COMMITTEE INFORMATION (re

Committee Information:	Committee Name:	
TE INFORMATION (only i	f filing as a candidate committee):	
Office Sought.	☐ Statewide Office:	
	☐ County Office:	☐ City/Town Office:

REPORTING PERIOD	REPORT DUE
2016 4 th Quarter Report: October 28, 2016 to December 31, 2016	January 1, 2017 to January 15, 2017
2017 March Pre-Election Report (Local Only): January 1, 2017 to February 25, 2017	February 26, 2017 to March 4, 2017
2017 1st Quarter Report (Local Only): February 26, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
2017 1st Quarter Report: January 1, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
2017 May Pre-Election Report (Local Only): April 1, 2017 to April 29, 2017	April 30 , 2017 to May 6, 2017
2017 2 nd Quarter Report (Local Only): April 30, 2017 to June 30, 2017	July 1, 2017 to July 15, 2017
2017 2 nd Quarter Report: April 1, 2017 to June 30, 2017	July 1, 2017 to July 15, 2017
2017 August Pre-Election Report (Local Only): July 1, 2017 to August 12, 2017	August 13, 2017 to August 19, 2017
2017 3 rd Quarter Report (Local Only): August 13, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
2017 3 rd Quarter Report: July 1, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
2017 October Pre-Election Report (Local Only): October 1, 2017 to October 21, 2017	October 22, 2017 to October 28, 2017
2017 4 th Quarter Report (Local Only): October 22, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
2017 4 th Quarter Report: October 1, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
2018 March Pre-Election Report (Local Only): January 1, 2018 to February 24, 2018	February 25, 2018 to March 3, 2018
2018 1st Quarter Report (Local Only): February 25, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
2018 1st Quarter Report: January 1, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
2018 May Pre-Election Report (Local Only): April 1, 2018 to April 28, 2018	April 29 , 2018 to May 7, 2018*
2018 2 nd Quarter Report (Local Only): April 29, 2018 to June 30, 2018	July 1, 2018 to July 16, 2018*
2018 2 nd Quarter Report: April 1, 2018 to June 30, 2018	July 1, 2018 to July 16, 2018*
2018 August Pre-Election Report: July 1, 2018 to August 11, 2018	August 12, 2018 to August 20, 2018*
2018 3 rd Quarter Report: August 12, 2018 to September 30, 2018	October 1, 2018 to October 15, 2018
2018 October Pre-Election Report: October 1, 2018 to October 20, 2018	October 21, 2018 to October 29, 2018*
2018 4 th Quarter Report: October 21, 2018 to December 31, 2018	January 1, 2019 to January 15, 2019
Final Campaign Finance Report Prior to Committee Termination	End of Previous Period through Today's Date

*Effective April 15, 2018, reporting deadline extended to next business day. A.R.S. §§ 1-243(A) and 1-303.

FINANCIAL SUMMARY (required):

	Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a)	Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)		
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)		
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)		
(d)	= Balance at close of reporting period		
	Check here if <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must be co	mpleted, but only this co	ver page need be filed.



SUMMARY OF RECEIPTS (Schedule A):

,			
	Receipts	Cash	Equity
1.	Monetary Contributions Received		
-	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
	(c) Candidate Committees		
	(d) Political Action Committees		
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Monies (Candidate Committees Only)		
	(j) Monetary Contributions Subtotal (add 1(a) through 1(i))		
-	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))		
2.	Loans		
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
3.	Rebates and Refunds Received		
4.	Interest Accrued on Committee Monies		
5.	In-Kind Contributions Received		
	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
	(c) Candidate Committees		
	(d) Political Action Committees		
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12.	Miscellaneous Receipts		
13.	Total Receipts (cash: add 1(l), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)		



SUMMARY OF DISBURSEMENTS (Schedule B):

/			
	Disbursements	Cash	Equity
/ <u>1.</u>	Disbursements for Operating Expenses		
2.	Contributions Made		
	(a) Candidate Committees		
-	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
-	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
-	(h) Contribution Refunds Provided to the Reporting Committee		
-	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3.	Loans		
-	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
-	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(j) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
11.	Reimbursements Made		
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements	1	
15.			
	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)		
\	V CONTRACTOR OF THE CONTRACTOR		



MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(1)(a)

	Individ	dual Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				

 * If contributions of \$50 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

Schedule A(1)(a), page ____ of ____

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from Individuals - \$50 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

*If contributions of more than \$50 are listed on Schedule A(1)(a), do not include them on Schedule A(1)(b).



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

	Candidate Committee	ee Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
3	Street Address					
J	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name	l				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed	_		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Enter total only if last page of schedule					

Schedule A(1)(c), page ____ of ____



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

Political Action	Committee Contributor	r Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Re	ceived			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Re	eceived			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Re	eceived			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Re	eceived			
Committee Name					
Street Address					
City	State	ZIP			
	Date Contribution Re				
	Committee Name Street Address City Committee ID Number Committee ID Number Committee ID Number Committee Name Street Address City Committee Name Street Address City Committee ID Number Committee ID Number Committee ID Number Committee Name Street Address City Committee Name Street Address City Committee Name	Committee Name Street Address City State Committee ID Number Date Contribution Research Committee Name Street Address City State Committee Name Street Address City State Committee ID Number Date Contribution Research Street Address City State Committee Name Street Address City State Committee ID Number Date Contribution Research Street Address City State Committee ID Number Date Contribution Research Committee Name	Street Address City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address Street Address	Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received	Political Action Committee Contributor Information Amount Received Amount this Reporting Period Committee Name Sizest Address City State Committee ID Number Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Sized Address City Sale Zip Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number Date Contribution Received Committee ID Number Committee ID Number

Schedule A(1)(d), page ____ of ____



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

/						
	Political Party Co	ntributor Informat	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	l ed			
	Committee Name	<u> </u>				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	l ed			
	Committee Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u>I</u> ed			
	Committee Name	1				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	I ed			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	' line 1(e))				

Schedule A(1)(e), page ____ of ____



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

/						
	Partnership Cor	tributor Information	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address	Address				
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Partnership Name					
	Street Address					
5			,			
J	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts.	" line 1(f))				

Schedule A(1)(f), page ____ of ____



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

	Corporation / LLC	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				1 0	j
	Street Address			1		
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	l ed			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Corporation/LLC Name					
	Street Address			_		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receiv	red	_		
	Corporation/LLC Name					
	Street Address			_		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	ed	1		
	Enter total only if last page of schedule					
<u>_</u>	(transfer the total received this period to "Summary of Receig	ts," line 1(g))]	

Schedule A(1)(g), page ____ of ___



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

	Labor Organization	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	I ed			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts."	' line 1(h))				

Schedule A(1)(h), page ____ of ___



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

/	Candida	te Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
			Date Contribution Received			
5	Street Address					
•	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule					

Schedule A(1)(i), page ____ of ____



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			
	Street Address					
1	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
2	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution	_		
	Name		Date Contribution Refunded			
	Street Address					
5	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Established as le What was a stack a his his					
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	line 1(k))				

Schedule A(1)(k), page ____ of



LOANS RECEIVED: SCHEDULE A(2)(a)

/	Lender I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received	Date Loan Received		reporting r endd	Election Gyale
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	I (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	-		
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"					

Schedule A(2)(a), page ____ of ____



FORGIVENESS ON LOANS RECEIVED: SCHEDULE A(2)(b)

/	Lender I	nformation	,	Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	1			
	Lender Name	I	Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	<u>I</u>	Date Forgiveness Received			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u>I</u>			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 2/h))		l		
	Intransies the total received this period to Summary of Receipts,	m IC Z(U))				

Schedule A(2)(b), page ____ of ____



REPAYMENT ON LOANS MADE: SCHEDULE A(2)(c)

	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address			-		
1	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>	-		
	Borrower Name		Date Repayment Received			
	Street Address			-		
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Repayment Received			
	Street Address			-		
3	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address					
4	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address					
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts."	line 2(c))				

Schedule A(2)(c), page ____ of

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address			=		
1	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Interest Accrued			
	Street Address			_		
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Interest Accrued			
	Street Address			_		
4	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Interest Accrued			
	Street Address			_		
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule					_
	(transfer the total received this period to "Summary of Receipts."	line 2(d))				

Schedule A(2)(d), page ____ of

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

	Payor Ir	nformation		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name Date Rebat		Date Rebate/Refund Received			
	Street Address					
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	9			
	Borrower Name	I	Date Rebate/Refund Received			
	Street Address		<u> </u>			
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	9			
	Borrower Name		Date Rebate/Refund Received			
	Street Address		<u> </u>			
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Borrower Name	<u> </u>	Date Rebate/Refund Received			
	Street Address		<u> </u>			
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Borrower Name		Date Rebate/Refund Received			
	Street Address		<u> </u>			
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts."	line 3)				

Schedule A(3), page ____ of

COMMITTEE ID NUMBER

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)		

Schedule A(4), page ____ of ____



IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(5)(a)

	Individual Conti	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address		<u> </u>	-		
1	City	State	ZIP			
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP	-		
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address			_		
3	City	State	ZIP	_		
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address			_		
5	City	State	ZIP	-		
	Occupation	Employer		_		
	Establish Mark (Mark					
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	line 5(a))				

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Schedule A(5), page ____ of

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$50 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

^{*}If contributions of more than \$50 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

Schedule A(5)(b), page ____ of ____



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

	Candidate Committ	ee Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			-		
1	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received	-		
	Committee Name					
	Street Address			-		
2	City	State	ZIP	_		
	Committee ID Number	Date In-Kind Contribution	n Received	-		
-	Committee Name					
	Street Address			-		
3	City	State	ZIP	_		
	Committee ID Number	Date In-Kind Contribution	n Received	<u> </u> -		
	Committee Name					
	Street Address			-		
4		1_	T	-		
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name					
	Street Address					
5	City	State	ZIP	1		
	Committee ID Number	Date In-Kind Contribution	n Received	-		
	Enter total only if last page of schedule	<u> </u>		<u> </u>		

Schedule A(5)(c), page ____ of ____



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

Political Action	n Committee Contributor	Information	Amount Received		Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribut	ion Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	tion Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	tion Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	Date In-Kind Contribution Received			
Committee Name					
Street Address					
City	State	ZIP			
	Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee ID Number City Committee ID Number City Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee Name Street Address City Committee Name City Committee ID Number	Committee Name Street Address City State Committee ID Number Date In-Kind Contribut Street Address City State Committee ID Number Date In-Kind Contribut Committee Name Street Address City State Committee Name Street Address City State Committee ID Number Date In-Kind Contribut Street Address City State Committee ID Number Date In-Kind Contribut Committee ID Number Date In-Kind Contribut Committee Name Street Address City State Committee ID Number Date In-Kind Contribut Committee Name	Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received	Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received City State ZIP Committee ID Number Date In-Kind Contribution Received	Political Action Committee Contributor Information Amount Received Amount this Reporting Period Committee Name Street Address Cry State Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number

Schedule A(5)(d), page ____ of ____



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

mittee Name et Address				Reporting Period	Election Cycle
et Address		Committee Name			
	State	ZIP			
mittee ID Number	Date In-Kind Contributi	ion Received			
mittee Name			+		
et Address					
	State	ZIP			
mittee ID Number	Date In-Kind Contribut	tion Received			
Committee Name					
Street Address					
	State	ZIP			
mittee ID Number	Date In-Kind Contribut	tion Received			
mittee Name					
et Address					
	State	ZIP			
mittee ID Number	Date In-Kind Contribut	tion Received			
mittee Name				+	
Street Address					
	State	ZIP			
mittee ID Number	Date In-Kind Contribut	tion Received			
	Date In-Kind Contribut	tion Received			

Schedule A(5)(e), page ____ of ____



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

	Partnership Con	tributor Information	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name		. 0	·		
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
5	City	Sity State ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received			
_	Enter total only if last page of schedule					
L	(transfer the total received this period to "Summary of Receipts."					

Schedule A(5)(f), page ____ of ____



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

/				ī		I I	
	Corporation	/ LLC Contributor Infor	rmation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				1 5	,	
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	on Received				
	Corporation/LLC Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contributi	ion Received				
	Corporation/LLC Name	Corporation/LLC Name					
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contributi	ion Received				
	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Commission File Number Date In-Kind Contribution Received					
	Corporation/LLC Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contributi	ion Received				
	Enter total only if last page of sch	nedule					

Schedule A(5)(g), page ____ of ___



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

/				1	1	
	Labor Organization (Contributor Inforn	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Labor Organization Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
	Labor Organization Name					
	Street Address					
5	City	State ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts."	line 5(h))				

Schedule A(5)(h), page ____ of ___



IN-KIND CONTRIBUTIONS FROM CANDIDATE'S PERSONAL ASSETS OR PROPERTY:

SCHEDULE A(5)(i)

	Candidate	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received		-	
	Street Address	Street Address				
1	City	State	ZIP	_		
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address			=		
3	City	State	ZIP	-		
	Asset or Property Contributed	l	-			
	Name		Date In-Kind Contribution Received			
	Street Address		I	-		
4	City	State	ZIP	-		
	Asset or Property Contributed	I	-			
	Name		Date In-Kind Contribution Received			
	Street Address			-		
5	City	State	ZIP	1		
	Asset or Property Contributed	-				
	Enter total only if last page of schedule					
<u></u>	(transfer the total received this period to "Summary of Receipts,"	line 5(I))				

Schedule A(5)(i), page ____ of ____



IN-KIND DONATIONS RECEIVED (NON-CONTRIBUTIONS) (PACs AND POLITICAL PARTIES ONLY):

SCHEDULE A(5)(e)

	Source I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			·
	Street Address		<u> </u>	_		
1	City	State	ZIP			
	Type of Item Donated	l	1			
	Name		Date In-Kind Donation Received			
	Street Address	reet Address				
2	City	State	ZIP			
	Type of Item Donated	1				
	Name	Date In-Kind Donation Received				
	Street Address	Street Address				
3	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
4	City	State	ZIP	1		
	Type of Item Donated					
	Name	Name				
	Street Address	Street Address				
5	City	State	ZIP			
	Type of Item Donated					
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	line 5(e))				

Schedule A(5)(e), page ____ of ____



EXTENSIONS OF CREDIT RECEIVED: SCHEDULE A(7)(a)

Creditor	nformation		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ne					
eet Address					
/	State	ZIP			
vices or Goods Provided on Credit		Date of Extension of Credit			
me					
eet Address					
,	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
ı	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
me					
eet Address					
1	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
1	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
/ /ice	es or Goods Provided on Credit er total only if last page of schedule	State es or Goods Provided on Credit	State ZIP es or Goods Provided on Credit Date of Extension of Credit er total only if last page of schedule	State ZIP Date of Extension of Credit Principles or Goods Provided on Credit Date of Extension of Credit	State ZIP Date of Extension of Credit Per total only if last page of schedule

Schedule A(7(a), page ____ of ___



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Creditor	Creditor Information				Cumulative Amount this Election Cycle
	Name			Reporting Period		
	Street Address					
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit Date of Original Extension of Credit					
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	-		
	Enter total only if last page of schedule		<u> </u>	<u> </u>		
	(transfer the total received this period to "Summary of Receipts."	line 7(b))				

Schedule A(7)(b), page ____ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor C	tion	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address	Street Address				
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			

Schedule A(8), page ____ of ___



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor Ir	nformation		Payment Amount	Cumulative Amount this	Cumulative Amount this
	Name				Reporting Period	Election Cycle
	Street Address			_		
,						
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date	-		
	Name	ne e				
	Street Address			- -		
2						
_	City	State	ZIP			
	Services or Goods Purchased	Payment Date	-			
	Name					
	Street Address			_		
3		Cut. 7/D				
	City	State	ZIP			
	ervices or Goods Purchased Payment Date					
	Name					
	Street Address			-		
4	City	State	ZIP	- -		
		otato		-		
	Services or Goods Purchased Payment Date					
	Name					
	Street Address			-		
5	City	sty State		_		
			ZIP	_		
	Services or Goods Purchased		Payment Date			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line (1)				
	parameter and total received this belief to outlined via Receibts.					

Schedule A(9), page ____ of ___



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
1	Street Address					
		1	_			
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
2	Name					
	Street Address			_		
	City	State	ZIP	_		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
			Jac mar 2001/100/000			
	Name					
3	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-		
	Name					
	Street Address					
4		1	-			
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
5	Name					
	Street Address					
	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-		
	Type of Account Necelvable of Debt Owed		Date that Debt Accided			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 10)				
	production and total reconved this behild to Summary of Receipts.	101				

Schedule A(10), page ____ of ___

COMMITTEE ID NUMBER

TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Total (transfer the total received this period to "Summary of Receipts," line 11)		

Schedule A(11), page ____ of ____



MISCELLANEOUS RECEIPTS: SCHEDULE A(12)

	Source I	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					,
	Street Address			-		
	City	State	ZIP	-		
	Receipt Type		Receipt Date	-		
2	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date	-		
	Name					
	Street Address			-		
3	City	State	ZIP			
	Receipt Type		Receipt Date	_		
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date	_		
	Name					
5	Street Address					
	City	State	ZIP	-		
	Receipt Type		Receipt Date	-		
	Enter total only if last page of schedule					
<u> </u>	(transfer the total received this period to "Summary of Receipts,"	line 12)				/

Schedule A(12), page ____ of ___



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Reci	ipient Information	Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name	Disbursement Date	Disbursement Date			
	Street Address	I				
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose	PACs and Political Parties Only)	☐ Cash ☐ Credit		
	Name	Disbursement Date				
	Street Address					
2	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose	? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose	PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid		? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
5	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	? (PACs and Political Parties Only)	☐ Credit		

Schedule B(1), page ____ of ___



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate	Committee Recipient Ir	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	T O at		
	Committee ID Number	Date Contribution M	1ade	□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution N	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution N	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution N	Made	☐ Cash☐ Credit		
	Committee Name					
	Street Address					
5	City	City State ZIP				
	Committee ID Number	Date Contribution N	Made	☐ Cash☐ Credit		
	Contribution Made Date Contribution Made					

Schedule B(2)(a), page ____ of ____



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/				ı	1	
	Political Act	ion Committee Recipien	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name					
	Street Address	Street Address				
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution N	lade	□ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution M	Made	□ Cash □ Credit		
	Committee Name					
:	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution M	Made	☐ Cash☐ Credit		
	Committee Name					
	Street Address					
1	City	State	ZIP			
				□ Cash □ Credit		
	Committee ID Number	Committee ID Number Date Contribution Made				
	Committee Name					
_	Street Address	Street Address				
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution M	Made	□ Credit		
-	Enter total only if last page of	f schedule	<u> </u>			

Schedule B(2)(b), page ____ of ____



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Poli	tical Party Recipient Inform	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name					
1	Street Address					
	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Ma	ide	□ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution M	ade	□ Credit		
	Committee Name					
•	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution M	lade	☐ Cash☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution M	ade	□ Cash □ Credit		
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date Contribution M	ade	☐ Cash☐ Credit		



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnership Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name				, ,	,
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution N	Made	☐ Credit		
	Partnership Name					
	Street Address					
2	City	State	ZIP	E Out		
	Corporation Commission File Number	Date Contribution I	Made	☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution I	Made	☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution I	Made	□ Cash □ Credit		
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution I	Made	□ Cash □ Credit		
_	Enter total only if last page of sci	hedule				



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	n / LLC Recipient Info	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Corporation/LLC Name	Corporation/LLC Name				
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution N	Made	□ Casii		
	Corporation/LLC Name	L				
	Street Address					
2	City	State	ZIP	G Cook		
	Corporation Commission File Number	tion Commission File Number Date Contribution Made		☐ Cash☐ Credit		
	Corporation/LLC Name					
	Street Address	Street Address				
3	City	State	ZIP	G Cook		
	Corporation Commission File Number	Date Contribution I	Made	☐ Cash☐ Credit		
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution I	Made	☐ Cash☐ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	П 0h		
	Corporation Commission File Number	Date Contribution N	Made	□ Cash □ Credit		



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organization	Recipient Inform	ation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				, ,	
	Street Address			_		
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
	Labor Organization Name					
	Labor Organization I valife					
	Street Address					
2	City	State	ZIP	□ Cook		
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
	Labor Organization Name					
	Street Address			_		
3	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
	Labor Organization Name					
	Street Address					
4	City	State	ZIP	 		
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
_	Labor Organization Name					
	Street Address			_		
5	City State ZIP			-		
				☐ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburse	ments." line 2(f))				
_	District of District					/

Schedule B(2)(f), page ____ of ___



CONTRIBUTION REFUNDS RECEIVED: SCHEDULE B(2)(h)

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address		1	-		
1	City	State	ZIP	-		
	Committee ID Number	L	Date of Original Contribution	-		
	Committee Name		Date Refund Received			
	Street Address	<u> </u>	-			
2	City	State	ZIP	-		
	Committee ID Number		Date of Original Contribution	-		
	Committee Name		Date Refund Received			
	Street Address					
3	City	State	ZIP	-		
	Committee ID Number		Date of Original Contribution	-		
	Committee Name		Date Refund Received			
	Street Address			-		
4	City	State	ZIP	-		
	Committee ID Number		Date of Original Contribution	-		
	Committee Name		Date Refund Received			
	Street Address			_		
5	City	State	ZIP	-		
	Committee ID Number		Date of Original Contribution	-		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburse	ments," line 2(h))				

Schedule B(2)(h), page ____ of



LOANS MADE: SCHEDULE B(3)(a)

	Borrower	Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
_	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name	Borrower Name				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	I			
	Enter total only if last page of schedule			l		
	(transfer the total received this period to "Summary of Receipts."	line 3)			1	

Schedule B(3)(a), page ____ of ____



LOAN GUARANTEES MADE: SCHEDULE B(3)(b)

/	_			Amount	Cumulative	Cumulative
	Gu	arantor Information		Guaranteed	Amount this Reporting Period	Amount this Election Cycle
-	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name					
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name					
-	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name					
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guarantee				

Schedule B(3)(b), page ____ of ____



FORGIVENESS ON LOANS MADE: SCHEDULE B(3)(c)

Borrower	Information			Cumulative	Cumulative
			Amount Forgiven	Amount this Reporting Period	Amount this Election Cycle
ower Name		Date Forgiveness Made			
et Address					
	State	ZIP			
inal Amount of Loan	Amount Still Outstanding				
ower Name		Date Forgiveness Made			
et Address					
	State	ZIP			
inal Amount of Loan	Amount Still Outstanding				
Borrower Name		Date Forgiveness Made			
et Address					
	State	ZIP			
nal Amount of Loan	Amount Still Outstanding	L			
ower Name		Date Forgiveness Made			
Street Address					
	State	ZIP			
inal Amount of Loan	Amount Still Outstanding				
ower Name		Date Forgiveness Made			
Street Address					
	State	ZIP			
inal Amount of Loan	Amount Still Outstanding	<u> </u>			
in in	wer Name Address al Amount of Loan er total only if last page of schedule	Address State Amount of Loan Amount Still Outstanding	wer Name Date Forgiveness Made Address State ZIP al Amount of Loan Amount Still Outstanding er total only if last page of schedule	wer Name Date Forgiveness Made Address State ZIP al Amount of Loan Amount Still Outstanding er total only if last page of schedule	wer Name Date Forgiveness Made Address State ZIP al Amount of Loan Amount Still Outstanding er total only if last page of schedule

Schedule B(3)(c), page ____ of ____



REPAYMENT ON LOANS RECEIVED: SCHEDULE B(3)(d)

/				ı	1	
_	Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name	<u> </u>	Date Repayment Made			
	Street Address	Street Address				
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name	<u> </u>	Date Repayment Made			
	Street Address	Street Address				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disburse	ements," line 3(d))				

Schedule B(3)(d), page ____ of



INTEREST ACCRUED ON LOANS RECEIVED: SCHEDULE B(3)(e)

	Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address			-		
1	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Lender Name		Date Interest Accrued			
	Street Address		+			
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name	l	Date Interest Accrued			
	Street Address	L	-			
3	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>	-		
	Lender Name		Date Interest Accrued			
Ī	Street Address			-		
4	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name	<u> </u>	Date Interest Accrued			
	Street Address			-		
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Enter total only if last page of schedule	monto " line 3(a))				

Schedule B(3)(e), page ____ of



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Red	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address			_		
3	City	State	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	-		
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address			_		
4	City	State	ZIP	1		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	_		
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	_		
	Enter total only if last page of sche	edule				
	(transfer the total disbursed this period to "Summary of					

Schedule B(4), page ____ of



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	Candidate Committe	e Recipient Inforr	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	I Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
3	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			

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Schedule B(5)(a), page ____ of ____



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

Political Action	n Committee Recipient	Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	tion Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	ution Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	Lution Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	ution Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu				
	Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee Name Street Address City Committee ID Number Committee ID Number Street Address City Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee Name Street Address City Committee Name	Committee Name Street Address City State Committee ID Number Date In-Kind Contribu Committee Name Street Address City State Committee ID Number Date In-Kind Contribu Street Address City State Committee Name Street Address City State Committee ID Number Date In-Kind Contribu Street Address City State Committee Name Street Address City State Committee Name Street Address City Date In-Kind Contribu Committee Name Street Address Street Address City State Committee ID Number Date In-Kind Contribu	Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee Name Street Address	Contributed Contributed Contributed Contributed Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made City State ZIP Committee ID Number Date In-Kind Contribution Made City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Street Address Street Address Street Address	Political Action Committee Recipient Information Amount this Reporting Period Committee Name Street Address Chy State ZIP Committee Name Street Address

Schedule B(5)(b), page ____ of ____



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

		ecipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
-	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
•	Committee ID Number	Date In-Kind Contribution	<u> </u> Made			
	Committee Name	<u> </u>				
_	Street Address					
3	City	State	ZIP			
Ī	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
-	Street Address					
4	City	State	ZIP			
-	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
ŀ	Committee ID Number	Date In-Kind Contribution	Made			

Schedule B(5)(c), page ____ of ____



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/						
	Partnership F	Recipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address			-		
1	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Partnership Name					
	Street Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	h Made	-		
	Partnership Name					
	Street Address			-		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Partnership Name					
	Street Address			-		
4	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Partnership Name					
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Enter total only if last page of schedul	e				
	(transfer the total disbursed this period to "Summary of Disbu	ursements." line 5(d))				

Schedule B(5)(d), page ____ of ____



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	n / LLC Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					•
	Street Address	Address				
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			

Schedule B(5)(e), page ____ of ___



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organ	nization Recipient Info	rmation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Made			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Made					

Schedule B(5)(f), page ____ of ___



INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

Expenditure I splent Name eet Address diddate(s) Supported (including % supported) e of First Publication, Display, Delivery, or Broadcast splent Name eet Address	State State Candidate(s) Opposed (inc	Mode of Advertising (TV, mail, etc) ZIP duding % opposed) Mode of Advertising (TV, mail, etc)	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ndidate(s) Supported (including % supported) e of First Publication, Display, Delivery, or Broadcast ipient Name	Candidate(s) Opposed (inc	ZIP duding % opposed) Mode of Advertising (TV, mail, etc)			
indidate(s) Supported (including % supported) e of First Publication, Display, Delivery, or Broadcast spient Name	Candidate(s) Opposed (inc	duding % opposed) Mode of Advertising (TV, mail, etc)			
e of First Publication, Display, Delivery, or Broadcast ipient Name	Candidate(s) Opposed (inc	duding % opposed) Mode of Advertising (TV, mail, etc)			
e of First Publication, Display, Delivery, or Broadcast ipient Name	Election Month/Year	Mode of Advertising (TV, mail, etc)			
ipient Name et Address			☐ Credit		
et Address	State				
	State		_		1
	State	T	1		
ndidate(s) Supported (including % supported)		ZIP			
	Candidate(s) Opposed (inc	luding % opposed)	☐ Cash		
e of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ □ Credit		
ipient Name		Mode of Advertising (TV, mail, etc)			
et Address					
	State	ZIP			
ndidate(s) Supported (including % supported)	Candidate(s) Opposed (inc	luding % opposed)	☐ Cash		
e of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ Li Credit		
ipient Name		Mode of Advertising (TV, mail, etc)			
et Address					
	State	ZIP			
ndidate(s) Supported (including % supported)	Candidate(s) Opposed (inc	luding % opposed)	☐ Cash		
	Election Month/Year	Office Sought	☐ Credit		
eei	of First Publication, Display, Delivery, or Broadcast bient Name	didate(s) Supported (including % supported) Candidate(s) Opposed (including % supported) of First Publication, Display, Delivery, or Broadcast Election Month/Year bient Name tt Address State State didate(s) Supported (including % supported) Candidate(s) Opposed (including % supported)	Candidate(s) Opposed (including % opposed) of First Publication, Display, Delivery, or Broadcast Election Month/Year Dient Name Mode of Advertising (TV, mail, etc) tt Address State ZIP didate(s) Supported (including % supported) Candidate(s) Opposed (including % opposed)	Cash Credit	Cash Credit

Schedule B(6), page ____ of ____



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/	Expenditure I	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
_	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
Ŭ	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP	_		
4	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)			
	Date of First Publication, Display, Delivery, or Broadcast	very, or Broadcast Election Month/Year		☐ Cash☐ Credit		

Schedule B(7), page ____ of ____



RECALL EXPENDITURES MADE: SCHEDULE B(8)

	Expenditure	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Red	called	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name	I	Mode of Advertising (TV, mail, etc)			
	Street Address			_		
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Red	called	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		-I			
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	dcast Office Held		☐ Credit		
r	Recipient Name	I	Mode of Advertising (TV, mail, etc)			
	Street Address		1	1		
4	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Red	L	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
	Enter total only if last page of schedul	e e				
	(transfer the total disbursed this period to "Summary of Disb					

Schedule B(8), page ____ of ____



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address					
1	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
2	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
3	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
4	City	State	ZIP			
•	Type of Benefit Provided					
	Notes:					
_	Enter total only if lest name of selectivity					
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbu					

Schedule B(9), page ____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient Co	mmittee Information	1	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP	☐ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)	☐ Credit		
	Committee Name	Payment Date				
Street Address						
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
3	Street Address					
	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)	☐ Credit		
	Committee Name	Payment Date				
4	Street Address					
•	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (1	☐ Credit		
	Committee Name		Payment Date			
5	Street Address					
J	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)		if applicable)	☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "Summary of Disb					

Schedule B(10), page ____ of ___



REIMBURSEMENTS MADE: SCHEDULE B(11)

	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	□ Credit		
	Name					
	Street Address					
2	City	State	ZIP	III Cook		
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
•	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
_	Enter total only if last page of schedule					



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

_	Debt Ir	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed	-	Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP	_		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts,"	line 12)				

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COMMITTEE ID NUMBER

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 14)		

Schedule A(13), page ____ of ____



MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

_		Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City		ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name					
_	Street Address					
2	City		ZIP	☐ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
3	Street Address City ZIP					
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City		ZIP	□ Cash		
	Disbursement Type	l	Disbursement Date	□ Credit		
	Name					
5	Street Address					
J	City	State	ZIP	☐ Cash☐ Credit		
	Disbursement Type Disbursement Date			□ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburse					

Schedule B(12), page ____ of ___