Schedule D-2)		.00	.00
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		.00	.00
(b) Repayment of all other loans (Total from Schedule D-5)		.00	.00
(c) Total Loan Repayments [add 13(a) and 13(b)]		.00	.00
14. Transfers to other political committees (Total from Schedule D-6)		.00	.00
15. Any other disbursement (Total from Schedule D-7)		.00	.00
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]		71.69	71.69
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		.00	.00
18. Total disbursements [subtract line 17 from line 16]		71.69	71.69
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		125.69	125.69

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Nora Ellen

Type or Print Name of Treasurer

Nora Ellen

12/6/2012

Signature of Treasurer or Candidate or Designating Individual

Date

POLITICAL COMMITTEE
CITY/TOWN OF Chandler
CAMPAIGN FINANCE REPORT
2012 August/November Regular Election

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JUL 2 2012

CITY OF CHANDLER
CITY CLERK

1. Nora Ellen for Chandler City Council
Full Name of Committee:
883 N. Sicily Drive
Address:
Chandler 85224 Maricopa 480-650-5294
City ZIP Code County Phone

2. Nora Ellen, Chandler City Council
Sponsoring Organization or Candidate and office:

Name of Candidate and Office Sought (if applicable):
ElectNoraEllen@gmail.com
E-Mail Address Fax #

3A. ID#

C12-02

4. **REPORTING PERIOD** (Please check appropriate box) **DUE BETWEEN**

January 31 Report - For Period of Nov 23 2011 thru December 31, 2011 January 1, 2012 and January 31, 2012

June 30 Report - For Period of January 1, 2012 thru May 31, 2012 June 1, 2012 and June 30, 2012

Pre-Primary Election Report - For Period of June 1, 2012 thru August 8, 2012 August 9, 2012 and August 16, 2012

Post-Primary Election Report - For Period of August 9, 2012 thru September 17, 2012 September 18, 2012 thru September 27, 2012

Pre-General Election Report - For Period of September 18, 2012 thru October 17, 2012 October 18, 2012 and October 25, 2012

Post-General Election Report - For Period of October 18, 2012 thru November 26, 2012 November 27, 2012 and December 6, 2012

**January 31, Report - For Period of November 27, 2012 thru December 31, 2013 January 1, 2014 and January 31, 2014

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)	-0-	-0-
5b Cash on Hand at the Beginning of this Reporting Period	-0-	-0-
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	10,564.00	10,564.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	10,564.00	10,564.00
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]	-0-	-0-
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	71.69	71.69
7 Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	10,492.31	10,492.31

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Nora Ellen for Chandler City Council
 3. Report covering period from 1/1/12 Thru 5/31/12

2. ID#

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$25 (Total from Schedule A)	1,410.00	1,410.00
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	.00	.00
(c) Political Committees (Total from Schedule B)	.00	.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	1,410.00	1,410.00
(e) Refund of contributions (Total from Schedule F-2)	.00	.00
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	1,410.00	1,410.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	9,100.00	9,100.00
(b) All other loans (Total from Schedule C-1)	.00	.00
(c) Total Loans [add 5(a) and 5(b)]	9,100.00	9,100.00
6. In-kind contributions (Total from Schedule E)	54.00	54.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	.00	.00
8. Total Receipts [add 4(f), 5(c), 6, and 7]	10,564.00	10,564.00
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).	.00	.00
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	71.69	71.69
10. Independent Expenditures (Total from Schedule D-1)	.00	.00
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16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	71.69	71.69
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	.00	.00
18. Total disbursements [subtract line 17 from line 16]	71.69	71.69
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	.00	.00

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.	
Nora Ellen	
Type or Print Name of Treasurer	
<i>Nora Ellen</i>	6/29/12
Signature of Treasurer or Candidate or Designating Individual	Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Nora Ellen for Chandler City Council

3. Report covering period from 1/1/12 thru 5/31/12

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Hays</td> <td>Garry</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1702 E. Highland Avenue, Suite 204</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85016</td> </tr> <tr> <td colspan="2">OCCUPATION</td> <td>EMPLOYER</td> </tr> <tr> <td colspan="2">Attorney</td> <td>Self-employed</td> </tr> </table>	LAST	FIRST	MI	Hays	Garry		STREET ADDRESS			1702 E. Highland Avenue, Suite 204			CITY	STATE	ZIP	Phoenix	AZ	85016	OCCUPATION		EMPLOYER	Attorney		Self-employed	04/18/2012	430.00	430.00
LAST	FIRST	MI																										
Hays	Garry																											
STREET ADDRESS																												
1702 E. Highland Avenue, Suite 204																												
CITY	STATE	ZIP																										
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b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Wagoner</td> <td>Linda</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">8267 S. Pecan Grove Circle</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Tempe</td> <td>AZ</td> <td>85284</td> </tr> <tr> <td colspan="2">OCCUPATION</td> <td>EMPLOYER</td> </tr> <tr> <td colspan="2">Real Estate Investments</td> <td>Wagoner Properties</td> </tr> </table>	LAST	FIRST	MI	Wagoner	Linda		STREET ADDRESS			8267 S. Pecan Grove Circle			CITY	STATE	ZIP	Tempe	AZ	85284	OCCUPATION		EMPLOYER	Real Estate Investments		Wagoner Properties	04/27/2012	150.00	150.00
LAST	FIRST	MI																										
Wagoner	Linda																											
STREET ADDRESS																												
8267 S. Pecan Grove Circle																												
CITY	STATE	ZIP																										
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c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Mesnard</td> <td>Javan</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1427 W. Homestead Court</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Chandler</td> <td>AZ</td> <td>85226</td> </tr> <tr> <td colspan="2">OCCUPATION</td> <td>EMPLOYER</td> </tr> <tr> <td colspan="2">Investor</td> <td>Self-employed</td> </tr> </table>	LAST	FIRST	MI	Mesnard	Javan		STREET ADDRESS			1427 W. Homestead Court			CITY	STATE	ZIP	Chandler	AZ	85226	OCCUPATION		EMPLOYER	Investor		Self-employed	05/13/2012	430.00	430.00
LAST	FIRST	MI																										
Mesnard	Javan																											
STREET ADDRESS																												
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Investor		Self-employed																										
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Hamilton</td> <td>James</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2363 E. Eileen Place</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Chandler</td> <td>AZ</td> <td>85286</td> </tr> <tr> <td colspan="2">OCCUPATION</td> <td>EMPLOYER</td> </tr> <tr> <td colspan="2">Consultant</td> <td>Self-employed</td> </tr> </table>	LAST	FIRST	MI	Hamilton	James		STREET ADDRESS			2363 E. Eileen Place			CITY	STATE	ZIP	Chandler	AZ	85286	OCCUPATION		EMPLOYER	Consultant		Self-employed	05/31/2012	400.00	400.00
LAST	FIRST	MI																										
Hamilton	James																											
STREET ADDRESS																												
2363 E. Eileen Place																												
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LAST	FIRST	MI																										
STREET ADDRESS																												
CITY	STATE	ZIP																										
OCCUPATION		EMPLOYER																										
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A)		1,410.00	1,410.00																								

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

1. Committee Name Nora Ellen for Chandler City Council

2. ID #

3. Report covering period from 1/1/12 thru 5/31/12

4. Aggregate Total of Contributions of \$25 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
None			
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A] -0-		6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	-0-

*If contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID #

1. Committee Name Nora Ellen for Chandler City Council

3. Report covering period from 1/1/12 thru 5/31/12

4		CONTRIBUTIONS	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
		IDENTITY OF CONTRIBUTOR AND DATE RECEIVED		
4a	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	None	-0-	-0-
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B <i>[If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]</i>		-0-	-0-

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Nora Ellen for Chandler City Council	2. ID#		
3.	Report covering period from <u>1/1/12</u> thru <u>5/31/12</u>			
4.	LOANS MADE OR GUARANTEED BY CANDIDATE	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS FROM WHOM RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP Nora Ellen	05/31/2012	9,100.00	9,100.00
	883 Sicily Drive, Chandler, AZ 85224			
	DESCRIPTION Loan from self for campaign			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]		9,100.00	9,100.00

OTHER LOANS

SCHEDULE C1

1. Committee Name Nora Ellen for Chandler City Council

2. ID#

3. Report covering period from 1/1/12 thru 5/31/12

4	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# <p style="text-align: center; font-size: large;">None</p>			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A]	-0-	-0-	

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#

1. Committee Name Nora Ellen for Chandler City Council

3. Report covering period from 1/1/12 thru 5/31/12

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE NAME, ADDRESS, CITY, STATE AND ZIP Bashas, 1920 W. Chandler Blvd, Chandler, AZ 85224 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Stamps	04/17/2012	9.00
b.	NAME, ADDRESS, CITY, STATE AND ZIP OfficeMax, 2700 W. Chandler Blvd., Chandler, AZ 85224 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Graphic Design	05/18/12	33.53
c.	NAME, ADDRESS, CITY, STATE AND ZIP Albertsons, 4060 W. Ray Road, Chandler, AZ 85226 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Utensils & plates for fundraising	05/28/2012	11.97
d.	NAME, ADDRESS, CITY, STATE AND ZIP Federal Express, 1780 W. Chandler Blvd., Chandler, AZ 85224 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Photocopies	04/28/2012	17.19
e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A)		71.69

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

2. ID #

1. Committee Name Nora Ellen for Chandler City Council

3. Report covering period from 1/1/12 thru 5/31/12

4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED			
4a.	NAME, ADDRESS, CITY, STATE AND ZIP <p style="text-align: center;">None</p> PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		-0-
4b.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]	-0-	

*SEE A.R.S. § 16-901(14).

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Nora Ellen 6/29/2012
Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

2. ID #

1. Committee Name Nora Ellen for Chandler City Council

3. Report covering period from 1/1/12 thru 5/31/12

4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# None		-0-
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		-0-

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

1. Committee Name Nora Ellen for Chandler City Council

2. ID #

3. Report covering period from 1/1/12 thru 5/31/12

REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP None		-0-
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A]			
* Includes return of contributions made by reporting committee			-0-

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Nora Ellen for Chandler City Council

2. ID#

3. Report covering period from 1/1/12 thru 5/31/12

REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP None		-0-
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]			-0-

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

1. Committee Name Nora Ellen for Chandler City Council

2. ID#

3. Report covering period from 1/1/12 thru 5/31/12

4	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		-0-
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		-0-

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name Nora Ellen for Chandler City Council

2. ID#

3. Report covering period from 1/1/12 thru 5/31/12

4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		-0-
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		-0-

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name Nora Ellen for Chandler City Council

2. ID #

3. Report covering period from 1/1/12 thru 5/31/12

ANY OTHER DISBURSEMENTS		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			
a.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p style="text-align: center; font-size: 1.2em;">None</p> <p>DESCRIPTION</p>		-0-
b.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		
c.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		
d.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		
e.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]			-0-

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Nora Ellen for Chandler City Council

2. ID #

3. Report covering period from 1/1/12 thru 5/31/12

4	IN-KIND CONTRIBUTIONS and EXPENDITURES	DATE	FAIR MARKET VALUE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive Chandler, AZ 85224 DESCRIPTION Thank You notes OCCUPATION Real estate	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/> EMPLOYER Keller-Williams	04/14/2012 5.00
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Teri Ferguson 1419 W. Homestead Court Chandler, AZ 85286 DESCRIPTION Copies of Petition OCCUPATION	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/> EMPLOYER	04/12/2012 25.00
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Linda Cortright 421 S. Robins Way Chandler, AZ 85225 DESCRIPTION Copies of Petition OCCUPATION License & Compliance Administrator	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/> EMPLOYER Van Tuij Group, Inc.	5/19/12 5.00
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive, Chandler AZ 85224 DESCRIPTION Business cards, Nora Ellen OCCUPATION Real estate	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/> EMPLOYER Keller-Williams	04/30/12 3.00
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E (If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A)		
6.	ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E (If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A)		

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Nora Ellen for Chandler City Council

2. ID#

3. Report covering period from 1/1/12 thru 5/31/12

4	IN-KIND CONTRIBUTIONS and EXPENDITURES	DATE	FAIR MARKET VALUE						
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN								
4a.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; font-size: small;">NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive Chandler, AZ 85224</td> <td style="width: 20%; font-size: small;">CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="font-size: small;">DESCRIPTION Labels, Nora Ellen</td> </tr> <tr> <td style="font-size: small;">OCCUPATION Real Estate</td> <td style="font-size: small;">EMPLOYER Keller-Williams</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive Chandler, AZ 85224	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION Labels, Nora Ellen		OCCUPATION Real Estate	EMPLOYER Keller-Williams	05/15/2012	3.00
NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive Chandler, AZ 85224	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION Labels, Nora Ellen									
OCCUPATION Real Estate	EMPLOYER Keller-Williams								
4b.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; font-size: small;">NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive Chandler, AZ 85224</td> <td style="width: 20%; font-size: small;">CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="font-size: small;">DESCRIPTION Printer ink</td> </tr> <tr> <td style="font-size: small;">OCCUPATION Real Estate</td> <td style="font-size: small;">EMPLOYER Keller-Williams</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive Chandler, AZ 85224	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION Printer ink		OCCUPATION Real Estate	EMPLOYER Keller-Williams	05/16/2012	13.00
NAME, ADDRESS, CITY, STATE, ZIP AND ID# Nora Ellen 883 N. Sicily Drive Chandler, AZ 85224	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION Printer ink									
OCCUPATION Real Estate	EMPLOYER Keller-Williams								
c.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; font-size: small;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="width: 20%; font-size: small;">CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="font-size: small;">DESCRIPTION</td> </tr> <tr> <td style="font-size: small;">OCCUPATION</td> <td style="font-size: small;">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION									
OCCUPATION	EMPLOYER								
d.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; font-size: small;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="width: 20%; font-size: small;">CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="font-size: small;">DESCRIPTION</td> </tr> <tr> <td style="font-size: small;">OCCUPATION</td> <td style="font-size: small;">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION									
OCCUPATION	EMPLOYER								
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E (If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A)		54.00						
6.	ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E (If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A)		-0-						

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Nora Ellen for City Council

2. ID#

3. Report covering period from 1/1/12 thru 5/31/12

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		-0-
	DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A]		-0-

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

1. Committee Name Nora Ellen for Chandler City Council

2. ID #

3. Report covering period from 1/1/12 thru 5/31/12

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE		
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		-0-
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]			-0-

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name Nora Ellen for Chandler City Council

2. ID #

3. Report covering period from 1/1/12 thru 5/31/12

4	DEBTS AND OBLIGATIONS		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED					
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	None		-0-	-0-	-0-	-0-
	DESCRIPTION OF DEBT					
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT					
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT					
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT					
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT					
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [Transfer total to Detail Summary Page Line 19, Column A]					-0-