



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: _____

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought: Statewide Office: _____ State Legislature: _____
 County Office: _____ City/Town Office: _____

REPORTING PERIOD (check one):

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 1 st Quarter Report (Local Only): February 26, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
2017 1 st 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 1 st Quarter Report (Local Only): February 25, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
2018 1 st 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		
<input type="checkbox"/> Check here if <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page need be filed.		

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity. All reports are deemed to be filed under penalty of perjury by the committee treasurer (all committees) and candidate (candidate committees only).



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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		
	(l) 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)		



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SUMMARY OF DISBURSEMENTS (Schedule B):

Disbursements	Cash	Equity
1. 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		
15. Aggregate of Disbursements - \$250 or Less		
16. Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)		



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

SCHEDULE A(1)(a)

Individual Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
2	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(a))</small>						

*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 ___



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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 <small>(transfer the total received this period to "Summary of Receipts," line 1(b))</small>		

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



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MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

Candidate Committee Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(c))</small>						



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MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

Political Action Committee Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(d))</small>						



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MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

Political Party Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(e))</small>						

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



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MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

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



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MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

Corporation / LLC Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
5	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(g))</small>						



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MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

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



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MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

Candidate Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
2	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(i))</small>						



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REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

Contributor Information				Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
2	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
3	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
4	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
5	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(k))</small>						



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LOANS RECEIVED:

SCHEDULE A(2)(a)

Lender Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
2	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
3	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
4	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
5	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 2(a))					



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FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

Lender Information				Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name		Date Forgiveness Received			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
2	Lender Name		Date Forgiveness Received			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
3	Lender Name		Date Forgiveness Received			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
4	Lender Name		Date Forgiveness Received			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
5	Lender Name		Date Forgiveness Received			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(b))</small>						



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REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

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



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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
1	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed		Amount Still Outstanding			
2	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed		Amount Still Outstanding			
3	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed		Amount Still Outstanding			
4	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed		Amount Still Outstanding			
5	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed		Amount Still Outstanding			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(d))</small>						



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REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

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



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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)		



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

SCHEDULE A(5)(a)

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

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



**STATE OF ARIZONA
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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 <small>(transfer the total received this period to "Summary of Receipts," line 1(b))</small>		

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

Candidate Committee Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule						
<small>(transfer the total received this period to "Summary of Receipts," line 5(c))</small>						

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



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

Political Action Committee Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(d))</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

Political Party Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(e))</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

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



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

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



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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

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



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

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

SCHEDULE A(5)(i)

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



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

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

SCHEDULE A(5)(e)

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



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COMMITTEE ID NUMBER

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

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



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COMMITTEE ID NUMBER

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

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



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COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payor Committee Information				Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
2	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
3	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
4	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
5	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
Enter total only if last page of schedule							
<small>(transfer the total received this period to "Summary of Receipts," line 8)</small>							



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COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

Payor Information				Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
2	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
3	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
4	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
5	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 9)</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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COMMITTEE ID NUMBER

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	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			
3	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
4	Name					
	Street Address					
	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			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts." line 10)</small>						



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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)		



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COMMITTEE ID NUMBER

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

Source Information				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			
3	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
4	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
5	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 12)</small>						



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COMMITTEE ID NUMBER

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information				Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Name		Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address						
	City		State	ZIP			
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)				
		<input type="checkbox"/>					
2	Name		Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address						
	City		State	ZIP			
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)				
		<input type="checkbox"/>					
3	Name		Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address						
	City		State	ZIP			
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)				
		<input type="checkbox"/>					
4	Name		Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address						
	City		State	ZIP			
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)				
		<input type="checkbox"/>					
5	Name		Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address						
	City		State	ZIP			
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)				
		<input type="checkbox"/>					
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 1)</small>							



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COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

Candidate Committee Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(a))</small>						



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

Political Action Committee Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(b))</small>						



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COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

Political Party Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
Enter total only if last page of schedule						
<small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(c))</small>						

Schedule B(2)(c), page ___ of ___



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

Partnership Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date Contribution Made			
2	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date Contribution Made			
3	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date Contribution Made			
4	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date Contribution Made			
5	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date Contribution Made			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements." line 2(d))</small>						

Schedule B(2)(d), page ___ of ___



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

Corporation / LLC Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(e))</small>						



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COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

Labor Organization Recipient Information				Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements." line 2(f))</small>						



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

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



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COMMITTEE ID NUMBER

LOANS MADE:

SCHEDULE B(3)(a)

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



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COMMITTEE ID NUMBER

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

Guarantor Information				Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
2	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
3	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
4	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
5	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
Enter total only if last page of schedule						
<small>(transfer the total received this period to "Summary of Receipts," line 3(b))</small>						



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COMMITTEE ID NUMBER

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

Borrower Information				Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
2	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
3	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
4	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
5	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 3(c))</small>						



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COMMITTEE ID NUMBER

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

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



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COMMITTEE ID NUMBER

INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

Lender Information				Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
2	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
3	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
4	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
5	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
Enter total only if last page of schedule <small>(Transfer the total disbursed this period to "Summary of Disbursements," line 3(e))</small>						



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COMMITTEE ID NUMBER

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

Recipient Information			Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name of Original Payor		Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
2	Name of Original Payor		Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
3	Name of Original Payor		Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor		
4	Name of Original Payor		Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor		
5	Name of Original Payor		Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor		
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 4)</small>					



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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

Candidate Committee Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(a))</small>						



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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

Political Action Committee Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(b))</small>						



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IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

Political Party Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements." line 5(c))</small>						

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



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IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

Partnership Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
2	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
3	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
4	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
5	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements." line 5(d))</small>						

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



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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

Corporation / LLC Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date In-Kind Contribution Made			
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date In-Kind Contribution Made			
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date In-Kind Contribution Made			
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date In-Kind Contribution Made			
5	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number		Date In-Kind Contribution Made			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(e))</small>						



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COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

Labor Organization Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
2	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
3	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
4	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
5	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(f))</small>						



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COMMITTEE ID NUMBER

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

Expenditure Recipient Information				Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Candidate(s) Supported (including % supported)		Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				
2	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Candidate(s) Supported (including % supported)		Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				
3	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Candidate(s) Supported (including % supported)		Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				
4	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Candidate(s) Supported (including % supported)		Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				Office Sought
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 6)</small>							



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COMMITTEE ID NUMBER

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

Expenditure Recipient Information				Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				
2	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				
3	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				
4	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 7)</small>							



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RECALL EXPENDITURES MADE:

SCHEDULE B(8)

Expenditure Recipient Information				Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?		Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast		Office Held				
2	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?		Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast		Office Held				
3	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?		Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast		Office Held				
4	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?		Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast		Office Held				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 8)</small>							



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SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

Benefitted Candidate				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
2	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
3	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
4	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 9)</small>						



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COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

Recipient Committee Information				Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
2	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
3	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
4	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
5	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 10)</small>						



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REIMBURSEMENTS MADE:

SCHEDULE B(11)

Recipient Information				Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
2	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 11)</small>						



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COMMITTEE ID NUMBER

OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

Debt Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
2	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
3	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
4	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
5	Name					
	Street Address					
	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)		



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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

Recipient Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	ZIP				
	Disbursement Type		Disbursement Date			
2	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	ZIP				
	Disbursement Type		Disbursement Date			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	ZIP				
	Disbursement Type		Disbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	ZIP				
	Disbursement Type		Disbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
Enter total only if last page of schedule						
<small>(transfer the total disbursed this period to "Summary of Disbursements." line 12)</small>						