## POLITICAL COMMITTEE

#### CITY OF CHANDLER

#### **CAMPAIGN FINANCE REPORT**

2016 August/November Regular Election

1.	MARK STEWART FOR CHANDLER Full Name of Committee	JUN 3 0 2016	
	2705 E BARTLETT PL	CHANDLER CITY CLERK	
	CHANDLER 85249 MARICOPA 314-409-7279  City ZIP Code County Phone	1	_
2.		3A. ID#	
	Sponsoring Organization or Candidate and office  MARK STEWART. CITY COUNCILMAN		1
			ı
	Name of Candidate and Office Sought (if applicable)  MARKO STEWARTYCHANDLER · COM		
	E-Mail Address Fax.#		
			_

FOR OFFICE USE ONLY

RECEIVED

4. RI	EPORTING PERIOD (Please check appropriate box)		DUE BETWEEN	
	January 31 Report - For Period of* thru December 31, 2015		January 1, 2016 and February 1,	2016
	June 30 Report - For Period of January 1, 2016 thru May 31, 2016		June 1, 2016 and June 30,	2016
	Pre-Primary Election Report - For Period of June 1, 2016 thru August 18, 2016		August 19, 2016 and August 26,	2016
	Post-Primary Election Report - For Period of August 19, 2016 thru September	19, 2016 Sept	ember 20, 2016 and September 29,	2016
	Pre-General Election Report - For Period of September 20, 2016 thru October 2	27, 2016	October 28, 2016 and November 4,	2016
	Post-General Election Report - For Period of October 28, 2016 thru November	28, 2016 N	ovember 29, 2016 and December 8,	2016
	**January 31, Report - For Period of November 29, 2016 thru December 31, 2017		. January 1, 2018 and January 31,	2018
5.	SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date	
5a	Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)	0	0	
5b	Cash on Hand at the Beginning of this Reporting Period	0	0	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	540.°°	54o.∞	
5d	Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	540.°°	540.°°	
6a	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		0	
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	112.66	112.66	
7	Cash on Hand at Close of Reporting Period (Subtract	8 1177 24	1 427 2U	

Line 6b from Line 5d]

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

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

# **DETAILED SUMMARY PAGE**

# OF RECEIPTS AND DISBURSEMENTS

Page 2

OF RECEIPTS AND DISBURSEMENTS	2. ID#	
1. Committee Name: MARK STEWART FOR CHANDLER		
3. Report covering period from Thu1, 2016 Thru MAY 31, 2016		
RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:	400.00	400.00
(a) Individuals - more than \$50 (Total from Schedule A)	140.00	140.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]		
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	540.00	540.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)		·
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		_
8. Total Receipts [add 4(f), 5(c), 6, and 7]	540,00	540.60
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	112.66	112.66
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	112.66	112.66
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	112.66	112.66
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	H12, 66 0	112.66 0
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and complete.  Scott Otter 201	to the best of my knowledge ar	nd belief it is true and
Type or Paint Name of Trassey	6/27/16	
Signature of Treasurer or Candidate or Designating Individual	Date Date	

<del></del>	 	 
2. ID#		

1. Committee Name MARK STEWART FOR CHANDLER
3. Report covering period from JANUARY 1, 2016 thru MAY 31, 2016

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR		THIS PERIOD	CAMPAIGN TO DATE
<b>4a</b> .	LAST FIRST MI  LARSEN SERAPHIM  STREET ADDRESS 23411 E ORVILLE ST  CITY STATE ZIP  FLORENCE AZ 85132  OCCUPATION EMPLOYER  TECHNICAL WRITER INTEL CORP	5/8/16	\$100	\$100
b.	LAST FIRST MI ALCOTT JOEL  STREET ADDRESS 341 E CAROL AVE  CITY STATE THOENIX AZ  OCCUPATION SELF EMPLOYED SELF EMPLOYED	5/13/16	\$100	\$100
ď	LAST FIRST MI  OTTERSEN SCOTT  STREET ADDRESS  10537 E.NACOMA DR  CITY STATE ZIP  SUN LAKES AZ 85248  OCCUPATION  OPERATIONS MANAGER RHDUPPER LAND.	5/22/16	\$200	\$200
d.	LAST FIRST MI  STREET ADDRESS  CITY STATE ZIP  OCCUPATION EMPLOYER			
e.	LAST FIRST MI  STREET ADDRESS  CITY STATE ZIP  OCCUPATION EMPLOYER			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		\$400	\$400

	2. ID#		**************************************
1. Committee Name MARK STEWART FOR CHANDLE	<u>ر</u>		
3. Report covering period from JANUARY 1, 2016 thru	MAY	31	2016

# 4. Aggregate Total of Contributions of \$50 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
JOSHUA ALLISON  KRISTOPHER CAMPBELL  TREVOR MILLER  ROBERT TALLMAN  MAR ERIC MILLER  MIKE HITTER	\$35 \$20 \$20 \$35 \$20 \$10	\$20 \$20 \$35 \$20 \$10
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	\$140	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column 8]

<sup>\*</sup>If contributions of \$50 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.

## CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

	2. ID#
1. Committee Name Mark Stewarf 4 Churcher	
3. Report covering period from Sam 1 2016 thru May 3	2016
•	

4		CONTRIBUTIONS	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	•	DENTITY OF CONTRIBUTOR AND DATE RECEIVED	THIS PERIOD	CAMPAIGN TO DATE
4a	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED		None	
b.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	7		
C.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
e.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF Detailed Summary Page	LAST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to Line 4(c), Column A]		
<u> </u>			<u> </u>	<u> </u>

	CANDIDATE LOANS		SCHEDULE (		
1.	Committee Name Mark Stewart for Chandle	<b>1</b>	2. ID#		
3.	Report covering period from JANUARY 1, 2016 thru	YA M	31 ,	2016	
4.	LOANS MADE OR GUARANTEED BY CANDIDATE  NAME AND ADDRESS FROM WHOM RECEIVED	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
b.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
C.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
d.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
e.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
f.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	DESCRIPTION				
<b>5</b> .	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAG [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), C	SE OF SCHEDULE C	Non	e	

#### OTHER LOANS

SCHEDULE C1

	OTHER LUANS		SC	HEDULE C1
	Committee Name Mark Stewart for Chandle  Report covering period from 5 2016 thru	er	2. ID#	
1.	Committee Name	May 31	2016	
3.	Report covering period from	1-14 31		
4	ALL OTHER LOANS  NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN
	THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	EONITREDEIVED	01 20/11	TO DATE
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN ADDRESS CITY STATE ZIP, AND ID#			

	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION				
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION				
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION				
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION		None	0	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Page, Line 5(a), Column A]	Detailed Summary			
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Page\_\_\_of\_\_\_

#### **EXPENDITURES FOR OPERATING EXPENSES\***

SCHEDULE D

2. ID#	

1. Committee Name MARK STEWART FOR CHANDLER
3. Report covering period from JANUARY 1,2016 thru

MAY 31, 2016

4	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP PAYPAL	5/31/16 \$12.50	\$12.50
	DONATION PROCESSING FEES		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP UPS 5 fore 4960 > 6. 1 bert Rd > fc 1 (hundler AZ 85249	3/z1/16	£2.16
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP 1780 W Chandler Blyd Chandler Az 85224	3/22/16	80.84
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4d.	ups Store 4960 s Glbert Rd Stell Chandles 12 85249	3/29/16	3-86
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED  Ma.ler		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP  UPS 4960 S 6.1 bert Rd  Chundler Az 85249  DESCRIPTION OF ITEMS OR SERVICES PURCHASED  OPICS	4/5/16	8.63
<b>4</b> f.	NAME, ADDRESS, CITY, STATE AND ZIP  FEW EX 1780 W. Chandler Blud  Chandler AL 85224  DESCRIPTION OF ITEMS OR SERVICES PURCHASED  G0:ES	4/5/16	64.67
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		112.66

<sup>\*</sup>Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

## INDEPENDENT EXPENDITURES\*

SCHEDULE D-1

		2. ID#	
	Mark Stand Law amoder		
	1. Committee Name Mark Stewart for Chandler 3. Report covering period from JANUARY 1,2016 thru MAY	31,20	ત્રીદ
			<del></del>
4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	NIADE	EXPENDITORE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP		
	NONE		
	7.0,0		
	PURPOSE AND DESCRIPTION OF PURCHAST lenefitted Dpposed		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHAS Benefitted Opposed	_	
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP		
		-	
	PURPOSE AND DESCRIPTION OF PURCHASI enefitted Dpposed  CANDIDATE OFFICE SOUGHT YEAR OF ELECTION	]	
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
<b>5</b> .	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line	10, Column A]	
	EE A.R.S. § 16-901(14).		
l certil reque	fy, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation st or suggestion of any candidate or any campaign committee or agent of that candidate.	n, consultation or co	ncert with or at the
	Can DA-		
Signat	ure of Treasurer		
		NAME AND AND	T MOUNT
	NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS SIX MONTHS	WITHIN THE LAST	AMOUNT
İ			
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### LOANS MADE BY REPORTING COMMITTEE

**SCHEDULE D-2** 

2. ID#

	MarkStar act C. Chardlan		
	1. Committee Name Mark Status & Far Charoller 3. Report covering period from San 1 2016 thru May 3	2016	
4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE	EOAN NOOL	OF THE LOAN
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
40	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4g.	NAME, ADDRESS, CITT, STATE, ZIF, AND ID#		
<b>4</b> h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
<b>4</b> i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
_	ENTED TOTAL ONLY IF LACT DACE OF COUEDING D. 2 Transfer label to Datel Supremon Page 1 inc. 42. Column Al	<u> </u>	NOJE
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		1,000

Page\_\_\_of \_\_\_

### OFFSETS TO OPERATING EXPENSES \*

SCHEDULE D-3

2. ID#

	1. Committee Name Mark S fewart for Chandler 2016 3. Report covering period from TANVARY 1, 2016 thru MA	y 31	, 2016
Γ	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES	DATE REFUND	AMOUNT OF THE
	NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	RECEIVED	REFUND
	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
). 	NAME, ADDRESS, CITY, STATE, AND ZIP		
L		:	
	DESCRIPTION OF REFUND		
:	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
۱.	NAME, ADDRESS, CITY, STATE, AND ZIP		
L	DESCRIPTION OF REFUND		
1	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFLIND		
L	DESCRIPTION OF REFUND		
	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [If last page of Schedule D-3, [transfer total to Detailed Summary Page Line	17 Column A]	lore
	Includes return of contributions made by reporting committee	/\	
		Schedule	D-3 Pageof

# REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

		2. ID#	
	mark		
	1 Committee Name Stewart for Chandler		
	Mark  1. Committee Name Stewart For Chandler  3. Report covering period from San 1 2016 thru May	31 2016	· · · · · · · · · · · · · · · · · · ·
1	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE	AMOUNT OF
	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	REPAYMENT MADE	THE REPAYMENT
Э.	NAME, ADDRESS, CITY, STATE, AND ZIP		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	, No. 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5, 11, 5,		
ic.	NAME, ADDRESS, CITY, STATE, AND ZIP		
ld.	NAME, ADDRESS, CITY, STATE, AND ZIP		
			wig
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
		i 	
		<u> </u>	
4f. :	NAME, ADDRESS, CITY, STATE, AND ZIP		
		<u>L</u>	
<b>i</b> .	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		None

Schedule D-4 Page \_\_\_\_of \_\_\_\_

### REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

2. ID#

	1. Committee Name Mark Stewart for Chandler	- 1	
	1. Committee Name Mark Stowart For Chandles 3. Report covering period from TANUARY 1, 2016 thru MAY	31,	2016
4	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT	AMOUNT OF THE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	MADE	REPAYMENT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
<b>4</b> b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
<b>4</b> C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
<b>4e</b> .	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]

Page\_\_\_of\_\_

### TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID#

	1. Committee Name Mark Stewart for Chandles AZ 3. Report covering period from Pay 3 San 1 2016 thru May	312016	
4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE)  TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	:	
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
<b>4</b> c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
<b>4</b> f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		NONE

Page\_\_\_of\_\_\_

#### ANY OTHER DISBURSEMENT

SCHEDULE D-7

	2. lD#	
1. Committee Name Mark Stewart For Chance	skr	······································
3. Report covering period from Sam 1 Z0/6	thru May 31 2016	
ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT	AMOUNT OF THE DISBURSEMENT

4.	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	MADE	
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
<b>4</b> b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
<b>4</b> c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
<b>4</b> d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
<b>4e</b> .	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]

NONE Page of

#### IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID#		

1. Committee Name Mark Stewart for Chandler

	3. Report covering period from TANUARY	1,	2016	_thru	NAI	31	, 2016
4	IN-KIND CONTRIBUTIONS and EXPENDITURES					DATE	FAIR MARKET VALUE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN						
<b>4a</b> .	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE					
	DESCRIPTION	<u>, , , , , , , , , , , , , , , , , , , </u>		<del>, , , , , -==</del>			
	OCCUPATION	EMPLOYER		·			
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION					
	DESCRIPTION						
	OCCUPATION	EMPLOYER					
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE					
	DESCRIPTION						
	OCCUPATION	EMPLOYER					
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION					
	DESCRIPTION		*				
	OCCUPATION	EMPLOYER					
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAC Line 6, Column A)	GE OF SCHEDULE E (If	last page of Sche	dule E, transfer to	otal to De	tailed Summary Page	
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAG Line 11, Column A]	GE OF SCHEDULE E [If	last page of Sche	dule E, transfer to	otal to De	tailed Summary Page	NONE

Page \_\_\_\_of \_\_\_\_

### DIVIDENDS, INTEREST, AND OTHER RECEIPTS

## SCHEDULE F-1

2. ID#

	Mark		
	1. Committee Name 5 focuser & for Chardler		
	1. Committee Name Stowart for Chardler  3. Report covering period from Jan 1 2016 thru May 3	12016	· · · · · · · · · · · · · · · · · · ·
4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT	AMOUNT OF THE
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED	RECEIVED	RECEIPT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	NONE		
	DESCRIPTION OF RECEIPT		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
			}
	DESCRIPTION OF RECEIPT		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
	DESCRIPTION OF RECEIPT		
4 <del>0</del> .	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
	DESCRIPTION OF MEDELLI I		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7	Column A	

#### OFFSETS TO CONTRIBUTIONS RECEIVED \*

SCHEDULE F-2

2. ID#

	1. Committee Name Mar K Stewarf Ser Chardler 3. Report covering period from Jan 1 2016 thru May 3	<b>x</b> / 00/	•
	3. Report covering period from Jan 1 2016 thru May 3	71 2016	) 
4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND	AMOUNT OF THE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	MADE	REFUND
<b>4</b> a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RETURN		
	DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
<b>4</b> C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
<b>4</b> d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		]
	DESCRIPTION OF REFUND		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		4/
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line	4(E), Column A}	wore

<sup>\*</sup> Includes return of contributions received by reporting committee

# DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

2. iD#

	Mark					
	Mark  1. Committee Name Stauart for Chandler  3. Report covering period from Jan 1 2016 thru May 31 2016  4 DEBTS AND OBLIGATIONS					
3. Report covering period from Jan 1 2016 thru May 31 2016						
4	DEBTS AND OBLIGATIONS	OUTSTANDING BALANCE	AMOUNT INCURRED	PAYMENT THIS	OUTSTANDING	
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	BEGINNING THIS PERIOD	GINNING THIS PERIOD	PERIOD	BALANCE AT CLOSE OF THIS PERIOD	
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT					
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT			, , , , , , , , , , , , , , , , , , ,		
<b>4</b> c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT	·				
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION OF DEBT					
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
			:			
	DESCRIPTION OF DEBT			4.7		
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLO F-3 [Transfer total to Detail Summary Page Line 19, Col		ONLY IF LAST PAGE OF	SCHEDULE	None	