

Committee Information:	Committee Name: Jacob Pritchett for Chandler	
E INFORMATION (only if f	īling as a candidate committee):	
TE INFORMATION (only if f	iling as a candidate committee): □ Statewide Office:	☐ State Legislature:

REPORTING PERIOD (check one):

	REPORTING PERIOD	REPORT DUE
	2016 4 th Quarter Report: October 28, 2016 to December 31, 2016	January 1, 2017 to January 15, 2017
	2017 March Pre-Election Report (Local Only): January 1, 2017 to February 25, 2017	February 26, 2017 to March 4, 2017
	2017 1st Quarter Report (Local Only): February 26, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
	2017 1st Quarter Report: January 1, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
	2017 May Pre-Election Report (Local Only): April 1, 2017 to April 29, 2017	April 30 , 2017 to May 6, 2017
	2017 2 nd Quarter Report (Local Only): April 30, 2017 to June 30, 2017	July 1, 2017 to July 15, 2017
	2017 2 nd Quarter Report: April 1, 2017 to June 30, 2017	July 1, 2017 to July 15, 2017
	2017 August Pre-Election Report (Local Only): July 1, 2017 to August 12, 2017	August 13, 2017 to August 19, 2017
	2017 3 rd Quarter Report (Local Only): August 13, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
	2017 3 rd Quarter Report: July 1, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
	2017 October Pre-Election Report (Local Only): October 1, 2017 to October 21, 2017	October 22, 2017 to October 28, 2017
	2017 4 th Quarter Report (Local Only): October 22, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
	2017 4 th Quarter Report: October 1, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
	2018 March Pre-Election Report (Local Only): January 1, 2018 to February 24, 2018	February 25, 2018 to March 3, 2018
	2018 1st Quarter Report (Local Only): February 25, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
	2018 1st Quarter Report: January 1, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
	2018 May Pre-Election Report (Local Only): April 1, 2018 to April 28, 2018	April 29 , 2018 to May 7, 2018*
	2018 2 nd Quarter Report (Local Only): April 29, 2018 to June 30, 2018	July 1, 2018 to July 16, 2018*
	2018 2 nd Quarter Report: April 1, 2018 to June 30, 2018	July 1, 2018 to July 16, 2018*
	2018 August Pre-Election Report: July 1, 2018 to August 11, 2018	August 12, 2018 to August 20, 2018*
	2018 3 rd Quarter Report: August 12, 2018 to September 30, 2018	October 1, 2018 to October 15, 2018
	2018 October Pre-Election Report: October 1, 2018 to October 20, 2018	October 21, 2018 to October 29, 2018*
	2018 4 th Quarter Report: October 21, 2018 to December 31, 2018	January 1, 2019 to January 15, 2019
T	Final Campaign Finance Report Prior to Committee Termination	End of Previous Period through Today's Date

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
 (a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period) 	\$ 3,037.11	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 23.89	\$ 3,238.99
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting pe	eriod) \$ 0.00	\$ 138.99
(d) = Balance at close of reporting period	\$ 3,061.00	

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

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity.

All reports are deemed to be filed under penalty of perjury by the committee treasurer (all committees) and candidate (candidate committees only).

SUMMARY OF RECEIPTS (Schedule A):

/			
	Receipts	Cash	Equity
/ 1.	Monetary Contributions Received		
/	(a) Individuals - More than \$50	\$ 100.00	
	(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)		
		\$ 123.89	
	(i) Candidate's Personal Monies (Candidate Committees Only)	\$ 223.89	
	(j) Monetary Contributions Subtotal (add 1(a) through 1(i))	\$ 200.00	
	(k) Refunds Given Back to Contributors	\$ 23.89	
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))	\$ 23.09	
_2	Loans (a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	\$ 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)	Min W 2 Walt 1	
	(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)		
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)	\$ 23.89	\$ 0.00

SUMMARY OF DISBURSEMENTS (Schedule B):

,			
	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses		
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
-			
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	\$ 0.00	
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))	\$ 0.00	
3.	Loans	¥	
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
-	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))	\$ 0.00	\$ 0.00
4.	Rebates and Refunds Made (Non-Contributions)	V 0.00	
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.			
12.			
_13.			
14.			
15.			
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)

/	Individual	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Cliff Maloney Street Address		Date Contribution Received 04/30/2018			
1	805 N Howard St Apt 244			\$ 100.00	\$ 100.00	\$ 100.00
1	Alexandria	State VA	^{ZIP} 22304-5468		Ç 100.00	7 100.00
	Executive Director	Young A	Americans for Liberty			
	Name	-	Date Contribution Received			
	Street Address			-		
2	City	State	ZIP	1		
	Occupation	Employer		1		
	Name		Date Contribution Received			
	Street Address				:	
3	City	State	ZIP	-		
	Occupation	Employer	<u>J</u>	1		
	Name		Date Contribution Received			
	Street Address			-		
4	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address			_		
5	City	State	ZIP	-		
	Occupation	Employer		-		

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

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



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

SCHEDULE A(1)(b)

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

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

/	Candidate Commit	tee Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name				_	
	Street Address				!	
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	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 Receiv	ed			
	Committee Name	1				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name	<u> </u>	- 			
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Enter total only if last page of schedul					



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

Political Action	Committee Contribut	or Information	Amount Received	Cumulative Amount this	Cumulative Amount this
Committee Name				Reporting Period	Election Cycle
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution	Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution	Received			
Committee Name		<u></u>			
Street Address					
City	State	ZIP		:	
Committee ID Number	Date Contribution	Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution	Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution	Received			
	Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee ID Number Committee ID Number Committee Name Street Address City Committee Name Street Address City Committee ID Number	Committee Name Street Address City State Committee ID Number Date Contribution Street Address City State Committee ID Number Date Contribution Committee ID Number Date Contribution Committee Name Street Address City State Committee ID Number Date Contribution Committee ID Number Date Contribution Committee ID Number State Committee ID Number State Committee Name Street Address City State	Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee ID Number Street Address City State ZIP Committee Name Street Address Street Address City State ZIP	Street Address Street Address Committee ID Number Date Contribution Received Street Address City State ZIP Committee ID Number Date Contribution Received Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Street Address City State ZIP Committee ID Number ZIP Committee ID Number ZIP Committee ID Number ZIP Committee ID Number ZIP Committee Name	Committee Name Street Address Chy State ZIP Committee ID Number Date Contribution Received Chy State ZIP Committee ID Number Date Contribution Received Chy State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

/				ı	1	
,	Political Party Co	ntributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u>1</u> d			
	Committee Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed .			
	Committee Name		· · · · · · · · · · · · · · · · · · ·			
	Street Address		77 - 10 1WWW			
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			
	Committee Name					······································
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed .			
	Enter total only if last page of schedule	line 1(e))		<u> </u>		

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

	Partnershi	p Contributor Informa	ation	Amount Rece	ived Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rec	eeived			
_	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Re	ceived			
	Partnership Name					
	Street Address					
3	City	State	ZiP			
	Corporation Commission File Number	Date Contribution Re	ceived			
	Partnership Name	L			-	
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Re-	ceived			
_	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Re	ceived			

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

/	Corporation /	LLC Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				J. J	
	Street Address					
1	City	State	ZIP			
	Consisting Commission File Number	Date Contribution Rec	physic			
	Corporation Commission File Number	Date Contibution Rec	erveu	·		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Red	reived			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rec	reived			
	Corporation/LLC Name	I				
	Street Address					
	I					
4	City	State	ZIP			
4	City Corporation Commission File Number	State Date Contribution Rec				
4						
4	Corporation Commission File Number					
5	Corporation Commission File Number Corporation/LLC Name					

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

,						
/	Labor Organizati	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 Receiv	ed			
	Labor Organization Name					
2	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Labor Organization Name					
-	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Labor Organization Name					
	Street Address		· · · · · · · · · · · · · · · · · · ·			
4	City	State	ZIP			
	Cornoration Commission File Number	Date Contribution Receiv	red			
	Corporation Commission File Number Date Contribution Received					
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
_	Enter total only if last page of schedu					



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

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

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

/	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			
	Street Address					
1	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			- -
	Street Address		,			
2	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution	_		
	Name		Date Contribution Refunded			
	Street Address					
3	City	State	ZIP	_		
	ID Number (if applicable)		Date of Original Contribution	_		
	Name		Date Contribution Refunded			
	Street Address		1			
4	City	State	ZIP	_		
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address	Street Address				
5	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
_	Enter total only if last page of schedule					

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



LOANS RECEIVED: SCHEDULE A(2)(a)

/	/ l anda			1	l	,
	Lende	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
L	ender Name Date Loan Received					
S	Street Address					
1 0	City	State	ZIP	-		
c	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
L	Lender Name	Date Loan Received			<u> </u>	
s	Street Address	fress				
2 c	City	State	ZIP	-		
G	Guarantor/Endorser Name	Non-Electoral Purpose?	Non-Electoral Purpose? (PACs and Political Parties Only)			
L	Lender Name	Date Loan Received	· · · . ·			***************************************
s	Street Address	<u> </u>				
3 c	City	State	ZIP			
G	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
Li	Lender Name	Date Loan Received				
s	Street Address					
4 c	City	State	ZIP			
G	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	-		1
L	ender Name	Date Loan Received				
s	Street Address					l
5 c	City	State	ZIP			1
G	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
F	Enter total only if last page of schedule			Ì		

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



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

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

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

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	,						
	/	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Borrower Name		Date Repayment Received			
		Street Address					
	1	City	State	ZIP			
į							
		Original Amount Borrowed	Amount Still Outstanding				
		Borrower Name	•	Date Repayment Received			
		Street Address					
	2	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
Ī		Borrower Name	•	Date Repayment Received			
		Street Address					
	3	City	State	ZIP			
İ							
		Original Amount Borrowed	Amount Still Outstanding				
		Borrower Name		Date Repayment Received			
1		Street Address		L			
	4	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
		Borrower Name		Date Repayment Received			
		Street Address		I			
	5	City	State	ZIP			
		Chinal America December	Amount Call Control				
		Original Amount Borrowed	Arnouлt Still Outstanding				
		Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 2(c))				
\ L		Indicate Courted and Define to Guilling of Receipts.	21011				

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

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

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

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

REBATES AND REFUNDS RECEIVED:

Enter total only if last page of schedule
(transfer the total received this period to "Summary of Receipts." line 3)

COMMITTEE ID NUMBER

SCHEDULE A(3)

Cumulative Cumulative Amount Rebated Payor Information Amount this Amount this or Refunded Reporting Period Election Cycle Payor Name Date Rebate/Refund Received Street Address 1 City Original Purchase Amount Reason for Refund/Rebate Borrower Name Date Rebate/Refund Received Street Address 2 ZIP City State Original Purchase Amount Reason for Refund/Rebate Date Rebate/Refund Received Borrower Name Street Address 3 City ZIP State Original Purchase Amount Reason for Refund/Rebate Date Rebate/Refund Received Borrower Name Street Address City State ŻΙΡ Reason for Refund/Rebate Original Purchase Amount Borrower Name Date Rebate/Refund Received Street Address 5 City State ZIP Original Purchase Amount Reason for Refund/Rebate

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)

/	Individ	lual Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address		<u> </u>			
1	City	State	ZIP	-		
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address			_		
2	City	State	ZIP			
	Occupation	Employer		_		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
3	City	State	ZIP			
	Occupation	Employer		_		
	N 1 (N)		Taxana a a a a a a a a a a a a a a a a a			
	Name		Date In-Kind Contribution Received	_		
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address			1		
5	City	State	ZIP	1		
J						

*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)

Period	Cycle
	Period

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

/	Candidate	e 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 Contr	ibution Received			
	Committee Name					
	Street Address			·········		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received			
_	Committee Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	l ribution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Committee Name	l				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ribution Received			
	Enter total only if last page o				-	



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

/	Political Action Committ	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
-	Committee Name					
	Street Address					
2	City	State	ZIP			ļ
	Committee ID Number	Date In-Kind Contribution	Received	_		
_	Committee Name					
	Street Address					
3						
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID 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(d))				

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Political Party Co	entributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			-		
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Received			
	Committee Name	1				
	Street Address			-		
2	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received	1		
7	Committee Name					
	Street Address			-		
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	LReceived			
	Committee Name					
	Street Address			1		
4	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received	<u> </u>		
	Committee Name					
	Street Address			-		
5	City	State	ZIP	-		
-	Committee ID Number	Date In-Kind Contribution	Received	1		

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

	Partnership	Contributor Informa	ation	Amount Receive	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ution Received			
_	Partnership Name					_
	Street Address					
2	City	State	ZIP	<u> </u>		
	Corporation Commission File Number	Date In-Kind Contribu	ution Received			
	Partnership Name					
3	Street Address		·			
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Received			
_	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Received		1	
	Partnership Name	Partnership Name				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	I oution 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						
		Street Address						
	1	City	State	ZIP				
		Oily	State				; 	
		Corporation Commission File Number	Date In-Kind Contribution	Received				
		Corporation/LLC Name					<u> </u>	
		Street Address						
	2							
	_	City	State	ZIP				
		Corporation Commission File Number	Date In-Kind Contribution	Received				
İ		Corporation/LLC Name						
		Street Address						
	2		<u>,</u>					
	3	City	State	ZIP				
:		Corporation Commission File Number	Date In-Kind Contribution	Received				
		Corporation/LLC Name						
		Street Address						
		GUECH AND ESS						
İ	4	City	State	ZIP				
		Corporation Commission File Number	Date In-Kind Contribution	Received				
\mid		Corporation/LLC Name						
		Street Address						
	5	order radios						
	J	City	State	ZIP				
		Corporation Commission File Number	Date In-Kind Contribution	Received				
		Enter total only if last page of schedule						/
\		(transfer the total received this period to "Summary of Receipts."	line 5(a))					/

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

	Labor Organiza	tion Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Received			
	Labor Organization Name	<u> </u>				
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	I tion Received			

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



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

SCHEDULE A(5)(i)

	Candid	ate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address			-		
1	City	State	ZIP			
	Asset or Property Contributed			-		
	Name	·	Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP			
	Asset or Property Contributed			-		
7	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP			
	Asset or Property Contributed	<u> </u>				
- 1	Enter total only if last page of schedule					



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

SCHEDULE A(5)(e)

	Source I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address			_		
1	City	State	ZIP	_		
	Type of Item Donated			-		
	Name		Date In-Kind Donation Received			
	Street Address					
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		Date In-Kind Donation Received			
	Street Address			_		ı
4	City	State	ZIP		•	ı
	Type of Item Donated		<u></u>			ı
_	Name		Date In-Kind Donation Received	+		
	Street Address			-	:	l
5	City	State	ZIP	-		l
	Type of Item Donated			-		l
_	Enter total only if last page of schedule					

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



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	City	State	ZIP	-		
	Services or Goods Provided on Credit		Date of Extension of Credit	_		
\vdash	Name					
	Street Address			-		
2	City	State	ZIP			
i	Services or Goods Provided on Credit		Date of Extension of Credit			
_	Name					
:	Street Address			-		
3	City	State	ZIP	<u> </u>		
	Services or Goods Provided on Credit		Date of Extension of Credit	<u> </u>		
_	Name					
	Street Address			<u> </u>		
4	City	State	ZIP	-		
		Joine		-		
L	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
5	Street Address	Ι.	L			
	City	State	ZIP			
_	Services or Goods Provided on Credit		Date of Extension of Credit			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 7(a))				

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



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					
1	City	State	ZIP			
	Continue of Continue No. Described on Contin		Date of Original Extension of Credit			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit	<u></u>	Date of Original Extension of Credit			
_	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit Di		Date of Original Extension of Credit			
	Name		<u> </u>			
	Street Address					
5		T				
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Enter total only if last page of schedule		L	1		

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

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

Schedule A(8), page ____ of ___



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

		nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City	State	ZIP	_		
	Services or Goods Purchased		Payment Date			
	Name	***				
	Street Address			-		
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date	_		
	Name					
	Street Address					
3	City	State	ŻIP	+		
	Services or Goods Purchased	<u> </u>	Payment Date	-		
	Name		.1			
	Street Address		1 - 10 - 10 - 10			
4	City	State	ZIP			
	Services or Goods Purchased	d	Payment Date			
	Name					
_	Street Address	· · · · · · · · · · · · · · · · · · ·				
5	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."					

Schedule A(9), page ____ of ___



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/	Info	mation		Amount	Cumulative Amount this	Cumulative Amount this
	Name		Reporting Period	Election Cycle		
	Street Address					
1	City	State	ZIP	_		
	Type of Account Receivable or Debt Owed	<u> </u>	Date that Debt Accrued			
	Name		1			
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed	•	Date that Debt Accrued			
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed	A	Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed	I	Date that Debt Accrued			
	Enter total only if last page of schedule		1	l		

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)

	Soi	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					
1	Street Address					
	City	State	ZiP			
	Receipt Type	Receipt Date				
2	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
3	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
4	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
5	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of scheo					



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	F	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	e Disbursement Date				
	treet Address					
1	City	State	ZIP			
	Type of Operating Expense Paid		ose? (PACs and Political Parties Only)	□ Cash □ Credit		
	ame Disbursement Date					
	treet Address					
2	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purp	ose? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Dat	e			
	Street Address					
3	City	State	ZIP	☐ Cash		
	Type of Operating Expense Paid	Non-Electoral Purp	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Dat	ve			
	Street Address	Street Address				
4	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purp	ose? (PACs and Political Parties Only)	☐ Cash ☐ Credit		
	Name	Disbursement Dat	e			
	Street Address	I				
5	City	State	ZIP	□ Cash □ Credit		
	Type of Operating Expense Paid	Non-Electoral Purp	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Enter total only if last page of so	chedule				
	(transfer the total disbursed this period to "Summa	ry of Disbursements," line 1)				



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate	Committee Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				·
	Street Address	Street Address				
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	1				
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number	ommittee ID Number Date Contribution Made				
	Committee Name	•				
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
_	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of s					
		O-h-	dule B(2)(a), pag			



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Act	ion Committee Recipien	t Information	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					
2	City	State ZIP				
	Committee ID Number	Date Contribution N	Aade	□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution N	Made	□ Cash □ Credit		
-	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution N	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
	City	State	ZIP	FI 01		
5				□ Cash		
5	Committee ID Number	Date Contribution N	Made	☐ Credit		



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party Re	ecipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name				Reporting Period	Liection Cycle
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made	<u> </u>	□ Cash □ Credit		
	Committee Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made	I	□ Cash □ Credit		
_	Committee Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	<u> </u>	☐ Cash		
	Enter total only if last page of schedule	L		1		`



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

				1	1	l <u>-</u> \
	Partnership Re	cipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					, , , , , , , , , , , , , , , , , , , ,
-	Street Address					
1	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Made		_ □ Cash □ Credit		
+	Partnership Name	1			<u> </u>	
-	Street Address	-				
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
_	Partnership Name					
-	Street Address			<u> </u>		
3	City State ZIP					
			ZIP	☐ Cash☐ Credit		
\downarrow	Corporation Commission File Number Date Contribution Made			Li Credit		
[Partnership Name					
	Street Address					
4	City	State	ŽIP	☐ Cash		
Ī	Corporation Commission File Number	Date Contribution Made		☐ Credit		
7	Partnership Name	-L				
-	Street Address					
5	City	State	ZIP	-		
-	Corporation Commission File Number	Date Contribution Made	<u> </u>	☐ Cash☐ Credit		
+	Enter total only if last page of schedule	<u> </u>		1		



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	ı / LLC Recipient Info	rmation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Corporation/LLC Name						
	Street Address						
1	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Credit			
	Corporation/LLC Name	1					
	Street Address						
2	City State ZIP						
	Corporation Commission File Number	Date Contribution M	ade	☐ Cash	☐ Cash ☐ Credit		
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP	□ Cash			
	Corporation Commission File Number	oration Commission File Number Date Contribution Made					
	Corporation/LLC Name	L					
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date Contribution M	ade	☐ Cash☐ Credit			
	Corporation/LLC Name						
	Street Address						
5	City	State ZIP					
	Corporation Commission File Number	Date Contribution M	ade	□ Cash □ Credit			
	Enter total only if last page of sch						



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orga	nization Recipient In	formation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
	City State ZIP Corporation Commission File Number Date Contribution Made					
			☐ Cash☐ Credit			
1	Labor Organization Name					
	Street Address					
2	City		ZIP			
	Corporation Commission File Number	Date Contribution	Made	☐ Cash☐ Credit		
-	Labor Organization Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	☐ Credit		
	abor Organization Name				-	
	Street Address					
	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution	Made	☐ Credit		
-	Labor Organization Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	☐ Cash		
	Enter total only if last page of scl			<u>,</u>		



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

Co	ontributor Informatio	n	Amount Refunded		Cumulative Amount this Election Cycle
Committee Name		Date Refund Received			
Street Address		I			
City	State	ZIP			
Committee ID Number		Date of Original Contribution			
Committee Name		Date Refund Received			
Street Address					
City	State	ZIP			
Committee ID Number		Date of Original Contribution	1		
Committee Name		Date Refund Received			
Street Address			1		
City	State	ZIP	-		
Committee ID Number		Date of Original Contribution	_		
Committee Name		Date Refund Received			
Street Address			_		
City	State	ZIP	-		
Committee ID Number	L	Date of Original Contribution	-		
Committee Name		Date Refund Received			
Street Address			-		
City	State	ZIP	1		
Committee ID Number		Date of Original Contribution	\dashv		
	Committee Name Street Address City Committee ID Number Street Address City Committee ID Number Committee Name Street Address City Committee ID Number Street Address City Committee ID Number Committee ID Number Committee ID Number Committee ID Number Street Address City Committee Name Street Address City Committee ID Number	Committee Name Street Address City State Committee ID Number Street Address City State Committee ID Number Committee Name Street Address City State Committee Name Street Address City State Committee ID Number Committee ID Number Committee ID Number Committee ID Number Street Address City State Street Address City State	Street Address City State ZIP Committee ID Number Date of Original Contribution Committee Name Date Refund Received Street Address City State ZIP Committee ID Number Date of Original Contribution Committee Name Date Refund Received Street Address City State ZIP Committee Name Date Refund Received Street Address City State ZIP Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee Name Date Refund Received Street Address City State ZIP Committee Name Date Refund Received Street Address City State ZIP Committee Name Date Refund Received Street Address	Street Address City State ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Street Address City Date of Original Contribution Date of Original Contribution Date of Original Contribution Date of Original Contribution Date of Original Contribution	Contributor Information Amount Refunded Amount this Reporting Period Steel Address City Stell ZIP Committee ID Number Date of Original Contribution Steel Address City Steel Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Street Address City State ZIP Committee ID Number Date of Original Contribution Date of Original Contribution Date of Original Contribution Committee ID Number Date of Original Contribution Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution

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



SCHEDULE B(3)(a)

LOANS MADE:

/		Borrower Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name				1	
	Street Address					
3		State	ZIP			
	City		ZIF			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
•	Borrower Name					
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				ŧ
	Enter total only if last page of	schedule				
	(transfer the total received this period to "Sumr					

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



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

_	Guaranto	Guarantor Information Guarantor Name				Cumulative Amount this Election Cycle
	Street Address	Street Address				
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
2	Street Address City State ZIP					
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Sorrower Name Date Loan Guaranteed					
	Guarantor Name		_			
4	City	treet Address ity State ZIP				
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address			_		
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 3(b))				



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

Borrower Borrower Name Street Address	Information		Amount Forgiven	Cumulative Amount this	Cumulative Amount this
		l =		Reporting Period	Election Cycle
Street Address		Date Forgiveness Made			
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Borrower Name	<u></u>	Date Forgiveness Made			
Street Address		I			
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Borrower Name	<u></u>	Date Forgiveness Made	_		
Street Address					
City	State	ZIP	1		
Original Amount of Loan	Amount Still Outstanding	<u> </u>	<u>.</u>		
Borrower Name	<u> </u>	Date Forgiveness Made			
Street Address					
City	State	ZIP	<u> </u>		
Original Amount of Loan	Amount Still Outstanding	L	_		
Borrower Name	1	Date Forgiveness Made			
Street Address		-			
City	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding		-		
	City Drignal Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Enter total only if last page of schedule	City State Conginal Amount of Loan Amount Still Outstanding Borrower Name City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding	City State ZIP Drignal Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZIP Drignal Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZIP Orignal Amount of Loan Amount Still Outstanding Date Forgiveness Made Street Address City State ZIP Orignal Amount of Loan Amount Still Outstanding Date Forgiveness Made Street Address City State ZIP Orignal Amount of Loan Amount Still Outstanding Date Forgiveness Made	City State ZIP Borrower Name Date Forgiveness Made City State ZIP Crignal Amount of Loan Amount Still Outstanding Date Forgiveness Made City State ZIP Crignal Amount of Loan Amount Still Outstanding Date Forgiveness Made Street Address City State ZIP Orignal Amount of Loan Amount Still Outstanding Date Forgiveness Made Street Address City State ZIP Orignal Amount of Loan Amount Still Outstanding Date Forgiveness Made Enter total only if last page of schedule	City State ZIP Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount State Outstanding Date Forgiveness Made ZIP Original Amount of Loan Amount State ZIP Street Address City State ZIP Original Amount of Loan Amount State ZIP Street Address City State ZIP Original Amount of Loan Amount State ZIP Street Address City State ZIP Original Amount of Loan Amount State State ZIP City State ZIP Original Amount of Loan Amount State State ZIP City State ZIP Original Amount of Loan Amount State State ZIP Original Amount of Loan Amount State ZIP Original Amount of Loan Amount State ZIP Original Amount of Loan Amount State ZIP Original Amount of Loan Amount State ZIP Original Amount of Loan Amount State ZIP Original Amount of Loan Amount State ZIP

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

_	Lender	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address		I	_		
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
			·			
	Lender Name		Date Repayment Made			
	Street Address	eet Address				
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		<u> </u> 		
	Lender Name		Date Repayment Made			
	Street Address				ļ	
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u>l.</u> , "			
\dashv	Lender Name		Date Repayment Made			
	Street Address					
4	City	State	ZIP			
	Manufacture .			_		
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding				
- 1				1		

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



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		1			
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name	Lender Name Date Interes				,
	Street Address		1			
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Lender Name		Date Interest Accrued			
	Street Address	.1	1			
3	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding	<u>l</u>	1		
r	Lender Name	1	Date Interest Accrued			
	Street Address	Street Address				
4	City	State	ZIP	1		
	Original Amount Borrowed Amount Still Outstanding		1	1		
	Lender Name	Lender Name				
	Street Address			1		
5	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule			1		

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	Rec	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Madc			
	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		I			
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
_	Name of Original Payor	l	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	<u> </u>	Date Rebate/Refund Made			
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor	<u> </u>	Date Rebate/Refund Made			
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	\dashv		

Schedule B(4), page ____ of



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

Candidate Comp			1	1	
<u></u>	nittee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address	Street Address				
City	State	ZIP			
Committee ID Number	Date In-Kind Contributi	on Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribut	tion Made		!	
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribut	tion Made			
Committee Name					
Street Address	·				
City	State	ZIP			
Committee ID Number	Date In-Kind Contribut	tion Made			
Committee Name	Committee Name				
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribut	tion Made			
	Committee ID Number Committee Name Street Address City Committee ID Number Street Address City Committee ID Number Street Address City Committee ID Number Committee ID Number Committee ID Number Street Address City Committee Name Street Address City Committee ID Number	Street Address City State Committee ID Number Date In-Kind Contribute Street Address City State Committee Name Street Address City State Committee Name Street Address City State Committee Name Street Address City State Committee ID Number Date In-Kind Contribute Street Address City State Committee Name Street Address City State Committee Name Street Address City State Committee ID Number Date In-Kind Contribute Committee Name	Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made	Skreet Address City State ZiP Committee ID Number Date In-Kind Contribution Made City State ZiP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made City State ZiP Committee Name City State ZiP Committee ID Number Date In-Kind Contribution Made City State ZiP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made	Silvest Address City State Committee ID Number Date In Nind Contribution Made Silvest Address City State City State Date In Nind Contribution Made Committee ID Number Date In Nind Contribution Made Committee ID Number Date In Nind Contribution Made Committee ID Number Date In Nind Contribution Made Committee ID Number Date In Nind Contribution Made Committee Name Silvest Address City State ZIP Committee ID Number Date In Nind Contribution Made Committee ID Number Date In Nind Contribution Made Committee ID Number Date In Nind Contribution Made

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

Political Action Committee Recipient Information Committee Name Street Address 1 City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address 3 City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address 4 City State ZIP Committee Name Street Address 4 City State ZIP Committee ID Number Date In-Kind Contribution Made			
Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
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 Made Committee Name Street Address 3 City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made			
Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date in-Kind Contribution Made			
Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee Name Street Address Committee Name Street Address Committee Name Date In-Kind Contribution Made			
Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made			
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Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Gity State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Gity State ZIP Committee Name Street Address Date In-Kind Contribution Made			
Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee Name Date In-Kind Contribution Made			
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Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made			
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Committee Name Street Address 4 City State ZIP Committee ID Number Date In-Kind Contribution Made			
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Gity State ZIP Committee ID Number Date In-Kind Contribution Made	į		
Committee ID Number Date In-Kind Contribution Made			
Committee Name			
Street Address			
5 City State ZIP			
Committee ID Number Date In-Kind Contribution Made			
Enter total only if last page of schedule			

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/						
	Political Party F	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					
	Street Address					
3	City	State	ZIP			
	Committee ID Number					
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number Date In-Kind Contribution Made					
	Committee Name	1				
	Street Address					
5	City	State	ZIP			
	Committee 1D Number	Date In-Kind Contribution	n Made			
	Enter total only if last page of schedule			! ; ; · · · · · · · · · · · · · · · · · 		

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ltion Made			
1	Partnership Name	<u>I</u>				
ŀ	Street Address					
2	City	State	ZIP			
}	Corporation Commission File Number	Date In-Kind Contribu	ution Made		-	
1	Partnership Name					
}	Street Address					
3	City	State	ZIP			
-	Corporation Commission File Number	Date In-Kind Contribu	ution Made			
1	Partnership Name					
	Street Address	Street Address				
4	City	State	ZIP			
}	Corporation Commission File Number	ssion File Number Date In-Kind Contribution Made				
+	Partnership Name					
	Street Address					
5	City	State	ZIP			
-	Corporation Commission File Number	Date In-Kind Contribu	ution Made			

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation / LLC	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Γ	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation Commission rate number	in the second				
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
\vdash	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	nmission File Number Date In-Kind Contribution Made				
F	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
		Date In Kind Contribution	Mada			
	Corporation Commission File Number	Corporation Commission File Number Date In-Kind Contribution Made				
	Corporation/LLC Name	Corporation/LLC Name				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
-	Enter total only if last page of schedule					
١L	(transfer the total disbursed this period to "Summary of Disbur				<u> </u>	

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Orga	nization Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name		7			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Made			
	Labor Organization Name					
3	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
1	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Labor Organization Name	 				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
+	Enter total only if last page of sch	nedule				

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



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/	Expenditure F	on 	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle	
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (incli	uding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	_		
	Candidate(s) Supported (including % supported)	uding % 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	1		
	Candidate(s) Supported (Including % supported)	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					
4	City	State	ZIP			
	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 schedul					



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure	ion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle	
	cipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	.1	-			
1	City	State	ZIP	_		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	-		
	Ballot Measure(s) Supported (including % supported)	ported (including % supported) Ballot Measure(s) 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					:
	City	State	ZIP			
ŀ	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP	-		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	i (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			☐ Credit		
-1	Enter total only if last page of schedul			1		



RECALL EXPENDITURES MADE: SCHEDULE B(8)

	Expenditure F	Recipient Informatio	Mode of Advertising (TV, mail, etc)	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address	Windle of Advertising (1 v) man, cloy	<u> </u> -			
		T				
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Re		alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
-	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	14 (0)	I			
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Re		alled	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Date of First Publication, Display, Delivery, or Broadcast Office Held				
F	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	-				
3	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled			☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	very, or Broadcast Office Held				
	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	te of First Publication, 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)

/	Benefi	tted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address		.1			
1	City	State	ZIP			
	Type of Benefit Provided	1	1			
	Notes:					
-	Candidate Name		Date Benefit Provided			
	Street Address					
2	City	State	ZIP			
	Type of Benefit Provided		J			
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address		1			
3	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address	Street Address				
4	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disbu	rsements," line 9)				

Schedule B(9), page ____ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient	Committee Inforr	mation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
Street Address						
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address		<u> </u>			
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	□ Cook		
	Date of Joint Fundralsing Event (if applicable) Type of Shared Expense		Expense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address	1				
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)		Expense (if applicable)	□ Cash □ Credit	!	
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 10)			I		



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	1,	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	<u> </u>	Reimbursement Date	□ Cash □ Credit		
_	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Reimbursed	I	Reimbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to *Summary of Disburse					

Schedule B(11), page ____ of ___



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

/	Debt In	formation		Amount	Cumulative Amount this	Cumulative Amount this
<u></u>	Name				Reporting Period	Election Cycle
	Street Address			_		
1	City	State	ZIP	_		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
_	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
2	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
4	Street Address	r-	,			
7	City	State	ZIP			
	Type of Account Payable or Debt Owed Date that Debt Accrued					
	Name					
5	Street Address					
	City Type of Account Payable or Debt Owed	State	ZIP Date that Debt Accrued	_		
	Type of Account Payable of Deol Owed	was mar pent reduced				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	' line 12)				

Schedule B(12), page ____ of ___



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					
	Street Address					
1	City		ZIP	- Cook		
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
2	City		ZIP			
	Disbursement Type	<u> </u>	Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
4	City		ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
-	Name			<u></u>		
	Street Address					
5	City	State	ZIP			
	Disbursement Type	Disbursement Date	□ Cash □ Credit			
1	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 12)					