

committee id number c17-09

	Committee Information:	Committee Name:	Rick Heumann Council 20			
CAND	DATE INFORMATION (only if fil	ing as a candidate comr	nittee):			
	Office Sought.	☐ County Office: ☐ City/Town Office	: Chandler	☐ Special District Office: ☐ School Board District:	CHONDLER CITY OCT 1 2024 PMJ:	
C			•	election cycle. Also select appropriate Repo Reporting Period selected below):	orting Period below.	

REPORTING PERIOD (check one):

_	REPORTING PERIOD	REPORT DUE
	2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023	February 26, 2023 to March 4, 2023
	2023 March Post-Election (Q1) Report (Local Only): February 26, 2023 to March 31, 2023	April 1, 2023 to April 15, 2023
	2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
	2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
	2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 15, 2023
	2023 Quarter 2 Report: April 1, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
	2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
	2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
	2023 Quarter 3 Report: July 1, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
	2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
	2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
	2023 Quarter 4 Report: October 1, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
	2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024	February 25, 2024 to March 2, 2024
	2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
	2024 Quarter 1 Report: January 1, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
	2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024	May 5, 2024 to May 11, 2024
	2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
	2024 Quarter 2 Report: April 1, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
	2024 July Pre-Primary Election Report: July 1, 2024 to July 13, 2024	July 14, 2024 to July 20, 2024
V	2024 July Post-Primary Election (Q3) Report: July 14, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
	2024 Quarter 3 Report: July 1, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
	2024 November Pre-General Election Report: October 1, 2024 to October 19, 2024	October 20, 2024 to October 26, 2024
	2024 November Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024	January 1, 2025 to January 15, 2025
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination
	*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§§ 1-2	43(A), 1-301 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) 	\$ 6,379.64	
b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)		
c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)		
d) = Balance at close of reporting period	\$ 637,964.00	



COMMITTEE ID NUMBER c17-09

Under A.R.S. § 16-926(B)(5), a campaign finance report must be certified by the committee treasurer under penalty of perjury that the contents of the report are true and correct.

By filing this report, you certify that, under penalty of perjury, you have examined the contents of this report, and the contents are true and correct.

Rick Heumann	le 1/2	10/01/2024
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

310 RTA Report



SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)	9	
	(c) Out-of-State Individuals		
	(d) Candidate Committees	200	C. 18 18 18 18 18 18 18 18 18 18 18 18 18
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		
-	(i) Candidate's Personal Monies (Candidate Committees Only)		Service regulation (Cr.
_	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		Test and the second
	(I) Refunds Given Back to Contributors	- 100 (Elig. de 10	
		3	
2.	(m) Net Monetary Contributions (subtract 1(I) from 1(k)) 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))	. 19.5.21.62.43	
3.	Rebates and Refunds Received	age of the large and anything the	
1.	Interest Accrued on Committee Monies	aye Lower and the	
5.	In-Kind Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		3500 1015
	(d) Candidate Committees		Political Land
	(e) Political Action Committees		e detailement sing
	(f) Political Parties (g) Partnerships		1 - 5 - 7 - 7 - 7 - 7 - 7
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only) (j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		V 3 Mile TW 1467
i.	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))		
	Joint Fundraising / Shared Expense Payments Received		
	Payments Received for Goods / Services		
	Outstanding Accounts Receivable / Debts Owed to Committee		= May 1 map ₹ 1 1
1.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)	re pa dino-	
2.	Miscellaneous Receipts (use cash and/or equity asapplicable)		n records to the



SUMMARY OF DISBURSEMENTS (Schedule B):

/			
_	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses		
2.	Contributions Made		A CHARLES AND A CHARLES
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		The transmission of
	(d) Partnerships		NO. 23 R. 28 S. P. C.
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		ROLL STATE OF THE
3.	Loans		
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Contributions Subtotal (add 5(a) through 5(f))	ALCAO S	
6.	Independent Expenditures Made		mal to show that the
7.	Ballot Measure Expenditures Made		Marghard 18
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
11.	Reimbursements Made		
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements		
15.	Aggregate of Disbursements - \$250 or Less		
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)		





MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:*

SCHEDULE A(1)(a)

/	Individual Cont	ributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received	Tanata and August 2		1 1 1 1
	Street Address		0 2 2	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
2	City	State	ZIP			
	<u> </u>					
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address				±	
3	City	State	ZIP			
	Occupation	Employer				
	Name	100	Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer		-		
1	Name		Date Contribution Received			
	Street Address			-		
	City	State	ZIP	-		
	Occupation	Employer		-		
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts,"	line 1(a))			

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

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from In-State Individuals - \$100 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

^{*}If in-state individual contributions of more than \$100 are listed on Schedule A(1)(a), do not include them.

Schedule A(1)(b), page____ of ____





MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

_	Name	dividual Contributor Inform	Date Contribution Received	Amount Received	Amount this Reporting Period	Amount this Election Cycl
	Name		Date Continuation Necesived			
	Street Address					
1	City	State	ZIP	*		
	Occupation	Employer		7	a .	
	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		Date Contribution Received			
	Street Address					
4	City	State	ZIP		_	
	Occupation	Employer			_	
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer		1		

Schedule A(1)(c), page__



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

	Candidate Committee	e Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	itreet Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
2	City .	State	ZIP		,	
	Committee ID Number	Date Contribution Receive	I ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name			,		
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Committee Name	l				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	d .			
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	I mary of Receipts," li	ine 1(d))			

Arizona Secretary of State Revision 9/28/23

Schedule A(1)(d), page____ of ___



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/	Political Action Commit	tee Contributor In	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
				4	,	
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed		-	
	Committee Name			k		
	Street Address	· — ,				
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv		1		
_	Committee Name					-
	Street Address	1			-	
3	City	State	ZIP			
	Committee ID Number	Date Contribution Received			-	
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	red			
	Committee Name					
	Street Address				-	
5	City	State	ZIP		-	
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts." I	line 1(e))	at a	7	-

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





MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

/						
_	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	d			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u> </u>			
-	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Received			9	
-	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
-	Committee Name					
5	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(f))			

Schedule A(1)(f), page____ of ____



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

Partnership	Contributor Infor	mation			Cumulative	Cumulative
	81.2	mation		Amount Received	Amount this Reporting Period	Amount this Election Cycle
Partnership Name						
Street Address		9				
City	State	ZIP		-		
Corporation Commission File Number	Date Contribution F	Received		, at a second	9	
Partnership Name	- , -		,			
Street Address				-		
City	State	ZIP				
Corporation Commission File Number	Date Contribution	Received				
Partnership Name						
Street Address					-	
City	State	ZIP	- I			
Corporation Commission File Number	Date Contribution Received		-			
Partnership Name				1	-	
Street Address	-					
City	State	ZIP				
Corporation Commission File Number	umber Date Contribution Received					
Partnership Name				1		
Street Address						
City	State	ZIP		_		
Corporation Commission File Number	Date Contribution Received					
	City Corporation Commission File Number Partnership Name Street Address	Corporation Commission File Number Date Contribution File Number Street Address City State Corporation Commission File Number Date Contribution I Partnership Name Street Address City State Corporation Commission File Number Date Contribution I Partnership Name Street Address City State Corporation Commission File Number Date Contribution I Partnership Name Street Address City State Corporation Commission File Number Date Contribution I Street Address City State Street Address City State Street Address Street Address	Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received Partnership Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received	Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Partnership Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received City State ZIP Partnership Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP State ZIP Corporation Commission File Number Date Contribution Received Street Address	Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Partnership Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received City State ZIP Partnership Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received City State ZIP Corporation Commission File Number Date Contribution Received City State ZIP Partnership Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received City State ZIP Partnership Name Street Address	Corporation Commission File Number Date Contribution Received Street Address City State Zip Corporation Commission File Number Date Contribution Received Street Address City State Zip Partnership Name Street Address City State Zip Corporation Commission File Number Date Contribution Received City State Zip Corporation Commission File Number Date Contribution Received City State Zip Corporation Commission File Number Date Contribution Received City State Zip Partnership Name Street Address City State Zip Corporation Commission File Number Date Contribution Received City State Zip Corporation Commission File Number Date Contribution Received City State Zip Corporation Commission File Number Date Contribution Received

Schedule A(1)(g), page___ of ___





MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					,
	Street Address	-				
	dicti Addiesa					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address					
2	Gity	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer the total received this period to "Sum					

Schedule A(1)(h), page____ of ___



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

/	Labor Organizatio	on Contributor Info	ormation	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 Rece	eived				
	Labor Organization Name)					
	Street Address			,			
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rec	eived	2	-		
	Labor Organization Name	Labor Organization Name				-	
	Street Address	1			x		
3	City	State	ZIP	1			
	Corporation Commission File Number	Date Contribution Reco	eived	5- 8			
	Labor Organization Name		16.				
	Street Address	-					
4	City	State	ZIP	,			
	Corporation Commission File Number	Date Contribution Rece	eived				
	Labor Organization Name						
	Street Address	Streel Address					
5	City	State	ZIP	3			
	Corporation Commission File Number	Date Contribution Rece	vived				
	Enter total only if last page of schedule (transfer the total received this period to "Su	e Immary of Receipts	" line 1(i))				

Schedule A(1)(i), page____ of ___



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

/		ndidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address	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		Date Contribution Received			
	Street Address			1.		
4	City	State	ZIP			a or
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address	Street Address				,
5	City	State	ZIP			9
	Occupation	Employer				
	Enter total only if last page of sch (transfer the total received this period	edule to "Summary of Receipts,"	line 1(j))			

Schedule A(1)(j), page____ of ____





REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded		*	
	Street Address					
L						
1	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution	pod so op		
_	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					
4	City	State	ZIP			
	ID Number (if applicable)	ID Number (if applicable)		# ii ii		
	Name		Date Contribution Refunded			
	Street Address	Street Address			22 T	
_						
5	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts,"	line 1(I))			pe (PSII)

Schedule A(1)(I), page____ of___





LOANS RECEIVED:

SCHEDULE A(2)(a)

Lender Information Amount Received Amount this Amou							
Street Address City		,	Lender Information		Amount Received	Amount this	Cumulative Amount this Election Cycl
City	er Name		Date Loan Received	I			
Courantor/Endorser Name Non-Electroal Purpose? (PACs and Political Parties Only)	t Address			,	_		
Courantor/Endorser Name Non-Electroal Purpose? (PACs and Political Parties Only)			In.	T			
Candier Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Cirby) Lander Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Cirby) Lander Name Date Loan Received Street Address City State ZIP Clumentor/Endorser Name Date Loan Received Street Address City State ZIP Clumentor/Endorser Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Cirby) Lander Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Cirby) City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Cirby) City State ZIP			State	ZIP			
Lender Name Date Loan Received Street Address City State 2IP Courantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Crity) Lender Name Date Loan Received Street Address City State 2IP Courantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Crity) Lender Name Date Loan Received Street Address City State 2IP Courantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Crity) Lender Name Date Loan Received Street Address City State 2IP Courantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Crity) Lender Name Date Loan Received Street Address City State 2IP Courantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Crity) Courantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Crity)	antor/Endorser Name	me	Non-Electoral Purpos	se? (PACs and Political Parties Only)			
Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Pullical Parties City) Lander Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties City) Lander Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties City) Lander Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties City) City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties City) City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties City)							
City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Cnly) Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City State ZIP Lender Name Date Loan Received Street Address City State ZIP Curantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address	er Name		Date Loan Received	d			
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Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)	antor/Endorser Name	me	Non-Electoral Purpos	e? (PACs and Political Parties Only)			
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City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)	er Name		Date Loan Received	1			
Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)	Address						
Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) □							
			State	ZIP			
	antor/Endorser Name	me	Non-Electoral Purpos	e? (PACs and Political Parties Only)			
Enter total only if last page of schedule							
(transfer the total received this period to "Summary of Receipts " line 2/o))	er total only if last	if last page of sch	hedule				
(Mathers the total received this period to duffinlary of Necepha, Time 2(a))	sfer the total receiv	received this period	to "Summary of Receipts	s," line 2(a))			

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
	Lender Name	Date Forgiveness Received				
	Street Address			*		
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			8 17 89
	Street Address		-			
2	City	State	ZIP		=	
	Original Amount of Loan	Amount Still Outstanding		-		
_	Lender Name		Date Forgiveness Received			
	Street Address		· · ·	_	_	
3	City	State	ZIP	-2		
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address	Street Address				
4	City	State	ZIP	*		
	Original Amount of Loan	Amount Still Outstanding				
_	Lender Name		Date Forgiveness Received			
	Street Address				-	
5	City	City State		-		
	Original Amount of Loan	Amount Still Outstanding	1 ₂₋₄			
					3	-
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," li	ine 2(b))	- 5		2

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

9						
_		- Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Repayment Received		,	
	Street Address					
2	City	State	ZIP			
4	Original Amount Borrowed	Amount Still Outstanding	,		1	
	Borrower Name		Date Repayment Received			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 2(c))			

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



INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/					Cumulative	Cumulative
	Borr	ower Information		Amount of Interest Accrued	Amount this Reporting Period	Amount this Election Cycle
	Borrower Name	Date Interest Accrued	-			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ing			
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ing			
	Borrower Name		Date Interest Accrued		_	
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ing	. !	_	
	Borrower Name		Date Interest Accrued	1		1
	Street Address			\dashv		
4	City	State	ZIP		-	
	Original Amount Borrowed Amount Still Outstanding		ing			
	Borrower Name		Date Interest Accrued			Į.
	Street Address					
5	City	State	ZIP		,	
	Original Amount Borrowed	Amount Still Outstand	ng			

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

c17-09



REBATES AND REFUNDS RECEIVED:

STATE OF ARIZONA FRIMNETREFORMPAIGN

COMMITTEE ID NUMBER

ES A	AND REPUNDS RECEIVED:					SCHEDI	ULE A(3
/	Pay	or Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
	Payor Name		Date Rebate/Refund Received				
	Street Address		,	-			
1	1 City	State	ZIP	_			
	Original Purchase Amount	Reason for Refund/Reba	te	- ,			
-	Payor Name		Date Rebate/Refund Received				
	8	5					
	Street Address						
2	City	State	ZIP				
	Original Purchase Amount	Reason for Refund/Reba	te				
	Payor Name		Date Rebate/Refund Received				
	Street Address						
3	3 City	State	ZIP				
	Original Purchase Amount	Reason for Refund/Reba	te	_			
\vdash	Payor Name		Date Rebate/Refund Received				
	Street Address			-			
4	4						
	City	State	ZIP				
	Original Purchase Amount	Reason for Refund/Reba	te				
	Payor Name		Date Rebate/Refund Received				
	Street Address	reel Address					
5	City	State	ZIP	-			
	Original Purchase Amount	Reason for Refund/Reba	de	-			
-	Enter total only if last page of schedu	ule				-	
L	Enter total only if last page of schedu (transfer the total received this period to "	Summary of Receipts,"	line 3)				

Schedule A(3), page____ of ___

COMMITTEE ID NUMBER

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)	1	
Account with Interest Earned (Bank Name / Type of Account)		
account with Interest Earned (Bank Name / Type of Account)	- ·	
ccount with Interest Earned (Bank Name / Type of Account)		
account with Interest Earned (Bank Name / Type of Account)	1	
Total (transfer the total received this period to "Summary of Receipts," line 4)		· · · · · · · · · · · · · · · · · · ·

Schedule A(4), page____ of ____



IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:*

SCHEDULE A(5)(a)

/	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Contribution Received				
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
0	Street Address		•			
2	City	State	ZIP			
	Occupation	Employer				
	Name	Date In-Kind Contribution Received				
3	Street Address			,		
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
,	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
F	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts," li	ine 5(a))			

Schedule A(5), page____ of ___

*If in-kind contributions of \$100 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$100 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 ___

^{*}If contributions of more than \$100 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

committee id number c17-09

IN-KIND CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS:

SCHEDULE A(5)(c)

_	Candidate Committee	e 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 In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	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 (transfer the total received this period to "Sum	mary of Receipts," li	ine 5(d))			

Arizona Secretary of State Revision 9/28/23

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

					1		
/		Candidate Committee	e Contributor Infor	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 In-Kind Contribution	Received			
	Committee Name						, m + 0 -1 , 8
	Street Address				-	-	
2	City		State	ZIP			
	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	*			<i>,</i>		
4	City		State	ZIP			
	Committee ID Number		Date In-Kind Contribution	Received			
	Committee Name		,				
	Committee Name Street Address						
5	City		State	ZIP			
	Committee ID Number Date In-Kind Contribution Received						
	Enter total only if (transfer the total re	last page of schedule ceived this period to "Sum	mary of Receipts," li	ne 5(d))			

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

_	Political Action Commit	tee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			-		
1	City _{ij}	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received	-		
_	Committee Name					
	Street Address					
2	City	y State ZIP				
	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 (transfer the total received this period to "Sum	mary of Receipts," li	ine 5(e))			

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Schedule A(5)(e), page____ of ___

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Politi	cal Party Contributor Info	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Committee Name	Committee Name				
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Received	1 1 1 1		
_	Committee Name					
	Street Address					
2	City	State	ZIP	-1		
	Committee ID Number	Date In-Kind Con	atribution Received			
_	Committee Name					
	Street Address				, s	
3	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Con	Date In-Kind Contribution Received			
	Committee Name	Committee Name				- 12
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Received			
_	Committee Name					
	Street Address			-		
5		T	T			
	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Received	- M	9	

Schedule A(5)(f), page____ of ____



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

_	T	tributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					,
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address		,			
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
	Partnership Name					
	Street Address		,			
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
5	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 "Sum	mary of Receipts," I	ine 5(g))			

Schedule A(5)(g), page___ of ___



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation / L	LC Contributor Ir	formation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name						
	Street Address			,			
1	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contr	ibution Received	-			
	Corporation/LLC Name				_		
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Conti	ribution Received		_		
	Corporation/LLC Name						
	Street Address	Street Address					
3	City	State	ZIP		127		
	Corporation Commission File Number	Date In-Kind Conti	ibution Received				
	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP		4		
	Corporation Commission File Number Date In-Kind Contribution Received					,	
_	Corporation/LLC Name					-	
	Street Address				~		
5	City	Stale	ZIP				
	Corporation Commission File Number	Date In-Kind Contr	Libution Received	·			
	Enter total only if last page of sched (transfer the total received this period to "	ule Summary of Receip	ots," line 5(h))				

Schedule A(5)(h), page____ of ____

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

_	Labor Organization	Contributor Inforr	mation _«	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 Contribution	Received	-		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number					
	Labor Organization Name					
	Street Address					
3	City	State	ZIP		,	
	Corporation Commission File Number	Date In-Kind Contribution	Received		5	
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
5	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 "Sum	mary of Receipts," l	ine 5(i))			

Schedule A(5)(i), page____ of ____





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

SCHEDULE A(5)(j)

		Candidate Information	1	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received		i	
	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					
	Name		Date In-Kind Contribution Received			
	Street Address			-		
3	City	State	ZIP	-		,
	Asset or Property Contributed	-				
_	Name		Date In-Kind Contribution Received	,	×	, ,
	Street Address		<i>b</i>	1		
4	City	State	ZIP			
	Asset or Property Contributed			-		
_	Name		Date In-Kind Contribution Received			
	Street Address	-				
5	City	State	ZIP			
	Asset or Property Contributed					
	Enter total only if last page of (transfer the total received this per		gravi	f a		, infa.



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

SCHEDULE A(6)

_		Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	lame Date In-Kind Donation Received				
	Street Address					
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address		I			
2	City	State	ZIP	•		
	Type of Item Donated	ype 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		1			
4	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated	L				
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts." I	ine 6)			
_						

Schedule A(6), page_____ of ____



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

		Creditor Information	1	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				,	
2	City	State	ZIP	262		
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP		_ = -	
	Services or Goods Provided on Credit	-	- =			
	Name					
	Street Address	-	-			
4	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit		- gr - x-		
_	Name	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 sch (transfer the total received this period	nedule to "Summary of Rece	eipts," line 7(a))	\$2°		

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	Street Address				
1	City	State	ZIP			
	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	Date of Original Extension of Credit				
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
_	Name	-				
	Street Address	Street Address				
5	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	(D	7(1)			
	fransier the total received this period to "Sum	mary of Receipts," I	ine /(D))			

Schedule A(7)(b), page____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payor C Committee Name Street Address	ommittee Informa	Payment Date	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this
Street Address		Payment Date		reporting r cried	Election Cycle
Î					
City					
	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	1		
Committee Name		Payment Date			
Street Address					
City	State	ZIP	1 1	,	
Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
Committee Name		Payment Date			==0
Street Address					b
City	State	ZIP			
			r		1
Committee Name		Payment Date			
Street Address					
City	State	ZIP			
late of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
Committee Name		Payment Date			
Street Address					
city	State	ZIP			
ate of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Pate of Joint Fundraising Event (if applicable) Committee Name Street Address Committee Name Committee Name Committee Name Street Address City ate of Joint Fundraising Event (if applicable) Committee Name Street Address City ate of Joint Fundraising Event (if applicable) Committee Name	Type of Shared E Committee Name Street Address Type of Shared E Street Address Street Address	Type of Shared Expense (if applicable) Committee Name Payment Date Street Address Street Address State ZIP Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) Committee Name Payment Date State ZIP Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) Committee Name Payment Date Committee Name Payment Date Committee Name Payment Date Committee Name Payment Date	Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) State	Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) Payment Date Payment Date Street Address Street Address Street Address Street Address Street Address State Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) State Payment Date Fayment Date State State Type of Shared Expense (if applicable) State Type of Shared Expense (if applicable) Type of Shared Expense (if applicable)

Schedule A(8), page____ of ____



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

_	Payor II	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	ı.		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased	Payment Date				
	Name			=		
	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
5	Street Address					
	City	State	ZIP			
	Services or Goods Purchased	Payment Date		,		
	Enter total only if last page of schedule (transfer the total received this period to "Sumi					

Schedule A(9), page____ of ____



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	(Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					1.
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed			, ap ⁿ		
	Name					
0	Street Address					
3	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued		,	
	Name					,
4	Street Address				,	
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued		,	
	Name					
5	Street Address	State	ZIP			
	City Type of Account Receivable or Debt Owed	State	Date that Debt Accrued			
		1				
	Enter total only if last page of scheo (transfer the total received this period to	iule "Summary of Rece	ipts," line 10)			

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 / Reciplent 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 ____



W

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

Source	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name					
Street Address					
City	State	ZIP			
Receipt Type	. /	Receipt Date	111		
Name		-			
Street Address	•				
City	State	ZIP			
Receipt Type	79	Receipt Date		-5	
Name		7			
Street Address			-		
City	State	ZIP	-	-	
	1 2 mg (mg)	Receipt Date	10. Sa		
	-				
Street Address					,
City	State	ZIP			
Receipt Type		Receipt Date			1
Name					
Street Address					
City	State	ZIP			
Receipt Type .		Receipt Date			
Enter total only if last page of schedule		line 12)		1 20 0	
	Street Address City Receipt Type Name Street Address City Receipt Type Name	Street Address City State Receipt Type Name Street Address City State	Street Address City State ZIP Receipt Type Receipt Date Street Address City State ZIP Receipt Type Receipt Date Street Address City State ZIP Receipt Type Receipt Date Street Address City State ZIP Receipt Type Receipt Date Street Address Street Address	Name Street Address City State Receipt Type State Address City State State Address City State State Address City State State ZiP Receipt Date Receipt Type Receipt Type State ZiP Receipt Type Receipt Type	Source Information Amount his Reporting Period Name Street Address City State Receipt Type Receipt Date State Amount Amount this Reporting Period Receipt Type Receipt Date State City State Stat

Schedule A(12), page____ of ____

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

et Address s of Operating Expense Paid see	State Non-Electoral Purpose? Disbursement Date	ZIP (PACs and Political Parties Only)	□ Cash	Reporting Period	Election Cycle
e of Operating Expense Paid re	Non-Electoral Purpose?		□□Cash		
ie	Non-Electoral Purpose?		□ Cash		
ie		(PACs and Political Parties Only)	□ Cash		
	Disbursement Date		☐ Credit		
al Address					
		,			
	State	ZIP		i i	
e of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parlies Only)		☐ Cash☐ Credit		
e	Disbursement Date				
et Address					
	State	ZIP	□ Cash		
e of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Cash ☐ Credit		
е	Disbursement Date				
at Address					
	State	ZIP			
o of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	□ Cash □ Credit		
е	Disbursement Date				
et Address					
	State	ZIP	☐ Cash		
of Operating Expense Paid		[PACs and Political Parties Only]	Li Credit		
		ments." line 1)			
	Operating Expense Paid total only if last page of schedule	Operating Expense Paid Non-Electoral Purpose?	State ZIP Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)	State ZIP ☐ Cash☐ Credit Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)☐ I total only if last page of schedule	State ZIP Cash Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only) Total only if last page of schedule



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	3 11.	te Committee Recipient Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cycle	
	Committee Name Street Address	i i				
	Street Address					
1	City	State ZIP	□ Cash			
	Committee ID Number	Date Contribution Made	☐ Credit			
	Committee Name				P - 1 - 2	
	Street Address	1				
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			1.50		
	Street Address					
1	City	State ZIP	□ Cash			
	Committee ID Number	Date Contribution Made	□ Credit			
	Committee Name					
	Street Address					
	City	State ZIP	□ Cash			
	Committee ID Number	Date Contribution Made	☐ Credit			
	Enter total only if last page o (transfer the total disbursed this p	f schedule period to "Summary of Disbursements,	e 2(a))	30 1 30		

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/	/	Political Action Commi	ttee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
		Committee Name Street Address						
	1	City	State	ZIP	□ Cash			
		Committee ID Number Committee Name	Date Contribution Made		☐ Credit			
	Street Address							
1	2	City Committee ID Number	State ZIP Date Contribution Made Cash Credit			j.		
-		Committee Name		☐ Credit				
	3	Street Address						
	0	City Committee ID Number	State Date Contribution Made	ZIP	□ Cash □ Credit			
		Committee Name						
	4	Street Address City	State	ZIP		,		
		Committee ID Number	Date Contribution Made		□ Cash □ Credit			
		Committee Name						
	5	Street Address City	State ZIP					
		Committee ID Number Date Contribution Made			□ Cash □ Credit			
		Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursen	nents," line 2(b))				
1	\		Sche	edule B(2)(b), page of				



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Politi	cal Party Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address		7			
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Mad	de	□ Credit		
	Committee Name		*			
	Street Address				,	
2	City	State	ZIP	□ Cash	w	
	Committee ID Number	mittee ID Number Date Contribution Made				
	Committee Name					
-	Street Address					
3	City	State	ZIP	10 I		
	Committee ID Number	Date Contribution Ma	de	☐ Cash☐ Credit	-	
_	Committee Name			,		
	Street Address	7				
4	City	State	ZIP			
	Committee ID Number	Date Contribution Ma	de	☐ Cash☐ Credit		
	Committee Name					
5	Street Address				7	
-	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Ma	de ·	☐ Credit		
	Enter total only if last page of (transfer the total disbursed this p	f schedule period to "Summary of Disburs	sements," line 2(c))			5.0

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partner	ship Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	□ Cash	×	
	Corporation Commission File Number	Date Contribution Ma	ade	☐ Credit		
_	Partnership Name					
	Street Address					
2	City State ZIP					
	Corporation Commission File Number	Date Contribution M	□ Cash □ Credit			
	Partnership Name					
S	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
_	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
	Partnership Name					
	Street Address					
5	City	State	ZIP			
}	Corporation Commission File Number	Date Contribution Ma	nde	□ Cash □ Credit		
+	Enter total only if last page of sch (transfer the total disbursed this period	edule				



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	y		
	Corporation Commission File Number	Date Contribution Ma	de	☐ Cash☐ Credit		
	Conportation Commission 1 to Nation			L Ordan		
	Corporation/LLC Name		B			
	Street Address					
2	City State		710			
	City	State	ZIP	□ Cash		
	Corporation Commission File Number Date Contribution Made			□ Credit		
	Corporation/LLC Name					
	Street Address				-	
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	nde	□ Cash □ Credit		
	Corporation/LLC Name					
	Corporation VECO Hame		-			
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	☐ Cash☐ Credit		
	Supplied of the supplied of th					
	Corporation/LLC Name		P			
	Street Address					
5	City	State	ZIP			
				□ Cash		
	Corporation Commission File Number	Date Contribution Ma	de	☐ Credit	-9	
	Enter total only if last page of sched (transfer the total disbursed this period to	ule	nomenta " lin = 0/=\\		1	
	(transier the total dispursed this period to	Summary of Dispurs	sements, line Z(e))			

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organization	n Recipient Inform	nation	Amount Contributor	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 Made		☐ Cash☐ Credit		
	Labor Organization Name					
0	Street Address					
2	City	State Date Contribution Made	ZIP	□ Cash		
	Corporation Commission File Number Labor Organization Name	☐ Credit				
	Street Address		_			
3	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Labor Organization Name					
4	Street Address					
_	City	State Date Contribution Made	ZIP	□ Cash □ Credit		
	Corporation Commission File Number Labor Organization Name	Date Contribution Made		- Credit		
	Street Address			_		
5	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disbursen	nents," line 2(f))			



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contrib	utor Information	1	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received		Troporting Fortes	Licensin Cycle
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date of Original Contribution				
	Committee Name		Date Refund Received			
	Street Address				_	
2	City	State	ZIP	_		
	Committee ID Number		Date of Original Contribution	100 1		
_	Committee Name		Date Refund Received			
	Street Address	1		-	=	
3	City	State	ZIP			
	Committee ID Number	Date of Original Contribution				
	Committee Name	Committee Name				
	Street Address	1				
4	City	State	ZIP	-	-	
	Committee ID Number	İ	Date of Original Contribution			
_	Committee Name	Committee Name				
	Street Address			-		
5	City	State	ZIP			¥
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedu (transfer the total disbursed this period to "	e Summary of Disbu	ursements," line 2(h))	. 17	100	

Schedule B(2)(h), page____ of ___



LOANS MADE:

SCHEDULE B(3)(a)

/	Borrower Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Borrower Name					
Street Address					
City	State	ZIP			
Guarantor/Endorser Name	Date Loan Made				
Borrower Name					
Street Address					
City	State	ZIP			
Guarantor/Endorser Name Date Loan Made					
Borrower Name					
Street Address	<u> </u>				
City	State	ZIP			
Guarantor/Endorser Name	Date Loan Made				
Borrower Name					
City	State	ZIP			
Guarantor/Endorser Name	Date Loan Made				
Borrower Name	Borrower Name				
Street Address					
City	State	ZIP			
Guarantor/Endorser Name	Date Loan Made				
	Street Address City Guarantor/Endorser Name Borrower Name Street Address City Guarantor/Endorser Name Street Address City Guarantor/Endorser Name Street Address City Guarantor/Endorser Name Borrower Name Street Address City Guarantor/Endorser Name Street Address City Guarantor/Endorser Name	Borrower Name Street Address City State Borrower Name Date Loan Made Borrower Name Street Address City State Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State Street Address City State Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State Guarantor/Endorser Name Date Loan Made	Borrower Name Street Address City State ZIP Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State ZIP Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State ZIP Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State ZIP Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State ZIP Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State ZIP Guarantor/Endorser Name Date Loan Made Borrower Name Street Address City State ZIP Guarantor/Endorser Name Date Loan Made	Street Address	Borrower Information Amount Loaned Reporting Period Street Address City State 20P Gizzentice/Endorser Name Street Address City State 20P Gizzentice/Endorser Name Date Loan Made Borrower Name City State 20P Gizzentice/Endorser Name Direct Address City State 20P Gizzentice/Endorser Name Direct Address City State 20P Gizzentice/Endorser Name Direct Address City State 20P Gizzentice/Endorser Name Date Loan Made Borrower Name Street Address City State 20P Gizzentice/Endorser Name Date Loan Made Borrower Name Street Address City State 20P Gizzentice/Endorser Name Date Loan Made Street Address City State 20P Gizzentice/Endorser Name Date Loan Made Street Address City State 20P Gizzentice/Endorser Name Date Loan Made Street Address City State 20P

Schedule B(3)(a), page___of ___



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

/	7 (3) 44 2 2 2 11	arantor Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name Street Address			-		
1	City	State	ZIP	, ,		
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
_	Guarantor Name					
	Street Address	<u>9</u> 0		_		
3	City	State	ZIP	7		
	Borrower Name	Date Loan Guaranteed				
_	Guarantor Name .	Guarantor Name .				
	Street Address			-		
4	City	State	ZIP	1		
	Borrower Name	Date Loan Guaranteed		-		
	Guarantor Name					JP
	Street Address					
5	City	State	ZIP	-		
	Borrower Name	Date Loan Guaranteed		1		

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



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/,	/		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				
		Borrower Name	Date Forgiveness Made				
		Street Address					
	3	City	State	ZIP			
		Original Amount of Loan	Amount Still Outstanding				
Ì		Borrower Name		Date Forgiveness Made			
		Street Address	Street Address				
	4	City	State	ZIP	*		
		Original Amount of Loan	Amount Still Outstanding				
		Borrower Name		Date Forgiveness Made			
		Street Address					
	5	City	State	ZIP			
		Original Amount of Loan	Amount Still Outstanding				
		Enter total only if last page of schedule (transfer the total disbursed this period to "Sun	nmary of Disbursem	nents," line 3(c))			

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

/		Lender Information) 	Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	*	Date Repayment Made			
	Street Address	treet Address				
1	City	Stale	ZIP			
	Original Amount Borrowed	Amount Still Outs	standing			
_	Lender Name		Date Repayment Made			
	Street Address					
2	City	State	ZIP		v	
	Original Amount Borrowed	. Amount Still Outs	standing			
_	Lender Name		Date Repayment Made			
	Street Address	j	1			
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outs				
		Autour our our				
	Lender Name	j	Date Repayment Made		-	
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding					
	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outs	tanding			

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



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/		Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued		8	
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name Date Interest Accrued		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address			-		
3	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding .				
	Lender Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sun	nmary of Disbursem	nents," line 3(e))			

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Red	cipient Information	I=k· .	Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor .		Date Rebate/Refund Made			
	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					= 17
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address		,			
3	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor		Date Rebate/Refund Made			, I
	Street Address	Street Address				- AT
4	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					
5	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Enter total only if last page of sche (transfer the total disbursed this period	dule				

Schedule B(4), page____ of ____

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committe	e Recipient Infor	mation	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			
-	0					
ľ	Committee Name					
-	Street Address					
	Silver Address					
2	Cit.					
- [City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Mada			
		Date III-Kind Contribution	Made			
	Committee Name					
-	Street Address					
3	City	State	ZIP			
	,	Ciaro	211			
(Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
5	Street Address					
4	City	State	ZIP			
C	Committee ID Number	Date In-Kind Contribution	Made			
C	Committee Name					
5	Street Address					
5						
	City	State	ZIP			
_						90
C	Committee ID Number	Date In-Kind Contribution	Made			
_						
E	Enter total only if last page of schedule transfer the total disbursed this period to "Sun					
(t	transter the total disbursed this period to "Sun	nmary of Disbursem	ents," ine 5(a))			

Schedule B(5)(a), page____ of ____



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/					1	1	
	Sal Transcription	Political Action Comm	ittee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
С	committee Name						
S	treet Address						
C	ity		State	ZIP	_		
	1		1				
С	committee ID Number		Date In-Kind Contribution	Made		=	
С	committee Name						
S	treet Address		1				
С	iity		State	ZIP	-		
С	committee ID Number		Date In-Kind Contribution	Made			
С	ommittee Name						
S	treet Address						
С	ity	1.	State	ZIP	*		
С	committee ID Number		Date In-Kind Contribution	Made			
С	Committee Name						7
Si	Street Address						
C	ity		State	ZIP			
C	ommittee ID Number		Date In-Kind Contribution Made				
C	ommittee Name			,			- a
St	Street Address						
Ci	ity		State	ZIP			
	ommittee ID Number		Date In-Kind Contribution	ate In-Klind Contribution Made			

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/						
	Political Party R	ecipient Informati	ion ,	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					-
			•			
	Street Address					
1	City	State	ZIP			
		State	ZIF			
	Committee ID Number	Date In-Kind Contribution	Made	_		
	Committee Name					
	Street Address					
2		T	T			
	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			
		Date III-Nino Commodition wade				
	Committee Name					
		,				
	Street Address					
4			T			
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	9	Date in tune definition of	made			
	Committee Name					
	Street Address					
5						
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Mada			
	· ·	Date III-Ning Contribution	wade			
_	Enter total only if last page of schedule	L				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	-				

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/	Partners	hip Recipient Inform	nation	- F	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 Contri	bution Made				
	Partnership Name						
	Street Address						
2	City	State	ZIP	7			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made				
	Partnership Name	Partnership Name					
	Street Address						
3	ty State ZIP						
	·						
		Corporation Commission File Number Date In-Kind Contribution Made			1		
	Partnership Name	i					
4	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contr	ibution Made		e.	×	
	Partnership Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contri	ibution Made				

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

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

Schedule B(5)(e), page____ of ____



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Orgai	nization Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					-
	Street Address	9				4
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					
	Street Address					
3	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contrib	pution Made			i:
	Labor Organization Name		1			
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Made		· · · · · · · · · · · · · · · · · · ·	
_	Labor Organization Name					
	Street Address					
					- '11 - 19	
5	City	State	ZIP			

Schedule B(5)(f), page____ of ____

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure	Recipient Informa	ation	Expenditure Amount	Cumulative Amount this	Cumulative Amount this
_	Recipient Name		Mode of Advertising (TV, mail, etc)	Amount	Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Candidate(s) Supported (including % supported) Candidate(s) Opposed (including % opposed)		- Cook			
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Cash ☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
	Candidate(s) Supported (including % supported) Candidate(s) Opposed (including % supported)		ncluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Cash☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			_		
3	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	ncluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Cash ☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
,	City	State	ZIP	_		
1	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	-		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Cash ☐ Credit		
_						

Schedule B(6), page____ of ___



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/	Expenditure	Recipient Information		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	^	1	
	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)			þ
	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		_ Li Gredit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			2.2
	Street Address	9				
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		700		
	Enter total only if last page of schedul (transfer the total disbursed this period to "	e Summary of Dishurser	ments " line 7)		29	

Schedule B(7), page____ of ___

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

/	Expenditure	Recipient Information	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			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	9				
2	City	State	ZIP	_		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	_ □ Cash		
	ate 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 Reco	alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
4	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		
	Enter total only if last page of schedul	e				
	(transfer the total disbursed this period to "S	summary of Disbursen	nents," line 8)			

Schedule B(8), page____ of ___



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	Bene	fitted Candidate	is -	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	1.	10			
	Notes:					
_	Candidate Name		Date Benefit Provided			
	Street Address					
2	City	State	ZIP	2.1	=	
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address	1 2 2	N x 82 - 1 1 1			
3	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address	2.002.000				
4	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Enter total only if last page of sched (transfer the total disbursed this period to	ule			pro 15 to 1	

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	/	Recipient Com	nmittee Information	n	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name		Payment Date			
		Street Address		-			
1	1	City	State	ZIP			
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense ((if applicable)	☐ Cash☐ Credit		
		Committee Name		Payment Date			
		Street Address		L	-		
2	2	City	State	ZIP			
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (I if applicable)	☐ Cash☐ Credit		
		Committee Name		Payment Date			
		Street Address					
3	3	City	State	ZIP	□ Cash		
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)	☐ Credit		
		Committee Name		Payment Date	- F		
		Street Address					
4		City	State	ZIP	□ Cash		
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (i	I if applicable)	☐ Credit		
		Committee Name		Payment Date			
		Street Address					
5	5	City	State	ZIP	□ Cash		
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (i	f applicable)	☐ Credit		
	E (Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disbursem	ents," line 10)			
_		,					/

Schedule B(10), page____ of ___



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	4	Reimbursement Date	☐ Credit		
	Name	1				
	Street Address	. 1				
2	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed	2 =	Reimbursement Date	□ Credit		
	Name					= 1
	Street Address					
3	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	□ Credit	, e - g - O	
	Name	,				
	Street Address					
1	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
+	Name			. 1		
	Street Address					
5	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed Reimbursement Date			☐ Cash		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sun	nmary of Disbursen	nents," line 11)		: ==== : ::::::::::::::::::::::::::::::	11 3 3 1990



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

/	1	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
2	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
3	Street Address					
	City	State	ZIP	,		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
4	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
Name						
5	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts," li	ine 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	Access		
Recipient of Surplus Monies / Source of Transferred Debt	1		
Recipient of Surplus Monies / Source of Transferred Debt	200		
Total transfer the total disbursed this period to "Sumr	nary of Disbursements," line 13)		

Schedule A(13), page____ of ____

MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

		Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City					
	Disbursement Type		ZIP Disbursement Date	□ Cash □ Credit		
_	Name					
	Street Address					
2		,				
	City		ZIP	□ Cash		
	Disbursement Type .	Disbursement Date	□ Credit			
	Name					
2	Street Address					
3	City	i e	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	□ Credit		
	Name					
	Street Address					
1	City		ZIP	□ Cash		
	Disbursement Type Disbursement Date			□ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	nmary of Disbursen	nents," line 14)		,	

AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative of Disbursements - \$250 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 15)		

Schedule B(15), page____ of