

Committee Information:	Committee Name:	Sam Huang for Chandler Council	
= INICODMATION / is if f	Clica as a sondidata com	amittaa):	
E INFORMATION (only if f			
E INFORMATION (only if f  Office Sought:	filing as a candidate com		☐ State Legislature:

### REPORTING PERIOD (check one):

	REPORTING PERIOD	REPORT DUE
	2016 4th Quarter Report: October 28, 2016 to December 31, 2016	January 1, 2017 to January 15, 2017
Ī	2017 March Pre-Election Report (Local Only): January 1, 2017 to February 25, 2017	February 26, 2017 to March 4, 2017
Ī	2017 1st Quarter Report (Local Only): February 26, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
	2017 1st Quarter Report: January 1, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
	2017 May Pre-Election Report (Local Only): April 1, 2017 to April 29, 2017	April 30 , 2017 to May 6, 2017
	2017 2 <sup>nd</sup> Quarter Report (Local Only): April 30, 2017 to June 30, 2017	July 1, 2017 to July 15, 2017
	2017 2 <sup>nd</sup> 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 <sup>rd</sup> Quarter Report (Local Only): August 13, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
	2017 3 <sup>rd</sup> 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 <sup>th</sup> Quarter Report (Local Only): October 22, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
<u> </u>	2017 4 <sup>th</sup> Quarter Report: October 1, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
	2018 March Pre-Election Report (Local Only): January 1, 2018 to February 24, 2018	February 25, 2018 to March 3, 2018
	2018 1st Quarter Report (Local Only): February 25, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
<u> </u>	2018 1 <sup>st</sup> Quarter Report: January 1, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
<u> </u>	2018 May Pre-Election Report (Local Only): April 1, 2018 to April 28, 2018	April 29 , 2018 to May 7, 2018*
	2018 2 <sup>nd</sup> Quarter Report (Local Only): April 29, 2018 to June 30, 2018	July 1, 2018 to July 16, 2018*
	2018 2 <sup>nd</sup> 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 <sup>rd</sup> 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 <sup>th</sup> 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 Da

\*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
<ul> <li>(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)</li> </ul>		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 0.00	
c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting p	eriod) \$ 0.00	
(d) = Balance at close of reporting period	\$ 0.00	

# 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))	\$ 0.00	
	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))	\$ 0.00	
2.	Loans		
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made	<b>A O O O</b>	
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	\$ 0.00	
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)		1.00
	(i) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		\$ 0.00
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		Ψ 0.00
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))		\$ 0.00
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)	\$ 0.00	\$ 0.00
\		Ψ 0.00	ψ 0.00

## SUMMARY OF DISBURSEMENTS (Schedule B):

/	Disbursements	Cash	Equity
<u> 1.</u>	Disbursements for Operating Expenses		
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	\$ 0.00	
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))	\$ 0.00	
3.	Loans	<b>V</b> 0.00	
<del></del>	(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))	\$ 0.00	\$ 0.00
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))		\$ 0.00
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)	\$ 0.00	\$ 0.00



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

SCHEDULE A(1)(a)

/	Inc	lividual Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP	-		
	Occupation	Employer	L.			
-	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP		:	
	Occupation	Employer				
\	Name	<u> </u>	Date Contribution Received			
	Street Address			_		
3	City	State	ZIP			
	Occupation	Employer				
-	Name		Date Contribution Received			
	Street Address	<del></del>				
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			;
			1			

\*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 \_\_\_\_



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

SCHEDULE A(1)(b)

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

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

/		Committee Contributor In	formation	Amount Recei	Cumulative ived Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	treet Address				
1	1 City	State	ZIP			
	Committee ID Number	Date Contribution Red	ceived			
	Compiler Name					
	Committee Name					
	Street Address					
2	2 city	State	ZIP			
	Oily	State	ZIF			ļ
	Committee ID Number	Date Contribution Rec	eived			
	Committee Name		·			
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Rec	eived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Rec	eived			
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date Contribution Rec	eived			
_						
	Enter total only if last page of	schedule hary of Receipts," line 1(c))				•

Schedule A(1)(c), page \_\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

Political Action Committee	ee Contributor Inf	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Address					
	State	ZIP			
ittee ID Number	Date Contribution Received	1			
uittee Name					
Address					
	State	ZIP			
nittee ID Number	Date Contribution Receive	d			
nittee Name					
Address					
	State	ZIP			
nittee ID Number	Date Contribution Receive	od .			
nittee Name					
Address			<u>.</u>		
	State	ZIP	_	1	
nittee ID Number	Date Contribution Receive	ed	-		
Committee Name					
t Address					
	State	ZIP			<u>.</u>
nittee ID Number	Date Contribution Receive	ed	-		
					Date Contribution Received  ly if last page of schedule

Schedule A(1)(d), page \_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

/						
/ 	Political Party Committee Name	ontributor Informa	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
			<del>-</del>	,		
	Street Address					
1	City	State	ZIP	1		
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed		İ	
		mmittee Name				
5	Street Address		· · · · · · · · · · · · · · · · · · ·			
	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,	line 1(e))				

Schedule A(1)(e), page \_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

	Partnershi	p Contributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Recei	Ved			
	Partnership Name					
	Street Address					
3	City	State	ZIP		:	
	Corporation Commission File Number	Date Contribution Recei	Date Contribution Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number					
-	Partnership Name	1				
	Street Address					
_	City	State	ZIP			
5						1

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MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

,						
_	Corporation	/ LLC Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
	Corporation/LLC Name					
	Street Address					
2		1	T			
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
	Corporation/LLC Name					
	Street Address					
3		·				
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
	Corporation/LLC Name		1.1 1000			
	Street Address					
4						
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
	Corporation/LLC Name	<u></u>				
	Street Address					
5						
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Recei	ved			
_	Enter total only if last page of sche	Iedule				
	(transfer the total received this period to "Summary of					

Schedule A(1)(g), page \_\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

/	Labor Organizatio	on Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				-	
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ded	_		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP	1		
	Corporation Commission File Number					
	Labor Organization Name					
	Street Address			-		
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	poration Commission File Number Date Contribution Received				
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved			
	Enter total only if last page of schedu					



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

	Candida	te Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address		. <u>.</u>			
1	City	State	ZIP		:	
	Occupation	Employer			ļ	
	Name	<u> </u>	Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address		_ <b>L</b>			
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer	٠.			
	Name		Date Contribution Received			<b>M.</b> • • •
-	Street Address		<del>.</del>		į	
5	City	State	ZIP			
	Occupation	Employer	1			
- 1	Enter total only if last page of schedule					



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

name  Ireet Address  Ity  Number (if applicable)  ame  Ireet Address	Information	Date Contribution Refunded  ZIP  Date of Original Contribution  Date Contribution Refunded	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Number (if applicable)  ame  treet Address		ZIP  Date of Original Contribution  Date Contribution Refunded			
Number (if applicable)  arne  treet Address		Date of Original Contribution  Date Contribution Refunded			
Number (if applicable)  ame  treet Address		Date of Original Contribution  Date Contribution Refunded			
ame treet Address ity	State	Date Contribution Refunded			
treel Address	State				
ity	State	ZIP			
	State	ZIP	-		
Number (if applicable)					
ID Number (if applicable)		Date of Original Contribution	_		
ame		Date Contribution Refunded			
treet Address					
ity	State	ZIP			
Number (if applicable)		Date of Original Contribution	_		
ame		Date Contribution Refunded			
treet Address					
ih.	State	ZIP			
ID Number (if applicable)		Date of Original Contribution			
Name		Date Contribution Refunded			: :
treet Address					
ity	State	ZIP			
O Number (if applicable)		Date of Original Contribution			
	D Number (if applicable)  Iame  Itreet Address  D Number (if applicable)  Iame  Street Address  D Number (if applicable)  Enter total only if last page of schedule	ity State  D Number (if applicable)  State  State  D Number (if applicable)  State  D Number (if applicable)  State	ity State ZIP  Date of Original Contribution  Date Contribution Refunded  Itreet Address  State ZIP  Date of Original Contribution  Date Contribution Refunded  Date of Original Contribution   Itreet Address  State ZIP  Date of Original Contribution  Date Contribution Refunded  State ZIP  Date of Original Contribution  Date Contribution Refunded  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date Contribution Refunded  State ZIP  Date of Original Contribution  Date Contribution Refunded  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution	treat Address  ity State ZIP  Date of Original Contribution  Date Contribution Refunded  Treat Address  Ity State ZIP  Date of Original Contribution	

Schedule A(1)(k), page \_\_\_\_ of



LOANS RECEIVED:

SCHEDULE A(2)(a)

,				1	1	
/		Lender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Lender Name	Date Loan Receive	Date Loan Received		3	
	Street Address		_			
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpo	se? (PACs and Political Parties Only)			
	Lender Name	Date Loan Receive	d			
	Street Address					
2						
-	City	State	ZIP			
	Suarantor/Endorser Name  Non-Electoral Purpose? (PACs and Political Part		se? (PACs and Political Parties Only)			
	Lender Name	Date Loan Receive	d			
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
4	Lender Name		Date Loan Received			
	Leiluei Name	Date Loan Receive	u			
	Street Address					
4	City	State	ZIP			
-	Guarantor/Endorser Name	Non-Electoral Purpo	se? (PACs and Political Parties Only)			
			1_			
	Lender Name	Date Loan Receive	d			
	Street Address	Street Address				
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	se? (PACs and Political Parties Only)			
4						

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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
_	Lender Name		Date Forgiveness Received			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u></u>			
	Lender Name		Date Forgiveness Received			
	Street Address		<u> </u>			
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	<u> </u>	Date Forgiveness Received			
	Street Address		1	_		
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding		_		
	Lender Name	<u> </u>	Date Forgiveness Received			
	Street Address			_		
4	City	State	ZIP		!	
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
5	City	State	ZIP	7		
5	Original Amount of Loan	Amount Still Outstanding				

Schedule A(2)(b), page \_\_\_\_ of \_\_\_\_



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrowe	r Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address			-		
2	Street Address					
_	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address			1		
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>	1		
	Вогтоwer Name		Date Repayment Received			
	Street Address			-		
4						
	City	State	ZIP			
	Original Amount Borrowed	Original Amount Borrowed Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address			-		
5	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Enter total only if last page of schedule					

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INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

	Во	rrower Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	ding			
	Borrower Name		Date Interest Accrued			
	Street Address				·	
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	ding			
-	Boπower Name	<u> </u>	Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	ding			
	Borrower Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	ding			
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	ding			
-	Enter total only if last page of sch					

Schedule A(2)(d), page \_\_\_\_ of

REBATES AND REFUNDS RECEIVED:

COMMITTEE ID NUMBER

SCHEDULE A(3)

/		ayor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ì	Payor Name		Date Rebate/Refund Received			
ļ	Street Address					
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/R	ebate			
	Borrower Name		Date Rebate/Refund Received			
	Street Address					
2	2 City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Re	ebate	-		
	Borrower Name		Date Rebate/Refund Received			
		Street Address				
3						
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Re	ebate			
	Borrower Name		Date Rebate/Refund Received			
	Street Address			1		
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Re	ebate	_		
	Borrower Name		Date Rebate/Refund Received			
	Street Address					
5	City	State	ZIP	-		
	Original Purchase Amount	Reason for Refund/Re	bate			
	Enter total only if last page of scheo					

Schedule A(3), page \_\_\_\_ of

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

Schedule A(4), page \_\_\_\_ of \_\_\_\_



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

SCHEDULE A(5)(a)

_		Individual Contributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address			-		
1	City	State	ZIP			
	Оссиратіоп	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP		į	
	Occupation	Employer	<u> </u>			
	Name		Date In-Kind Contribution Received			
	Street Address	et Address				
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address		<u></u>			
5	City	State	ZIP			
	Occupation	Employer				
	,	Cinpoyo				

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

Schedule A(5), page \_\_\_\_ of



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

SCHEDULE A(5)(b)

rumulative In-Kind Contributions from Individuals - \$50 or Less	
inter total only if last page of schedule ansfer the total received this period to "Summary of Receipts," line 1(b))	

Schedule A(5)(b), page \_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

_	Candida	ate Committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
1	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
$\dashv$	Enter total only if last page					

Schedule A(5)(c), page \_\_\_\_ of \_\_\_



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

	Political Action C	ommittee Contributo	or Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	L ibution Received			
	Committee Name					
	Street Address					Comments of the Comments of th
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ribution Received			
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ribution Received			

Schedule A(5)(d), page \_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Polit	ical Party Contributor Info	rmation	Amount Rece	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	ibution Received			
	Committee Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	ibution Received			
	Committee Name					
	Street Address				į	
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	ibution Received			
_	Enter total only if last page	of schedule				



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

Partnership Co	ntributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Partnership Name					
Street Address					
City	State	ZIP	_		
Corporation Commission File Number	Date In-Kind Contribution	Received	-		
Partnership Name		*****			
Street Address			1		
City	State	ZIP	1		
Corporation Commission File Number	Date In-Kind Contribution	Received			
Partnership Name	ł				
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	n Received	_		
Partnership Name					
Street Address			-		
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	n Received			
Partnership Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Partnership Name  Street Address  City  Corporation Commission File Number  Partnership Name  Street Address  City  Corporation Commission File Number  Partnership Name  Street Address  City  Corporation Commission File Number  Partnership Name  Street Address  City  Corporation Commission File Number  Partnership Name  Street Address  City  Corporation Commission File Number  Partnership Name  Street Address  City  Corporation Commission File Number	Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Partnership Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution	Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Received  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Received  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Received	Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Oate in-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Oate in-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Oate in-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Oate in-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Oate in-Kind Contribution Received  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Oate in-Kind Contribution Received  Enter total only if last page of schedule	Partnership Contributor Information Amount Received Reporting Period Partnership Name Street Address City State ZIP Corporation Commission File Number Date in Mind Contebution Received

Schedule A(5)(f), page \_\_\_ of \_\_\_



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

	,						
	/	Corporation / LLC	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
'		Corporation/LLC Name					
ĺ		Street Address					
	1 City State ZIP						
		Corporation Commission File Number	Date In-Kind Contribution	Basisad			
		Corporation Commission File Number	Date in-Ning Contribution	received			
		Corporation/LLC Name	-				
		Street Address					
	2	City	State	ZIP		:	
		Corporation Commission File Number	Date In-Kind Contribution	Received			
-				- ,, -,			
		Corporation/LLC Name					
		Street Address					
	3	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
		Corporation/LLC Name					
		Corporation vice vice vice vice vice vice vice vice					
İ		Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
}		Corporation/LLC Name					
		Street Address					
	_		1				
		City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
╮┟		Enter total only if last page of schedule					
\ L		(transfer the total received this period to "Summary of Receipts."	line 5(q))				1/

Schedule A(5)(g), page \_\_\_\_ of \_\_\_



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

/	Labor Organi	zation Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name	abor Organization Name				
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	pution Received			
	Labor Organization Name					
	reet Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibution Received			
	Labor Organization Name	J				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
_	Enter total only if last page of scl					

Schedule A(5)(h), page \_\_\_\_ of \_\_\_



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

SCHEDULE A(5)(i)

_	Ca	andidate Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
1	Street Address  City	la	Laco		:	
	Asset or Property Contributed	State	ZIP			
	Name		Date In-Kind Contribution Received			
2	Street Address			_		
	City	State	ZIP			
	Asset or Property Contributed			1		
	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP	1		
	Asset or Property Contributed	1				
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Asset or Property Contributed					
	Name	4	Date In-Kind Contribution Received			
5	Street Address					
	City  Asset or Property Contributed	State	ZIP	_		
		odulo	14.00 4.000			· . · · · · · · · · · · · · · · · · · ·
	Enter total only if last page of sch (transfer the total received this period to "Summary or					



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

SCHEDULE A(5)(e)

	S	ource Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address	I				
2	City	State	ZIP	_		
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
3	City	State	ZIP			
	Type of Item Donated					
	Name	<del></del>	Date In-Kind Donation Received		-	
	Street Address					
4	City	State	ZIP	-		
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated					
	Enter total only if last page of sch					



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

/		Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name Street Address					
1	İ	City	State	ZIP			
		Services or Goods Provided on Credit		Date of Extension of Credit			
		Name					· · · · · · · · · · · · · · · · · · ·
		Street Address					
2	:  -	city	State	ZIP			
		Services or Goods Provided on Credit		Date of Extension of Credit			
		Name Street Address					
3		City	State	ZIP	_		
	L	Services or Goods Provided on Credit		Date of Extension of Credit			
		Name					
	·,	Street Address				;	
4	-	City	State	ZIP			
	S	services or Goods Provided on Credit		Date of Extension of Credit			
		Name		1,000	_		
5		Street Address	State	ZIP			
	L	ervices or Goods Provided on Credit		Date of Extension of Credit			
		Enter total only if last page of schedule		<u> </u>			
	J(t	ransfer the total received this period to "Summary of Receipts."	line 7(a))				



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
	Name	··· =-				
	Street Address	treet Address				
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	Sured Audi ess			_		
_	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				
	Name					
	Street Address		<u></u>			
4	City	State	ZIP			
			Date of Original Extension of Credi			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Octor			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credi	•			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts." line 7(b))					



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor C	Committee Informa	ation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date		Reporting Feriod	Liection Cycle
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	rpense (if applicable)			
_	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	rpense (if applicable)			
	Committee Name		Payment Date			
3	Street Address		<u> </u>			
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address		1.			
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			****
	Street Address		<u> </u>			
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
1	Enter total only if last page of sched	L dule		I		

Schedule A(8), page \_\_\_\_ of \_\_\_



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

/		Payor I	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	ı	Name					
		Street Address					
1	<del>ا</del>	City	State	ZIP			
	,	Services or Goods Purchased		Payment Date			
		Name	<del></del>				
		Street Address					
2	2	City	State	ZIP			
	\$	Services or Goods Purchased	I	Payment Date			
		Name					
		Street Address					
3	3	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
		Name					
		Street Address					
4	4	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
	1	Name					
		Street Address					
5	5	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
		Enter total only if last page of schedule	." line 9)				



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

_	Infor	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	_		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	1		
	Name					
	Street Address					
2	City	State	ZIP	_		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name	ame				
	Street Address					
3	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-		
	Name					
	Street Address			-		
4	City	State	ZIP	1		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
$\frac{1}{1}$	Name					
	Street Address			-		
5	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-		

Schedule A(10), page \_\_\_\_ of \_\_\_



### TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

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

Schedule A(11), page \_\_\_\_ of \_\_\_\_



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Sou	rce Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City	State	ZIP		:	
	Receipt Type		Receipt Date			
	Name					
	Street Address  City	State	ZIP			
	Receipt Type	Ciaic	Receipt Date			
1	Name					
	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
-	Street Address					
	City	State	ZIP			
ľ	Receipt Type  Enter total only if last page of schedu		Receipt Date			

Schedule A(12), page \_\_\_\_ of \_\_\_



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Address  of Operating Expense Paid  Address  Address	Disbursement Dat  Disbursement Dat	ZIP  ose? (PACs and Political Parties Only)	☐ Cash☐ Credit☐		
of Operating Expense Paid  Address  of Operating Expense Paid	Non-Electoral Purp  Disbursement Dat  State  Non-Electoral Purp	e ZIP	□ Credit		
Address of Operating Expense Paid	Non-Electoral Purp  Disbursement Dat  State  Non-Electoral Purp	e ZIP	□ Credit		
Address of Operating Expense Paid	Disbursement Dat  Disbursement Dat	e ZIP	□ Credit		
of Operating Expense Paid	State  Non-Electoral Purp	ZIP			
of Operating Expense Paid	Non-Electoral Purp				
	Non-Electoral Purp				
		ose? (PACs and Political Parties Only)			
Address			☐ Credit		
Address	Disbursement Date				
		<u></u>			
	State	ZJP	□ Cash		
of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)			
	Disbursement Date				
Address					
	State	ZiP			
of Operating Expense Paid		ose? (PACs and Political Parties Only)	□ Cash □ Credit		
	Disbursement Dat	te			
Address			_		
	State	ZIP	 □ Cash		
of Operating Expense Paid		ose? (PACs and Political Parties Only)	□ Credit		
Enter total only if last page of schedule					
Ad	dress Operating Expense Paid	Disbursement Dal  dress  State  State  Deparating Expense Paid  Disbursement Dal	Disbursement Date  Disbursement Date  State ZIP  Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)  Understood only if last page of schedule	Disbursement Date    Disbursement Date	Disbursement Date    Disbursement Date



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committ	ee Recipient Infor	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	_				
	Street Address	<del></del>				
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made	.1	☐ Cash☐ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number Date Contribution Made			□ Cash □ Credit		
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made	1	□ Cash □ Credit		
-	Committee Name	1				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made	1	□ Cash □ Credit		
	Enter total only if last page of schedule	ements." line 2(a))				



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

_	Political Action	Committee Recipient Ir	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	ddress				
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
	Committee Name					
	Street Address					
2	City	State ZIP		□ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	е	□ Credit		
	Committee Name	·····				
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Mad	e	☐ Credit		
_	Enter total only if last page of so					
						/



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

Politi	ical Party Recipient Informat	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Committee Name					
Street Address					
City State ZIP		ZIP			
Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
Committee Name					
Street Address		····			
City State ZIP					
Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
Committee Name	ommittee Name				
Street Address					
		<b></b>			
City	State	ZIP	□ Cash		
Committee ID Number Date Contribution Made			☐ Credit		
Committee Name					
Street Address					
City	State	ZIP	□ Cash		
Committee ID Number	Date Contribution Made	<u> </u>	□ Cash □ Credit		
Committee Name	L				
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Made	1	□ Cash □ Credit		
Enter total only if last page of	f schedule	·····			



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	hip Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name	-				
	Street Address					
	City State ZIP		ZIP			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
1	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
;	City	State	ZIP			
	Corporation Commission File Number	Date Contribution N	lade	□ Cash □ Credit		
	Partnership Name					
	Street Address					
ŀ	City	State	ZIP			
	Corporation Commission File Number	Date Contribution N	I	☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
5	City	State ZIP		□ Cash		
	Corporation Commission File Number	Corporation Commission File Number Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule					



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

/	Corporation	n / LLC Recipient Inform	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Corporation/LLC Name						
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Made	1	□ Cash □ Credit			
	Corporation/LLC Name						
	Street Address						
2	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Made	•	□ Credit	☐ Credit		
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Made	·	□ Credit			
	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Made		☐ Credit			
	Corporation/LLC Name			******			
	Street Address	Street Address					
5	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Corporation Commission File Number Date Contribution Made		□ Credit			
	Enter total only if last page of sch						



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	nization Recipient Info	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Labor Organization Name	·				
	Street Address					
ı	City State ZIP		□ Cash			
	Corporation Commission File Number	☐ Credit				
	Labor Organization Name					
	Street Address					
2	City State ZIP		□ Cash			
	Corporation Commission File Number	☐ Credit		-		
1	Labor Organization Name					
	Street Address					
;	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	nde	☐ Credit		
	Labor Organization Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	☐ Credit		
-	Labor Organization Name	· <b>L</b>	. <u></u>			
	Street Address		,,,,,,,,			
•	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	□ Credit		
	Enter total only if last page of sci					



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Contrib	utor Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address		<del></del>			
1	City	State	ZIP			
	Committee ID Number	Date of Original Contribution				
	Committee Name	Date Refund Received				
	Street Address	Street Address				
2	City	State	ZIP			
	Committee ID Number	Date of Original Contribution				
	Committee Name	Committee Name				
-	Street Address					
3	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	_		
	Committee Name	Committee Name				
	Street Address					
		<del></del>	ZIP	_		
5	City	State	217	<b> </b>		

Schedule B(2)(h), page \_\_\_\_ of



LOANS MADE: SCHEDULE B(3)(a)

	Borrow	er Information		Amount Loaned	Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address				,	
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address	, <sub>1,1</sub> - <sub>1</sub> , - = -				
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	.,,,			
	Borrower Name					
	Street Address					
3	City	State	ZIP			
	uarantor/Endorser Name Date Loan Made				,	
	Вогтоwer Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address	******				
5	City	State	ZIP			
	Guarantor/Endorser Name	Guarantor/Endorser Name Date Loan Made				
	Enter total only if last page of schedul					



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

_	G	uarantor Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address			-		
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	<u>l</u>			
	Guarantor Name	l				
	reet Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed		_		
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Воггоwer Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address	-				
5	City	State	ZIP	-		
	Borrower Name	Date Loan Guaranteed	_1			



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

	Borrowe	er Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstand	ing			
_	Borrower Name	Date Forgiveness Made				
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstand	ing			
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstand	ing			
	Borrower Name	Borrower Name				
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstand	ing			
_	Волгоwer Name	Date Forgíveness Made				
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstand				

Schedule B(3)(c), page \_\_\_\_ of \_\_\_\_



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

/	Lender	Information		Amount Repaid	Cumulative Amount this	Cumulative Amount this
_	Lender Name		Data Barray and Mada		Reporting Period	Election Cycle
	Lender Name	Date Repayment Made				
	Street Address	<u> </u>	-			
1	City	State	ZIP	-		
İ	Original Amount Borrowed	Amount Still Outstanding	1	1		
	Lender Name		Date Repayment Made			
	Street Address					
2		1	T	_		
-	City	State	ZIP			İ
	Original Amount Borrowed	Amount Still Outstanding	İ	4		
	Original Amount Borrowed	Amount Suit Outstanding				
$\vdash$	Lender Name	<u> </u>	Date Repayment Made			
						ĺ
	Street Address			1		
١.						
3	City	State	ZIP	1		
				_		
	Original Amount Borrowed Amount Still Outstanding					
L		L	1			
	Lender Name		Date Repayment Made			
	Street Address			4		
4	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		1		
	Lender Name		Date Repayment Made			
		_				
	Street Address					
5		T.	I	4		
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>	-		
	S. S. S. STORIG DOTOTED	Seriount Sun Outstanding				
$\vdash$	Enter total only if last page of schedule	L	<u> </u>	<u> </u>		
L	(transfer the total disbursed this period to "Summary of Disburse	ments." line 3(d))				

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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
	Lender Name		Date Interest Accrued			
	Street Address			<u>-</u>		
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name		Date Interest Accrued			
	Street Address	·				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name	<b>_</b>	Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outst				

Schedule B(3)(e), page \_\_\_\_ of

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

Street Address  1 City State ZiP Corporation Commission File Number (if applicable) Original Payment Amount Date of Original Payment Name of Original Payor Date Rebate/Refund Made  Street Address  2 City State ZiP Corporation Commission File Number (if applicable) Original Payment Amount Date of Original Payment Name of Original Payor Date Rebate/Refund Made  Street Address  3 City State ZiP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor  Name of Original Payor Date Rebate/Refund Made  Street Address  3 Name of Original Payor Date Rebate/Refund Made  Street Address  5 Street Address  5 Date Rebate/Refund Made Street Address  5 Street Address	Cumulative Amount this Election Cycle	Cumulative Amount this Reporting Period			cipient Information	Re	
Corporation Commission File Number (if applicable)  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  Date of Original Payment  Date of Original Payment  Date Rebate/Refund Made  Street Address  City State ZiP  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address  Name of Original Payor  Date Rebate/Refund Made  Date Rebate/Refund Made				Date Rebate/Refund Made		ne of Original Payor	
Corporation Commission File Number (if applicable)  Name of Original Payor  Date Rebate/Refund Made  Street Address  Zip  Corporation Commission File Number (if applicable)  Original Payment Amount  Date of Original Payment  Date of Original Payment  Date Rebate/Refund Made  Street Address  Zip  Corporation Commission File Number (if applicable)  Street Address  Zip  Date Rebate/Refund Made  Street Address  Jup  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address  Name of Original Payor  Date Rebate/Refund Made			1	L.		et Address	
Name of Original Payor    Date Rebate/Refund Made			-	ZIP	State		1
Street Address  City State ZIP  Corporation Commission File Number (if applicable) Original Payment Amount Date of Original Payment  Name of Original Payor Date Rebate/Refund Made  Street Address  City State ZIP  Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor  Name of Original Payor Date Rebate/Refund Made  Street Address			$\dashv$	Date of Original Payment	Original Payment Amount	poration Commission File Number (if applicable)	
City State ZIP  Corporation Commission File Number (if applicable) Original Payment Amount Date of Original Payment  Name of Original Payor Date Rebate/Refund Made  Street Address  City State ZIP  Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor  Name of Original Payor Date Rebate/Refund Made  Street Address  Street Address	1			Date Rebate/Refund Made		ie of Original Payor	
Corporation Commission File Number (if applicable)  Name of Original Payor  Date Rebate/Refund Made  Street Address  City  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Name of Original Payor  Date Rebate/Refund Made  Street Address  Date Rebate/Refund Made			-			et Address	
Name of Original Payor    Date Rebate/Refund Made			-	ZIP	State		2
Street Address  City State ZIP  Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor  Name of Original Payor Date Rebate/Refund Made  Street Address			-	Date of Original Payment	Original Payment Amount	oration Commission File Number (if applicable)	
City State ZIP  Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor  Name of Original Payor Date Rebate/Refund Made  Street Address				Date Rebate/Refund Made		ie of Original Payor	
Corporation Commission File Number (If applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address				<u> </u>	Street Address		
Corporation Commission File Number (If applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address							2
Name of Original Payor  Date Rebate/Refund Made  Street Address				ZIP	State		٦
Street Address				Name of Original Payor	Original Payment Amount	oration Commission File Number (if applicable)	
				Date Rebate/Refund Made	J	e of Original Payor	
4 City State ZIP						et Address	
'				ZIP	State		4
Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor			-	Name of Original Payor	Original Payment Amount	oration Commission File Number (if applicable)	
Name of Original Payor Date Rebate/Refund Made				Date Rebate/Refund Made	]	e of Original Payor	
Street Address						et Address	
5 City State ZIP			-	ZIP	State		5
Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor			_	Name of Original Payor	Original Payment Amount	oration Commission File Number (if applicable)	
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 4)			1				- 1

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IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

_	/	Candidate Committee	e Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name					`
		Street Address					
ŧ	1	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution I	Made			
ŀ		Committee Name	<u> </u>				
		Street Address					
	2	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
ŀ		Committee Name	<u> </u>				
		Street Address					
	3	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
-		Committee Name	<u> </u>				
		Street Address	, , , , , , , , , , , , , , , , , , , ,				
	4	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			,
		Committee Name	L				
		Street Address					
	5	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
F		Enter total only if last page of schedule			1		
L		(transfer the total disbursed this period to "Summary of Disburse	ments." line 5(a))			1	

Schedule B(5)(a), page \_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/	/	Political Action Commi	ttee Recipient Inf	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name					
		Street Address					
1	1	City	State	ZIP	-		
		Committee ID Number	Date In-Kind Contribution	Made			
		Committee Name	<u> </u>				
	Street Address				-		
1	2	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
		Committee Name	<u> </u>				
		Street Address		<del></del>			
;	3	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
		Committee Name					
		Street Address					
4	4	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
-		Committee Name	<u> </u>				
		Street Address					
5	5	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
	- 1	Enter total only if last page of schedule	L				
、 ┗	_	transfer the total disbursed this period to "Summary of Disburse	ments." line 5(b))				

Schedule B(5)(b), page \_\_\_ of \_\_\_



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

•	Political Party	Recipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name		<del> </del>			
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Enter total only if last page of schedu		,			



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

,	Partners	ship Recipient Informa		Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					reporting Ferrod	Election Cycle
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribut	on Made				
	Partnership Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribut	ion Made				
_	Partnership Name						
	Street Address	Street Address					
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribut	ion Made				
	Partnership Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribut	ion Made				
	Partnership Name						
	Street Address	Street Address					
5	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribut	ion Made				
_	Enter total only if last page of sch	edule					



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

				Amount	Cumulative	Cumulative
	Corporation	/ LLC Recipient Inform	nation	Contributed	Amount this Reporting Period	Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Made			
	Corporation/LLC Name					
	Street Address	<del></del>				
2		OLA L	ZIP			
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	on Made			ĺ
	Corporation/LLC Name					
	Street Address					
3		I_	Tana Tana			
•	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Corporation/LLC Name					
	Street Address					
4						
_	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ion Made			
	Corporation/LLC Name					
	Street Address					
5						
_	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Made			
	Enter total only if last page of sch					<del> </del>

Schedule B(5)(e), page \_\_\_\_ of \_\_\_



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	/				ı		
	•	Labor Organization	Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Labor Organization Name					
		Street Address					
1	1	City	State	ZIP		,	
		Corporation Commission File Number	Date In-Kind Contribution	Made			
-		Labor Organization Name					
		Street Address					
2	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Labor Organization Name	<u> </u>				
		Street Address					
3	3	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	<u>I</u> Made			
		Labor Organization Name					
		Street Address					
4	۱ ا	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Labor Organization Name					
		Street Address				{	
5	֓֓֓֜֜֜֜֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓֓֡֓֓֡	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
	- 1	Enter total only if last page of schedule					

Schedule B(5)(f), page \_\_\_ of \_\_\_



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure F	Recipient Informat	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mall, etc)			
	Street Address		_1	1		
1	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	Luding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit	:	
_	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address		-			
2	City	State	ZIP			
	Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % supported)		Including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
	Candidate(s) Supported (including % supported)	ncluding % opposed)	☐ Cash			
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ □ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		<u> </u>	1		
4	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % opposed)		□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
_	Enter total only if last page of schedu			·· <del>·</del>		



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure	Recipient Inforn	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Recipient Name		Mode of Advertising (TV, mail, et	с)		
	Street Address					
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Bailot Measure(s) Opp	posed (including % opposed)			
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc	)		
	Street Address					
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)			☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
	Recipient Name	,	Mode of Advertising (TV, mail, etc	)		
	Street Address					
3	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opp	osed (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
1	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opp	osed (including % opposed)	☐ Cash		
	ate of First Publication, Display, Delivery, or Broadcast Election Month/Year		□ Credit			
ı	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbu					



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

	Expenditure F	Recipient Informa	ition	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative ` Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be	Recalled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name	<u>L</u>	Mode of Advertising (TV, mail, etc)			
	Street Address			_		
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	ing Issuance of Recall Order?  Candidate Sought to be Re		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		1			
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be	Recalled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
1	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be	Recalled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	ublication, Display, Delivery, or Broadcast Office Held		_ □ Credit		
	Enter total only if last page of schedul					



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

_	Benefit	tted Candidate	Benefitted Candidate				
	Candidate Name		Date Benefit Provided				
	Street Address	— <del>- I</del>					
1	City	State	ZIP				
	Type of Benefit Provided						
	Notes:						
	Candidate Name	<u>.</u>	Date Benefit Provided			<u> </u>	
	Street Address	Street Address					
2	City	State	ZIP				
	Type of Benefit Provided	<u> </u>		1			
	Notes:			-			
	Candidate Name		Date Benefit Provided				
	Street Address		<b>. I</b>				
3	City	State	ZIP				
ļ	Type of Benefit Provided	ype of Benefit Provided					
	Notes:						
1	Candidate Name	<del></del>	Date Benefit Provided				
}	Street Address		I				
4	City	State	ZIP				
	Type of Benefit Provided	1	1				
	Notes:						
+	Enter total only if last page of schedule						

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JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient	Committee Inform	nation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP	□ Cash		l
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	spense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	(pense (if applicable)	□ Credit		
	Committee Name	<u> </u>	Payment Date			
	Street Address					
3	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	opense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address		· · · · · · · · · · · · · · · · · · ·			
4	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	rpense (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)		□ Credit			
	Enter total only if last page of schedule			I was		
	(transfer the total disbursed this period to "Summary of I	Disbursements," line 10)				



REIMBURSEMENTS MADE: SCHEDULE B(11)

	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
5	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Catacata and Mark Construction					
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburse					



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

/	Debt In	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed	I	Date that Debt Accrued			
	Name		<u></u>			
	Street Address					
?	City	State	ZIP			
	Type of Account Payable or Debt Owed	<u> </u>	Date that Debt Accrued			
_	Name					
	Street Address			-		
3	City	State	ZIP	_		
	Type of Account Payable or Debt Owed	1	Date that Debt Accrued			
_	Name					
	Street Address		<u>.                                    </u>			
4	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
_	Name					
				_		
5	Street Address					
•	City	State	ZIP			
	Type of Account Payable or Debt Owed	Date that Debt Accrued				



## TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

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

Schedule A(13), page \_\_\_\_ of \_\_\_\_



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

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