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PC18-01

COMM	ILLEE TAL OF CHAND LESS LES	1):		
	Comrowed Robertsion:	Committee Name:	Yes on Prop 408	
CANDI	DATE INFORMATION (only if fi	ing as a candidate com	ımittee):	
	Office Sought:	☐ Statewide Office	· ·	☐ State Legislature:
		☐ County Office:		☐ City/Town Office:

REPORTING PERIOD (check one):

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

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

FINANCIAL SUMMARY (required):

	Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a)	Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	805.46	
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	2,000.00	13,500.00
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	2,800.00	13,494.54
(d)	= Balance at close of reporting period	5.46	

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).

COMMITTEE ID NUMBER PC18-01

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	* 1	
	(d) Political Action Committees		
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)	2,000.00	
-	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Monies (Candidate Committees Only)		
	(j) Monetary Contributions Subtotal (add 1(a) through 1(i))		
	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))	2,000.00	
2.	Loans	· · · · · · · · · · · · · · · · · · ·	
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
3.	Rebates and Refunds Received		
4.	Interest Accrued on Committee Monies		
5.	In-Kind Contributions Received		
	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
	(c) Candidate Committees		
	(d) Political Action Committees		
	(e) Political Parties (f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Assets or Property (Candidate Committees Only)		
	9		
<u>6.</u> 7.	In-Kind Donations Received (Non-Contributions) (Political Parties Only) Extensions of Credit		
''			
	(a) Extensions of Credit Received (b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8.			
	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12.	Miscellaneous Receipts		
<u>13.</u>	Total Receipts (cash: add 1(i), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)	2,000.00	

COMMITTEE ID NUMBER PC18-01

SUMMARY OF DISBURSEMENTS (Schedule B):

/			
	Disbursements	Cash	Equity
/ <u>1.</u>	Disbursements for Operating Expenses	2,800.00	
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)		
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3.	Loans (a) Loans Made		
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(j) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
11.			
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.			
14	Miscellaneous Disbursements		
15.	90 0		
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)	2,800.00	

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

SCHEDULE A(1)(a)

Individual Co	ntributor Informa	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Date Contribution Received			
Address	<u> </u>				
	State	ZIP			
ation	Employer				
to the state of th		Date Contribution Received			
Address					
	State	ZIP			
stion	Employer				
		Date Contribution Received			
Address			_		
	State	ZIP			
ation	Employer				
		Date Contribution Received			
Address			_		
	State	ZIP			
ation	Employer				
		Date Contribution Received			
Street Address					
	State	ZIP			
ation	Employer				
r total or		Employer Thy if last page of schedule	nly if last page of schedule	nly if last page of schedule	nly if last page of schedule

*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 Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name						
	Street Address			* ************************************			
1	City		State	ZIP			
	Committee ID Number		Date Contribution Receive	ed			
	Committee Name		<u> </u>				
	Street Address						
2	City		State	ZIP			
	Committee ID Number		Date Contribution Receive	ed			
_	Committee Name						
	Street Address		.4				
3	City		State	ZIP			
	Committee ID Number		Date Contribution Receive	ed	1		
F	Committee Name	4					
	Street Address						
4	City		State	ZIP	<u> </u>		
	Committee ID Number		Date Contribution Receive	ed			
-	Committee Name	Committee Name					
	Street Address	Street Address			_		
5	City		State	ZIP	-		
	Committee ID Number		Date Contribution Receive	led	-		
-		last page of schedule					
	(transfer the total received t	his period to "Summary of Receipts."	line 1(c))			I	<u> </u>

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

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

<u>/</u>	1	ommittee Contributor II	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Street Address					
2			T			
	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved	7		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee 1D Number	Date Contribution Receiv	ved			
	Committee Name	•				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	Ved	1		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved			
	Enter total only if last page of sche	dule				
_	(transfer the total received this period to "Summary of R					

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

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

Committee Name			I	Reporting Period	Election Cycle
Street Address					
Sity	State	ZIP			
Committee ID Number	Date Contribution Receive	<u>l</u>			
Committee Name	<u> </u>				
Street Address					
City	State	ZIP		;	
Committee ID Number	Date Contribution Receive	ed .			
Committee Name					
Street Address					
Sity	State	ZIP			
Committee ID Number	Date Contribution Receive	ed .			
Committee Name					
Street Address					
Sity	State	ZIP			
Committee ID Number	Date Contribution Received				
Committee Name					
Street Address					
Sity	State	ZIP			
Committee ID Number	Date Contribution Receive	ed			
	Committee ID Number Committee Name Street Address Committee ID Number Committee Name Street Address Committee Name Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee Name Committee ID Number Committee ID Number Committee ID Number Committee ID Number	State Committee ID Number Date Contribution Receive Committee Name Street Address State Committee ID Number Date Contribution Receive Committee Name Street Address State Committee ID Number Date Contribution Receive Committee ID Number Date Contribution Receive Committee ID Number Date Contribution Receive Committee Name Street Address State Date Contribution Receive Committee Name	State ZIP Committee ID Number Date Contribution Received State ZIP Committee Name State ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name State ZIP Committee Name State Address State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name State ID Number Date Contribution Received Committee Name State ID Number Date Contribution Received	State ZIP Committee ID Number Date Contribution Received Committee Name State ZIP Committee ID Number Date Contribution Received Committee Name Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received	State ZIP Committee ID Number Date Contribution Received State ZIP Committee Name State ZIP Committee Name State ZIP Committee Name State ZIP Committee Name State ZIP Committee ID Number Date Contribution Received State ZIP Committee ID Number Date Contribution Received State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

/							
/	Partners	hip Contributor Informa	ation		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 Rec	eived				
	Partnership Name	<u> </u>					
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number Date Contribution Received						
	Partnership Name					· · ·	
	Street Address		,,				
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Red	ceived				
	Partnership Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number Date Contribution Received						
	Partnership Name						
	Street Address						
5	City	State	ZIP	-			
	Corporation Commission File Number	Date Contribution Re-	ceived				
_	Enter total only if last page of sci	nedule					

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



PC18-01

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

	Corporation / LLC C	Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name Intel Street Address					
	5000 W. Chandler Blvd.					
1	Chandler	State AZ	85226	2000.00	2000.00	2000.00
	Corporation Commission File Number	Date Contribution Receive	d			
	Corporation/LLC Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	1 Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	<u>I</u> ed			
	Corporation/LLC Name	l				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
-	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule				2,000.00	
_	(transfer the total received this period to "Summary of Receipts."	and Run			<u> </u>	L

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

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

	/	Labor Organization	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
Γ		Labor Organization Name					
	Street Address					:	
1	1	City	State	ZIP			·
		Corporation Commission File Number	Date Contribution Receive	dd			
	Labor Organization Name						
		Street Address					
2	2	City	State	ZIP			
ļ		Corporation Commission File Number	Date Contribution Receive	ed			
-		Labor Organization Name	<u> </u>				
	ŀ	Street Address					
3	3	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
\vdash		Labor Organization Name	<u></u>		<u>.,,</u>		
ŀ		Street Address					
4	4	City	State	ZIP			
		Corporation Commission File Number	oration Commission File Number Date Contribution Received				
-		Labor Organization Name					
		Street Address					
5	5	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
-	-	Enter total only if last page of schedule					
、L		(transfer the total received this period to "Summary of Receipts,"	line 1(h))				

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

MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

/	Candidate	e Information		Amount Received	Cumulative Amount this	Cumulative Amount this
	Name		Date Contribution Received		Reporting Period	Election Cycle
	Street Address					
	Street Aduless					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	Ottect Audi 605					
2	City	State	ZIP		:	
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address		1	_		
3		la	T ₇₁₀	_		
	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address		1			
5	City	State	ZIP	\dashv		
	Occupation	Employer		_		
	• "					

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

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

/	Contribut		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	Name				
	Street Address		1	1		
2	City	State	ZIP	_		
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address		.1			
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address			_		
4	City	State	ZIP	-		
	ID Number (if applicable)		Date of Original Contribution	-		
	Name		Date Contribution Refunded			
	Street Address			1		
5	City	State	ZIP	1		
	i	1				

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





LOANS RECEIVED: SCHEDULE A(2)(a)

		Lender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative ` Amount this Election Cycle
	Lender Name Date Loan Received					
	Street Address					
	City	State	ZIP	_		
	Guarantor/Endorser Name	<u> </u>	oose? (PACs and Political Parties Only)	-		
	L d Ni	Detail on Room	and a			
	Lender Name	Date Loan Receiv	ved	•		
	Street Address	I				
	City	State	ZíP			
	Guarantor/Endorser Name	Non-Electoral Purp	pose? (PACs and Political Parties Only)			
_	Lender Name		Date Loan Received			
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	l	Non-Electoral Purpose? (PACs and Political Parties Only)			
-	Lender Name		Date Loan Received			
	Street Address	pet Address				
1	City	State	ZIP	_		
	Guarantor/Endorser Name	[pose? (PACs and Political Parties Only)			
	Lender Name		Date Loan Received			
	Street Address			_		
5	City	State	ZIP	-		
	Guarantor/Endorser Name	Non-Electoral Purp	pose? (PACs and Political Parties Only)			
_				1	1	

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



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

		Lender Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ĺ	Lender Name		Date Forgiveness Received			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsta	nding			
	Lender Name		Date Forgiveness Received			
	Street Address			-		
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsta	nding			:
	Lender Name		Date Forgiveness Received			
	Street Address			_		:
3	City	State	ZIP			i
	Original Amount of Loan	Amount Still Outsta	nding			
-	Lender Name		Date Forgiveness Received			
	Street Address	Street Address				
4	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outsta	Inding			
	Lender Name		Date Forgiveness Received			
	Street Address	Street Address		-		
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsta	inding	-		
	Enter total only if last page of					

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		<u></u>			
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Воггоwer Name Date Repay		Date Repayment Received			
	Street Address					
2	City	State	ZIP			
ļ	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Borrower Name	<u>l </u>	Date Repayment Received			
	Street Address		<u>.</u>			
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Borrower Name	<u> </u>	Date Repayment Received			
	Street Address		<u> </u>			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	L			
	Enter total only if last page of schedule	l		I		
∖	(transfer the total received this period to "Summary of Receipts."	line 2(c))				

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



INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name Date Interest Accrued					
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	<u>. </u>	Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
r	Borrower Name	<u> </u>	Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address		<u> </u>			
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	1			
\vdash	Enter total only if last page of schedule	<u> </u>		<u> </u>		VI 18
L	(transfer the total received this period to "Summary of Receipts."	line 2(d))				

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

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

/		Payor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name	Payor Name				
	Street Address					
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	te			
\mid	Borrower Name		Date Rebate/Refund Received			
	Street Address	Street Address				
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	te	1		
	Borrower Name		Date Rebate/Refund Received			V 1.000 MINN
	Street Address					
3	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refund/Reba	te	-		
F	Borrower Name		Date Rebate/Refund Received			
	Street Address					
4	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refund/Reba	te			
-	Borrower Name		Date Rebate/Refund Received			
	Street Address	Street Address				
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	lte	_		
-	Enter total only if last pa	ge of schedule	7.			
	(transfer the total received this period to					

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)

	Indiv	idual Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address		1			
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP	-		
	Occupation	Employer		_		
	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	1	Date In-Kind Contribution Received			
	Street Address	Street Address			:	
4	City	State	ZIP	_		
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address	Street Address		-		
5	City	State	ZIP	-		
	Occupation	Employer		4		

*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)

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

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

_	/	Candidate Committee	Contributor Infor	mation	Amount Received	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 I	Received			
	1	Committee Name			-		
		Street Address					
2	2	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Received			
-	Committee Name						
	ŀ	Street Address					
3	3	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution] Received			
	1	Committee Name					
		Street Address					
4	4	City	State	ZIP			
	Ì	Committee ID Number	Date In-Kind Contribution	Received			
	1	Committee Name					
		Street Address					
5	5	City	State	ZIP	1		
		Committee ID Number	Date In-Kind Contribution	Received	1		
卜	1	Enter total only if last page of schedule		,, ,, ,, , , , , , , , , , , , , , , ,			
		(transfer the total received this period to "Summary of Receipts,"	line 5(c))			L	

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



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	I Received	-		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Received	- 		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
	Committee Name	1				
	Street Address			-		
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Received	-		
_	Enter total only if last page of schedule	I				
	(transfer the total received this period to "Summary of Receipts."	line 5(d))			1	

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Politic	cal Party Contributor Infor	mation	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 Contrib	oution Received			
	Committee Name					
	Street Address	treet Address				
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contril	bution Received			
_	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contril	bution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name			1		
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contril	bution Received			
_	Enter total only if last page o	of schedule				



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

/				1	1	1
	Partners	hip Contributor Informa	tion	Amount Receiv	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 Contributi	on Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Received			
	Partnership Name		· · · · · · · · · · · · · · · · · · ·			
	Street Address			:		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Received			
	Partnership Name					
5	Street Address	Street Address				
J	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Received			:
	Enter total only if last page of sch	nedule of Receipts." line 5(f))				

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				i roporang ronou	Licentin Syste
		Street Address					
	1	City	State	ZIP			İ
		Corporation Commission File Number	Date In-Kind Contribution	Received			
ŀ		Corporation/LLC Name	<u> </u>				
	Street Address						
	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
ŀ		Corporation/LLC Name					
		Street Address					
	3	City	State	ZIP			
		Corporation Commission File Number					
l		Corporation/LLC Name	<u> </u>				
		Street Address		·			
	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
f		Corporation/LLC Name	<u> </u>				
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	I Received			Î
		Enter total only if last page of schedule	line 5(a))	·			
\ L		pulariero de total received una period to Suffifially di Receipts.	III SIUI		·-··	L	/

COMMITTEE	ID NUMBER
-----------	-----------

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

/	Labor Organ	ization Contributor In	formation	Amour	nt 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 Contribu	ution Received				
	Labor Organization Name						
	Street Address						
2	City	State	State ZIP				
	Corporation Commission File Number	Date In-Kind Contrib	ution Received				
	Labor Organization Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contrib	ution Received				
	Labor Organization Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contrib	ution Received				
	Labor Organization Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contrib	ution Received				
_	Enter total only if last page of sch						

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



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

SCHEDULE A(5)(i)

/	Candidat	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received		reporting renou	Liection Cycle
	Street Address	Street Address				
1	City	State	ZIP			
	Asset or Property Contributed	1.		_		
	Name		Date In-Kind Contribution Received			
	Street Address			_		
2	City	State	ZIP	_		
	Asset or Property Contributed					
_	Name	Name				
-	Street Address			-		
3	City	State	ZIP	-		
	Asset or Property Contributed	State	Lir			
						,
	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	1		
	Asset or Property Contributed					
\dashv	Enter total only if last page of schedule			L		

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

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

SCHEDULE A(5)(e)

/	Source I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address	-				
	City	State	ZIP			
	Type of Item Donated					
	Name	-	Date In-Kind Donation Received			
	Street Address	reet Address				
2	City		ZIP]		
	Type of Item Donated		-			
	Name		Date In-Kind Donation Received			
	Street Address	,				
3	City	State	ZIP	1		
	Type of Item Donated					
	Name		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			1		
_	Enter total only if last page of schedule					



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

/	Cred	itor 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			
	Name					
	Street Address	Street Address				
2	City	State	ZIP			
	Services or Goods Provided on Credit	!	Date of Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit				
	Name					
	Street Address			1		
4	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
_	Enter total only if last page of sched	ule				
	(transfer the total received this period to "Summary of Rec					

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



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	/	Creditor I	nformation		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	1	Name			Lixiended	reporting renou	Licotion Gyold
	-	Street Address					
1		City	State	ZIP			
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	1	Name		-			
	-	Street Address			ļ.		
2	2	City	State	ZIP			Į.
		Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
-		Name					
	ŀ	Street Address					
3	3	City	State	ZIP			
	ł	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
-		Name					
		Street Address			<u>-</u>		
4	4	City	State	ZIP	-		
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	-		
\mid		Name		<u> </u>			
		Street Address			-		
	5	City	State	ZIP	-	1	
		Services or Goods Originally Provided on Credit	1	Date of Original Extension of Credit	-		
-		Enter total only if last page of schedule			I		
∖∟		(transfer the total received this period to "Summary of Receipts."	line 7(b))			1	L

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

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

mittee Name				Reporting Period	Election Cycl
		Payment Date			
Street Address					
	State	ZIP			
of Joint Fundraising Event (if applicable)	Type of Shared Exp	Dense (if applicable)			
nmittee Name		Payment Date			
et Address					i
Mad direction of the control of the	State	ZIP			ſ
of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			İ
nmittee Name		Payment Date			
et Address					l
	State	ZIP			İ
of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			l
nmittee Name		Payment Date			
et Address					İ
	State	ZIP			İ
of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			İ
nmittee Name		Payment Date			<u> </u>
Street Address					l
	State	ZIP			l
of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			l
et /	itee Name Address	ddress State	Address State ZIP	Address State ZIP	Payment Date Payment Date State ZIP

Arizona Secretary of State Revision 4/10/18

Schedule A(8), page ____ of ___

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

Payor In	formation		1	Cumulative	0
ame			Payment Amount	Amount this Reporting Period	Cumulative Amount this Election Cycle
treet Address			-		
ity	State	ZIP			
ervices or Goods Purchased		Payment Date	-		
ame	,				
treet Address					
ity	State	ZIP			 -
ervices or Goods Purchased		Payment Date			
ame					
treet Address					ı
ity	State	ZIP	-		ı
ervices or Goods Purchased	Payment Date	-		ı	
ame					
Street Address					ı
ity	State	ZIP	-		ı
Services or Goods Purchased		Payment Date			ı
Name					
treet Address	***************************************			ı	
ity	State	ZIP	-		ı
ervices or Goods Purchased		Payment Date	1		ı
nter total only if last page of schedule	!	I]		
i e a t	ame treet Address ity ervices or Goods Purchased ame treet Address ity ervices or Goods Purchased ame treet Address ity ervices or Goods Purchased ame treet Address ity ervices or Goods Purchased ame treet Address ity ervices or Goods Purchased ame treet Address ity ervices or Goods Purchased	sty State Process or Goods Purchased ame Treet Address State State State State State State State State State State State State State State State	State ZIP Payment Date Payment Date Treet Address Ity State ZIP Payment Date	In payment Date State ZIP Payment Date It reet Address Ity State ZIP Payment Date State ZIP Payment Date State ZIP State ZIP Payment Date Ity State ZIP Ity State ZIP Ity State ZIP Ity State ZIP Ity State ZIP Ity State ZIP Ity State ZIP Ity State ZIP Ity Payment Date Ity Payment Date Ity State ZIP	In the state of Goods Purchased Payment Date Payment Date Payment Date

Schedule A(9), page ____ of ___



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

_	Information			Amount		Cumulative Amount this Election Cycle
	Name					
1	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed	1	Date that Debt Accrued			
	Name					
2	Street Address			-	!	
	City	State	ZIP			!
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
3	Street Address			-		
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name			-		
5	Street Address			_		
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of sche					

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
ource of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monles / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Total (transfer the total received this period to "Summary of Receipts," line 11)		

Schedule A(11), page ____ of ____

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

_	Source	e Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
1	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
3	Street Address					
	City	State	ZIP			
	Receipt Type	Receipt Date				
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
5	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedul	<u> </u>				

PC18-01

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Recipie	nt Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name 923 Consulting Street Address	Disbursement Date		750.00	750.00	1500.00
	911 W. Butler Drive					
1	Phoenix	AZ	85021	■ Cash	;	
	Type of Operating Expense Paid Consulting	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
	Roundtable Strategies	Disbursement Date 10/1/18		2050.00	2,050.00	11994.54
	Street Address 911 W. Butler Drive					
2	^{city} Phoenix	AZ ZIP 85021		≣ Cash		
	Type of Operating Expense Paid Consulting	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid		(PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
5	City	State	ZIP	☐ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Credit		
	Enter total only if last page of schedule			1	1	

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committe	e Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	reet Address				
1	City	State	ZIP	☐ Cash		
}	Committee ID Number	Date Contribution Made		Credit		i
	Committee Name	<u> </u>				
	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	<u> </u>	☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	,	☐ Credit		
	Committee Name	1				
	Street Address					
5	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	1	☐ Credit		
	Enter total only if last page of schedule					



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Comm	ittee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
	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	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 schedule (transfer the total disbursed this period to "Summary of Disbursements." line 2(b))			I		



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

,	Political Party R	tecipient Informati	on	Amount Contributed	Cumulative Amount this	Cumulative Amount this
	Committee Name	· · · · · · · · · · · · · · · · · · ·		GGIIIIIGG	Reporting Period	Election Cycle
ŀ	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	T Oak		
	Committee ID Number	Date Contribution Made	1	□ Cash □ Credit		
	Committee Name					· · · · · · · · · · · · · · · · · · ·
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made	.l	□ Cash □ Credit		
	Committee Name	<u></u>				-
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Cash		
	Committee Name	<u>l.</u>				
	Street Address		. I A S P NOW O			
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule					



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnership F	Recipient Informatio	on	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					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
+	Partnership Name	<u> </u>	-			
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	.1.	□ Cash □ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
_	Enter total only if last page of schedul	e				

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation /	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			
	Corporation Commission File Number	Date Contribution Ma	ade	☐ Cash☐ Credit		
	Corporation/LLC Name					
	Street Address	reet Address				
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	□ Cash □ Credit		
	Corporation/LLC Name					
-	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution N	lade	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution N	lade	☐ Cash☐ Credit		
_	Enter total only if last page of sche	edule				

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organi	zation Recipient Infor	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
I	Labor Organization Name					
-	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	e	□ Cash □ Credit		
t	Labor Organization Name					
	Street Address					
ŀ	City	State	ZIP			
-	Corporation Commission File Number	Date Contribution Mad	de	□ Cash . □ Credit		
1	Labor Organization Name					
•	Street Address	1 2 1				
ŀ	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	de	☐ Cash☐ Credit		
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	de	□ Cash □ Credit		
$\frac{1}{2}$	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number Date Contribution Made		□ Cash □ Credit			
	Enter total only if last page of schedule ransfer the total disbursed this period to "Summary of Disbursements," line 2(f))					



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contrib	utor Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Committee ID Number				
	Committee Name	***	Date Refund Received			
	Street Address					
2	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
-	Committee Name		Date Refund Received			
	Street Address			_		
3	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
\vdash	Committee Name		Date Refund Received			
	Street Address					
4	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
5		Street Address				
	City	State	ZIP Date of Original Contribution			
	Committee ID Number	Date of Original Continuous				
	Enter total only if last page of schedu (transfer the total disbursed this period to "Summary of Dis					

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



LOANS MADE: SCHEDULE B(3)(a)

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

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



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

/		Guarantor 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 Guarant	eed			
	Guarantor Name					
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			-
	Guarantor Name	Guarantor Name				
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
	Guarantor Name		·····			
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaran	heat			
	SS. SYCI TRITIC	Date Loan Gual an				
- 1	Enter total only if last page of	echadula				

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



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/	Borrower	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 Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding		_		
\dashv	Borrower Name	<u> </u>	Date Forgiveness Made			
	Street Address			-		
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	<u> </u>	Date Forgiveness Made			
	Street Address					
4	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address			-		
5	City	State	ZIP	_		
5	1 '	1				

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	/	Lender I	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	T	Lender Name		Date Repayment Made			
		Street Address					1
1	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
L							
		Lender Name		Date Repayment Made			
		Street Address					
2	2	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
_	4	Lender Name		Date Repayment Made			
		CONSCI NAME					
		Street Address					
3	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
F		Lender Name		Date Repayment Made			
		Street Address					
4	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-		Lender Name	<u> </u>	Date Repayment Made			
		Street Address			-		
	5	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-		Enter total only if last page of schedule			<u> </u>		
۱I /		(transfer the total disbursed this period to "Summary of Disburse	ments." line 3(d))				

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



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

Lender	Information		Amount of Interest Accrued	AIIIOUIILUIS	Cumulative Amount this Election Cycle
Lender Name		Date Interest Accrued			
Street Address		1	-		
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Lender Name	1	Date Interest Accrued	-		
Street Address					
City	State	ZIP	\dashv		
Original Amount Borrowed	Amount Still Outstanding				
Lender Name		Date Interest Accrued			
Street Address			\dashv		
City	State	ZIP	+		
Original Amount Borrowed	Amount Still Outstanding		+		
Lender Name	l	Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
Lender Name	<u> </u>	Date Interest Accrued			
Street Address			\dashv		
City	State	ZIP			
,			1	1	
	Lender Name Street Address City Original Amount Borrowed Lender Name Street Address City Original Amount Borrowed Lender Name Street Address City Original Amount Borrowed Lender Name Street Address City Original Amount Borrowed Lender Name Street Address	Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding	Lender Name Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Date Interest Accrued	Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued	Lender Information Carter Accrued Amount this Reporting Period

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 Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
Name of Original Payor	I	Date Rebate/Refund Made		 	
Street Address					
City	State	ZIP	-		
Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	_		
Name of Original Payor	<u> </u>	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					
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					
City	State	ZIP	-		
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor Street Address City Corporation Commission File Number (if applicable) Name of Original Payor Street Address City Corporation Commission File Number (if applicable) Name of Original Payor Street Address City Corporation Commission File Number (if applicable) Name of Original Payor Street Address City Corporation Commission File Number (if applicable) Name of Original Payor Street Address City Corporation Commission File Number (if applicable) Name of Original Payor Street Address City Corporation Commission File Number (if applicable) Enter total only if last page of sche	Street Address City State Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Street Address City State Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Street Address City State Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Street Address City State Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Street Address City State Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Street Address City State Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor	Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Date of Original Payment Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Date of Original Payment Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Retund Made Street Address City State ZIP Name of Original Payor Date Rebate/Retund Made	Name of Original Playor Date Rebate/Refund Made	Recipient Information Amount rise and Congraph Player Date Picture (Returned Market Street Add asso City Street City City City City City City City City City City City City City City City City

Schedule B(4), page ____ of



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					:
	1	City	State	ZIP			:
		Committee ID Number	Date In-Kind Contribution I	Made			
		Committee Name					
		Street Address					
	2	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made		:	:
		Committee Name					
		Street Address					
	3	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
r		Committee Name	I				
		Street Address					
	4	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
		Committee Name					
		Street Address					
	5	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
		Enter total only if last page of schedule					
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 Info	ormation	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	.l	·			
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	I				
	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	1				
	Street Address			-		
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Enter total only if last page of schedule			I		
	(transfer the total disbursed this period to "Summary of Disburs	ements." (ine 5(b))			L	<u>.</u>

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Politic	cal Party Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Made			
	Committee Name	L				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	bution Made			
-	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	pution Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrit	oution Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	pution Made			
_	Enter total only if last page of					

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

COMMITTEE	ID	ΝL	JMB	ER
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IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partnership	Recipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
_	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
_	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name					
	Street Address		 			
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
-	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	I Made			
-	Enter total only if last page of schedu					
	promotes the total dispursed this period to Suthinary of DIS	MAN CONTRACTOR MIC U(U))			J	



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
		Corporation/LLC Name					
		Street Address	<u></u>				
-	1	City	State	ZIP			
	-	Corporation Commission File Number	Date In-Kind Contribution I	Made			
		Corporation/LLC Name	<u> </u>				
		Street Address					
2	2	City	State	ZIP		:	
	•	Corporation Commission File Number	Date In-Kind Contribution	Made			
F		Corporation/LLC Name	<u> </u>				
		Street Address					
;	3	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
F		Corporation/LLC Name	1,				
		Street Address					
'	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
-		Corporation/LLC Name	l				
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
\downarrow		Enter total only if last page of schedule			1		
\ L		(transfer the total disbursed this period to "Summary of Disburse	ments," line 5(e))			l	

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

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Orgar	nization Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ution Made			
	Labor Organization Name					
	Street Address	,				
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made		-	
-	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Labor Organization Name					
	Street Address					
4	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					

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



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/	Expenditure F	Recipient Informat	ion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		1
1	City	State	ZIP			1
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	_ □ Cash		i
	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)	Candidate(s) Opposed (in	cluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)		-	
	Street Address					
3	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ ☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
4	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
_	Enter total only if last page of schedu (transfer the total disbursed this period to "Summary of Disb					

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/	Expenditure F	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this	Cumulative Amount this
	Recipient Name		Mode of Advertising (TV, mail, etc)	, anodit	Reporting Period	Election Cycle
	Street Address			_		
1	City	State	ZIP	-		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed ((Including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- □ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed ((including % opposed)	☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed ((including % opposed)	□ Cash □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed ((Including % opposed)	□ Cash □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Enter total only if last page of schedul	e				





RECALL EXPENDITURES MADE: SCHEDULE B(8)

_	Expenditure F	Recipient Informatio	Υ	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name Street Address		Mode of Advertising (TV, mail, etc)	-		
	Julieti Audress					
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reca	alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			- □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled		alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Office Held		☐ Credit			
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled		□ Cash □ Credit			
	ate of First Publication, Display, Delivery, or Broadcast Office Held					
	Recipient Name	1	Mode of Advertising (TV, mail, etc)		-	
	Street Address	1				
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	Office Held		_ □ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "Summary of Disb					



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

_	Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name	Date Benefit Provided				
	Street Address					
1	City	State	ZIP			
	Type of Benefit Provided					Į.
	Notes:					
-	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
2	Type of Benefit Provided					
	Notes:					
L	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
3		Joseph				
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			Ì
	Street Address					
4	City	State	ZIP		; ;	
	Type of Benefit Provided					
-	Notes:				:	
H	Enter total only if last page of schedule)		<u> </u>		
L	(transfer the total disbursed this period to "Summary of Disbu	rsements," line 9)				



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

_	Recipient (Committee Infor	mation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle
	Committee Name		Payment Date			
1	Street Address				i.	
	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		· · · · · · · · · · · · · · · · · · ·			1
2	City	State	ZIP	□ Cash	TI Cook	
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	☐ Credit		1
•	Committee Name		Payment Date		·	
	Street Address					l
3	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Expense (if applicable)	☐ Credit		l	
	Committee Name	Payment Date				
	Street Address					
4	City	State	ZIP	□ Cash		l
	Date of Joint Fundraising Event (if applicable)	Type of Shared B	Expense (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 (transfer the total disbursed this period to "Summary of Disbursements," line 10)			•		





REIMBURSEMENTS MADE:

SCHEDULE B(11)

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



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			į
	Type of Account Payable or Debt Owed	<u> </u>	Date that Debt Accrued	-		
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed	1	Date that Debt Accrued			
	Name		<u> </u>			
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Payable or Debt Owed	<u> </u>	Date that Debt Accrued			
\vdash	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed	<u> </u>	Date that Debt Accrued	1		
	Enter total only if last page of schedule		<u> </u>	<u> </u>		
\L	(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)

/	Reci	pient Informatior	า	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Name				
1	Street Address			ı		
	City		ZIP	□ Cash		1
	Disbursement Type		Disbursement Date	☐ Credit		ı
	Name					
	Street Address					
2	City		ZIP			!
	Disbursement Type	L	Disbursement Date	☐ Cash☐ Credit		:
	Name	Name				
	Street Address					
3	City	1	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash ☐ Credit		
	Name					
4	Street Address					
4	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		:
	Name					
	Street Address	Street Address				
5	City	State	ZIP	□ Cash		
	Disbursement Type Disbursement Date			☐ Cash		
	Enter total only if last page of sched					