

POLITICAL COMMITTEE
CITY OF Chandler
CAMPAIGN FINANCE REPORT
2016 August/November Regular Election

FOR OFFICE USE ONLY

RECEIVED

SEP 30 2016

CHANDLER CITY CLERK

1. Elect Nora Ellen

Full Name of Committee
 883 N. Sicily Dr.

Address
 Chandler, AZ 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#

4. REPORTING PERIOD (Please check appropriate box)

DUE BETWEEN

- January 31 Report - For Period of _____ * thru December 31, 2015 January 1, 2016 and February 1, 2016
- June 30 Report - For Period of January 1, 2016 thru May 31, 2016 June 1, 2016 and June 30, 2016
- Pre-Primary Election Report - For Period of June 1, 2016 thru August 18, 2016 August 19, 2016 and August 26, 2016
- Post-Primary Election Report - For Period of August 19, 2016 thru September 19, 2016 September 20, 2016 and September 29, 2016
- Pre-General Election Report - For Period of September 20, 2016 thru October 27, 2016 October 28, 2016 and November 4, 2016
- Post-General Election Report - For Period of October 28, 2016 thru November 28, 2016 November 29, 2016 and December 8, 2016
- **January 31, Report - For Period of November 29, 2016 thru December 31, 2017 January 1, 2018 and January 31, 2018

| 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 | \$70,596.32 | |
| 5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8) | \$8,360.00 | \$91,764.58 |
| 5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B] | \$78,956.32 | \$91,764.58 |
| 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] | | |
| 6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18) | \$6,389.55 | \$39,814.58 |
| 7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d] | \$72,566.77 | \$72,566.77 |

*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: Elect Nora Ellen
 3. Report covering period from 8/19/2016 Thru 9/19/2016

| |
|--------|
| 2. ID# |
|--------|

| RECEIPTS | COLUMN A THIS PERIOD | COLUMN B CAMPAIGN TO DATE |
|-----------------------------------------------------------------------------------------------|-------------------------|------------------------------|
| 4. Contributions other than loans and in-kind: | | |
| (a) Individuals - more than \$50 (Total from Schedule A) | \$8,360.00 | \$83,760.00 |
| (b) Individuals - aggregate \$50 or less (Total from Schedule A-1) | \$0 | \$27.00 |
| (c) Political Committees (Total from Schedule B) | \$0 | \$5,650.00 |
| (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)] | | |
| (e) Refund of contributions (Total from Schedule F-2) | | |
| (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)] | \$8,360.00 | \$89,437.00 |
| 5. (a) Loans made or guaranteed by candidate (Total from Schedule C) | | |
| (b) All other loans (Total from Schedule C-1) | | |
| (c) Total Loans [add 5(a) and 5(b)] | | |
| 6. In-kind contributions (Total from Schedule E) | | \$2,327.58 |
| 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1) | | |
| 8. Total Receipts [add 4(f), 5(c), 6, and 7] | \$8,360.00 | \$91,764.58 |
| DISBURSEMENTS | | |
| 9. Expenditures for operating expenses (Total from Schedule D) | \$6,389.55 | \$35,270.44 |
| 10. Independent Expenditures (Total from Schedule D-1) | | |
| 11. Value of In-kind expenditures (Total from Schedule E) | | \$2,327.58 |
| 12. Loans made by reporting committee (Total from Schedule D-2) | | |
| 13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) | | |
| (b) Repayment of all other loans (Total from Schedule D-5) | | |
| (c) Total Loan Repayments [add 13(a) and 13(b)] | | |
| 14. Transfers to other political committees (Total from Schedule D-6) | | |
| 15. Any other disbursement (Total from Schedule D-7) | | \$2,216.56 |
| 16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15] | | |
| 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) | | |
| 18. Total disbursements [subtract line 17 from line 16] | \$6,389.55 | \$39,814.58 |
| 19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3) | | |

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 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. | |
| | |
| Type or Print Name of Treasurer <u>Nora Ellen</u> | 9/30/2016 |
| Signature of Treasurer or Candidate or Designating Individual | Date |

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

1. Committee Name Elect Nora Ellen

3. Report covering period from August 19, 2016 thru September 19, 2016

| 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 colspan="3">Huffman, Richard</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">420 Sunny Brook</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Branson, MO 65616</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Developer</td> <td colspan="2">HCW</td> </tr> </table> | LAST | FIRST | MI | Huffman, Richard | | | STREET ADDRESS | | | 420 Sunny Brook | | | CITY | STATE | ZIP | Branson, MO 65616 | | | OCCUPATION | EMPLOYER | | Developer | HCW | | 8/22/2016 | \$250.00 | \$250.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Huffman, Richard | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 420 Sunny Brook | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Branson, MO 65616 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Developer | HCW | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Sellers, David</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">6815 N. Joshua Tree Ln.</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">PV, AZ 85253</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Self-employed</td> <td colspan="2">Self-employed</td> </tr> </table> | LAST | FIRST | MI | Sellers, David | | | STREET ADDRESS | | | 6815 N. Joshua Tree Ln. | | | CITY | STATE | ZIP | PV, AZ 85253 | | | OCCUPATION | EMPLOYER | | Self-employed | Self-employed | | 8/25/2016 | \$500.00 | \$500.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sellers, David | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6815 N. Joshua Tree Ln. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PV, AZ 85253 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Self-employed | Self-employed | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Lund, John</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">P.O. Box 86069</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, AZ 85080</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Self-Employed</td> <td colspan="2">Self-Employed</td> </tr> </table> | LAST | FIRST | MI | Lund, John | | | STREET ADDRESS | | | P.O. Box 86069 | | | CITY | STATE | ZIP | Phoenix, AZ 85080 | | | OCCUPATION | EMPLOYER | | Self-Employed | Self-Employed | | 8/25/2016 | \$500.00 | \$500.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lund, John | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| P.O. Box 86069 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phoenix, AZ 85080 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Self-Employed | Self-Employed | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Withey, Michael</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2525 E. Arizona Baltimore Cir.</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, AZ 85016</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Attorney</td> <td colspan="2">Withey Morris</td> </tr> </table> | LAST | FIRST | MI | Withey, Michael | | | STREET ADDRESS | | | 2525 E. Arizona Baltimore Cir. | | | CITY | STATE | ZIP | Phoenix, AZ 85016 | | | OCCUPATION | EMPLOYER | | Attorney | Withey Morris | | 8/25/2016 | \$400.00 | \$400.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Withey, Michael | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2525 E. Arizona Baltimore Cir. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phoenix, AZ 85016 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Attorney | Withey Morris | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| e. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Bardwell, Fanny</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2181 E La Vieve Ln</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Tempe, AZ 85284</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Homemaker</td> <td colspan="2"></td> </tr> </table> | LAST | FIRST | MI | Bardwell, Fanny | | | STREET ADDRESS | | | 2181 E La Vieve Ln | | | CITY | STATE | ZIP | Tempe, AZ 85284 | | | OCCUPATION | EMPLOYER | | Homemaker | | | 8/22/2016 | \$5,000.00 | \$5,000.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bardwell, Fanny | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2181 E La Vieve Ln | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tempe, AZ 85284 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Homemaker | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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] | | | | | | | | | | | | | | | | | | | | | | | | | | | |

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

| |
|--------|
| 2. ID# |
|--------|

1. Committee Name Elect Nora Ellen

3. Report covering period from August 19, 2016 thru September 19, 2016

| 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 colspan="3">Baugh, Adam</td> </tr> <tr> <td colspan="3">STREET ADDRESS 4062 E Washington Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Gilbert, AZ 85234</td> </tr> <tr> <td>OCCUPATION Attorney</td> <td colspan="2">EMPLOYER Withey Morris</td> </tr> </table> | LAST | FIRST | MI | Baugh, Adam | | | STREET ADDRESS 4062 E Washington Ave | | | CITY | STATE | ZIP | Gilbert, AZ 85234 | | | OCCUPATION Attorney | EMPLOYER Withey Morris | | 8/25/2016 | \$200.00 | \$200.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | |
| Baugh, Adam | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS 4062 E Washington Ave | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | |
| Gilbert, AZ 85234 | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION Attorney | EMPLOYER Withey Morris | | | | | | | | | | | | | | | | | | | | | |
| b. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Graff, Ben</td> </tr> <tr> <td colspan="3">STREET ADDRESS 4537 E Angela Drive</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, AZ 85032</td> </tr> <tr> <td>OCCUPATION Attorney</td> <td colspan="2">EMPLOYER Withey Morris</td> </tr> </table> | LAST | FIRST | MI | Graff, Ben | | | STREET ADDRESS 4537 E Angela Drive | | | CITY | STATE | ZIP | Phoenix, AZ 85032 | | | OCCUPATION Attorney | EMPLOYER Withey Morris | | 8/25/2016 | \$150.00 | \$150.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | |
| Graff, Ben | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS 4537 E Angela Drive | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | |
| Phoenix, AZ 85032 | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION Attorney | EMPLOYER Withey Morris | | | | | | | | | | | | | | | | | | | | | |
| c. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Hays, Garry</td> </tr> <tr> <td colspan="3">STREET ADDRESS 2198 e camelback rd</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, AZ 85016</td> </tr> <tr> <td>OCCUPATION Attorney</td> <td colspan="2">EMPLOYER Self Employed</td> </tr> </table> | LAST | FIRST | MI | Hays, Garry | | | STREET ADDRESS 2198 e camelback rd | | | CITY | STATE | ZIP | Phoenix, AZ 85016 | | | OCCUPATION Attorney | EMPLOYER Self Employed | | 8/25/2016 | \$250.00 | \$250.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | |
| Hays, Garry | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS 2198 e camelback rd | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | |
| Phoenix, AZ 85016 | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION Attorney | EMPLOYER Self Employed | | | | | | | | | | | | | | | | | | | | | |
| d. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Kampf, Robert</td> </tr> <tr> <td colspan="3">STREET ADDRESS 2481 E Bellerive PL</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Chandler, AZ 85249</td> </tr> <tr> <td>OCCUPATION Consultant</td> <td colspan="2">EMPLOYER Self Employed</td> </tr> </table> | LAST | FIRST | MI | Kampf, Robert | | | STREET ADDRESS 2481 E Bellerive PL | | | CITY | STATE | ZIP | Chandler, AZ 85249 | | | OCCUPATION Consultant | EMPLOYER Self Employed | | 8/29/2016 | \$60.00 | \$60.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | |
| Kampf, Robert | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS 2481 E Bellerive PL | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | |
| Chandler, AZ 85249 | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION Consultant | EMPLOYER Self Employed | | | | | | | | | | | | | | | | | | | | | |
| e. | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Colebrook, Christopher</td> </tr> <tr> <td colspan="3">STREET ADDRESS 549 Lakeshore Road West</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Oakville, Ontario, Canada L6K 1G6</td> </tr> <tr> <td>OCCUPATION Retired</td> <td colspan="2">EMPLOYER</td> </tr> </table> | LAST | FIRST | MI | Colebrook, Christopher | | | STREET ADDRESS 549 Lakeshore Road West | | | CITY | STATE | ZIP | Oakville, Ontario, Canada L6K 1G6 | | | OCCUPATION Retired | EMPLOYER | | 8/24/2016 | \$100.00 | \$100.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | |
| Colebrook, Christopher | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS 549 Lakeshore Road West | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | |
| Oakville, Ontario, Canada L6K 1G6 | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION Retired | 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] | | | | | | | | | | | | | | | | | | | | | |

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

1. Committee Name Elect Nora Ellen

3. Report covering period from August 19, 2016 thru September 19, 2016

| 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" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">Seger, Shirley</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">21823 N. Ingram Ct.</td> </tr> <tr> <td colspan="3">CITY STATE ZIP</td> </tr> <tr> <td colspan="3">Maricopa, AZ 85138</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>CEO</td> <td colspan="2">XP Media</td> </tr> </table> | LAST | FIRST | MI | Seger, Shirley | | | STREET ADDRESS | | | 21823 N. Ingram Ct. | | | CITY STATE ZIP | | | Maricopa, AZ 85138 | | | OCCUPATION | EMPLOYER | | CEO | XP Media | | 8/19/2016 | \$100.00 | \$100.00 |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Seger, Shirley | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21823 N. Ingram Ct. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY STATE ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Maricopa, AZ 85138 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CEO | XP Media | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. | <table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">Unknown</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">CITY STATE ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table> | LAST | FIRST | MI | Unknown | | | STREET ADDRESS | | | CITY STATE ZIP | | | OCCUPATION | EMPLOYER | | 8/31/2016 | \$850.00 | \$850.00 | | | | | | | | | |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unknown | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY STATE ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. | <table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">CITY STATE ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table> | LAST | FIRST | MI | STREET ADDRESS | | | CITY STATE ZIP | | | OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY STATE ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. | <table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">CITY STATE ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table> | LAST | FIRST | MI | STREET ADDRESS | | | CITY STATE ZIP | | | OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY STATE ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| e. | <table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">CITY STATE ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table> | LAST | FIRST | MI | STREET ADDRESS | | | CITY STATE ZIP | | | OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | |
| 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] | | \$8,360 | | | | | | | | | | | | | | | | | | | | | | | | | |

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

| |
|--------|
| 2. ID# |
|--------|

1. Committee Name Elect Nora Ellen

3. Report covering period from August 19, 2016 thru September 19, 2016

| 4 | EXPENDITURES | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------|
| NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE | | | |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP Data Orbital P.O. 1733 Higley, AZ 85235 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Phone Services | 8/22/2016 8/23/2016 9/6/2016 9/6/2016 | \$471.41 \$167.00 \$320.72 \$332.51 |
| 4b. | NAME, ADDRESS, CITY, STATE AND ZIP Hobby Lobby Chandler, AZ 85226 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Supplies | 8/29/2016 | \$10.77 |
| 4c. | NAME, ADDRESS, CITY, STATE AND ZIP USPS Chandler, AZ 85225 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Stamps | 8/30/2016 | \$10.55 |
| 4d. | NAME, ADDRESS, CITY, STATE AND ZIP Michael Burns 944 S. Goldfield Rd Apache Junction, AZ DESCRIPTION OF ITEMS OR SERVICES PURCHASED Sign Removal | 8/31/2016 | \$50.00 |
| 4e. | NAME, ADDRESS, CITY, STATE AND ZIP Qgiv 53 Lake Morton Dr. Lakeland, FL 33801 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Program Fees | 9/2/2016 | \$85.76 |
| 4f. | NAME, ADDRESS, CITY, STATE AND ZIP Premier Graphics 414 W. Claredon Ave. Phoenix AZ 85019 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Mailers | 9/6/2016 | \$347.16 \$646.56 \$2,417.73 |
| 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] | | |

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#

1. Committee Name Elect Nora Ellen

3. Report covering period from August 19, 2016 thru September 19, 2016

| 4 | EXPENDITURES | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|
| | NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE | | |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP Connect Strategic 4756 E Lavendar Ln. Phoenix, AZ 85044 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Marketing | 9/6/2016 | \$1,282.38 |
| 4b. | NAME, ADDRESS, CITY, STATE AND ZIP Jonathan Eberle 2211 W. Germann Rd. Chandler, AZ 85286 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Sign Removal | 9/12/2016 8/27/2016 | \$50.00 \$100.00 |
| 4c. | NAME, ADDRESS, CITY, STATE AND ZIP Jeff Weninger for AZ 1360 W. Camelia Chandler, Az 85286 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Reimbursement for volunteer party food expenses | 9/6/2016 | \$97.00 |
| 4d. | NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED | | |
| 4e. | NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED | | |
| 4f. | 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] | | \$6,389.55 |

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