# RECEIVED

OCT 1 4 2022



COMMITTEE ID NUMBER c21-02

COMMITTEE INFORMATION (required):

	CLTY CLERK Committee Information:	Committee Name:	Cody Newcomb for Chandler ci	ity Council
CANI	DIDATE INFORMATION (only if fil	ling as a candidate com	mittee):	
	Office Sought:	☐ County Office:		☐ Special District Office:
		☑ City/Town Office	Chandler city Council	☐ School Board District:
	Cumulative Report:			
	☐ Check here if this is the	e candidate committee's f	irst, cumulative report for the elec	ction cycle. Also select appropriate Reporting Period below.
REP	Cumulative reporting period	d start date (which supers	edes the start date for the Report	ing Period selected below):

	REPORTING PERIOD	REPORT DUE
	2020 4th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 2021
	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 2022
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
H	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
H	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
V	2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Quarter 3 Report: July 1, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	2022 Quarter 4 Report: October 1, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023
	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. §§§ 1-243(A), 1-301 and 1-303.

### FINANCIAL SUMMARY (required):

Cash Activity This	Election Cycle to Date
94.76	Date
180	
208.5	
66.26	
	Reporting Period 94.76 180 208.5



COMMITTEE ID NUMBER c21-02

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.

Noah Mundt	All A Man	10/13/2022
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date



SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100	\$180	
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committees		
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(j) Candidate's Personal Monies (Candidate Committees Only)	\$180	
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))	\$180	
	(I) Refunds Given Back to Contributors		
2	(m) Net Monetary Contributions (subtract 1(I) from 1(k))	\$180	
2.	Loans (a) Loans Received		
	(b) Forgiveness on Loans Received	Participation of the second	
	(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) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committees		
	(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)		
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		THE RESIDENCE OF THE PARTY OF
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		NA CONTRACTOR OF THE PARTY OF T
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)	T	
12.	Miscellaneous Receipts (use cash and/or equity as applicable)		
13.	Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)	\$180	



## SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses		
2.	Contributions Made	Committee of the Million	Law years
	(a) Candidate Committees		a the strict of
	(b) Political Action Committees		god station is at
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(f) Labor Organizations (PACs & 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))		
3.	Loans	Control of the last	
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		4.00
	(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 (PACs & Political Parties Only)		
	(f) Labor Organizations (PACs & Political Parties Only)		
	(g) 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.	Reimbursements Made		September 1
12.	Outstanding Accounts Payable / Debts Owed by Committee	and country are publicate	
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements (use cash and/or equity as applicable)		
15.	Aggregate of Disbursements - \$250 or Less (use cash and/or equity as applicable)	\$208.5	
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)	\$208.5	



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

SCHEDULE A(1)(a)

_		l Contributor Inform		Amount Received	Cumulative Amount this Reporting Period	
	J Chris Newcomb		Date Contribution Received 09/02/2022	180	180	180
	Street Address 3124 E Waterview Dr					
1	city Chandler	State AZ	zip 85249			
	Occupation Quality Engineer	Employer Curtiss-Wri	ght			
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
ŀ	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		-		

<sup>\*</sup>If in-state individual contributions of \$100 or less are listed on Schedule A(1)(b), do not include them on Schedule A(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))		

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

<sup>\*</sup>If in-state individual contributions of more than \$100 are listed on Schedule A(1)(a), do not include them on Schedule A(1)(b).





### MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

				1	l	
	Individual Contr	ibutor Informatio	n	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			
	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		l .			
5	City	State	ZIP			
	Occupation	Employer	1			

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



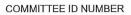


MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/	Candidate Committee	e Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Committee ID Number Date Contribution Received				
ŀ	Committee Name					
	Street Address					
;	2 city	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
;	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u>l</u>			
r	Committee Name					
	Street Address					
4	4 City	State	ZIP			
	Committee ID Number	Number Date Contribution Received				
	Committee Name	Committee Name				
	Street Address	Street Address				
Ę	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." li	ine 1(d))			
_						

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





MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

_	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 Contribution Receive	d			
	Committee Name					
	Street Address					
2	City					
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					-
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	d	-		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number Date Contribution Received					
	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," li	ine 1(e))			

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





MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

/						
	Politic	cal Party Contributor Inform	nation	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 Red	ceived			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Re	Date Contribution Received			
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			

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





MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

_	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	-	=	
	Corporation Commission File Number	Date Contribution Receive	d			
	Partnership Name					
	Street Address	11				- 1
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 Received					
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number  Date Contribution Received					
1	Partnership Name			÷		1
	Street Address					
5	City	State	ZIP	ı		
	Corporation Commission File Number	Date Contribution Receive	I ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(g))			
	33	Partnership Name  Street Address  1 City  Corporation Commission File Number  Partnership Name  Street Address  2 City  Corporation Commission File Number  Partnership Name  Street Address  3 City  Corporation Commission File Number  Partnership Name  Street Address  4 City  Corporation Commission File Number  Partnership Name  Street Address  5 City  Corporation Commission File Number  Partnership Name  Street Address  City  Corporation Commission File Number	Partnership Name  Street Address  Corporation Commission File Number  Partnership Name  Street Address  City State  Corporation Commission File Number  Date Contribution Receive  Partnership Name  Street Address  City State  Corporation Commission File Number  Date Contribution Receive  Partnership Name  Street Address  City State  Corporation Commission File Number  Date Contribution Receive  Partnership Name  Street Address  City State  Corporation Commission File Number  Date Contribution Receive  Partnership Name  Street Address  City State  Corporation Commission File Number  Date Contribution Receive  Partnership Name  Street Address  City State  Corporation Commission File Number  Date Contribution Receive  Date Contribution Receive  Date Contribution Receive  Date Contribution Receive  Date Contribution Receive	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  Partnership Name  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  Partnership Name  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	Partnership Name  Street Address  1 City State 2IP  Corporation Commission File Number Date Contitution Received  Partnership Name  Street Address  2 City State 2IP  Corporation Commission File Number Date Contitution Received  Partnership Name  Street Address  3 City State 2IP  Corporation Commission File Number Date Contitution Received  Partnership Name  Street Address  4 City State 2IP  Corporation Commission File Number Date Contitution Received  Partnership Name  Street Address  5 City State 2IP  Corporation Commission File Number Date Contitution Received  Partnership Name  Street Address  5 City State 2IP  Corporation Commission File Number Date Contitution Received	Partnership Contributor Information Amount Received Reporting Period  Furnamental Name  Street Address    City   State   21P





MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC C	Contributor Inform	nation	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 Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Corporation/LLC Name					
	Street Address					
3	City	Slate	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Corporation/LLC Name					
	Street Address					
4		L	I			
	City	State	ZIP			
	Corporation Commission File Number  Date Contribution Received					
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	on File Number Date Contribution Received				
	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 Organization	Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					-
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	I ed			
	Labor Organization Name					
	Street Address			·		
4	City	State	ZIP			
	Corporation Commission File Number	oration Commission File Number Date Contribution Received				
	Labor Organization Name					
	Street Address					
5	City	State	ZIP		-	
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sun	mary of Receipts," l	line 1(i))			

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





MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

_	/	Candidate	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name		Date Contribution Received			
		Street Address					
1	1	City	State	ZIP			
		Occupation	Employer				
		Name	I	Date Contribution Received			
		Street Address					
2	2	City	State	ZIP			
		,					
		Occupation	Employer				
		Name	Date Contribution Received				
		Street Address					
3	3	City	State	ZIP			
		Occupation	Employer				
	4						
		Name		Date Contribution Received			
		Street Address					
4	1	City	State	ZIP			
		Occupation	Employer				
		Name		Date Contribution Received			
		Street Address					
5	5	01.		Inin			
		City	State	ZIP			
		Occupation	Employer				
		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(j))			

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



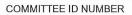


REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	Contributor	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	_	Date Contribution Refunded			
	Street Address	Street Address				
1	11 City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
2	Z 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)				
	Name		Date Contribution Refunded			
	Street Address					
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 "Sumn	nary of Receipts," li	ne 1(I))			

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





LOANS RECEIVED: SCHEDULE A(2)(a)

	Lender I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
10	nder Name	Date Loan Received				
e	eet Address					
y	у	State	ZIP	1		
	7			1		
a	arantor/Endorser Name	Non-Electoral Purpose? (	PACs and Political Parties Only)			
10	nder Name	Date Loan Received				
e	eet Address			-		
,	У	State	ZIP			
а	arantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
10	nder Name	Date Loan Received				
26	eet Address					
,	y	State	ZIP			
ai	arantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
ıd	nder Name	Date Loan Received				
36	eet Address					
,	Y	State	ZIP			
3,6	arantor <i>i</i> Endorser Name	Non-Electoral Purpose? (I	PACs and Political Parties Only)			
ıd	nder Name	Date Loan Received				
Street Address						
,	,	State	ZIP			
31		Non-Electoral Purpose? (I	PACs and Political Parties Only)			

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





FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

_	<u> </u>	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			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	Date Forgiveness Received				
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan Amount Still Outstanding		L	-		,
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	,			
	Lender Name		Date Forgiveness Received			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	Enter total only if last page of schedule transfer the total received this period to "Summary of Receipts," line 2(b))				

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address			-		
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	I	Date Repayment Received			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	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					
	(transfer the total received this period to "Sum					

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	
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	Date Interest Accrued				
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I				

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



COMMITTEE ID NUMBER c21-02

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

				î .	1	
/	Payor	Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received	-		
	Street Address					
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebat	e			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebat	e			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
3	City	State	ZIP			
	Original Purchase Amount Reason for Refund/Rebate		e			
	Payor Name	1	Date Rebate/Refund Received			
	Street Address	Street Address				
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	e			
_	Payor Name	Payor Name				-
	Street Address					
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts," I	line 3)			-
\		2.3	dule 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)		
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 IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:\*

SCHEDULE A(5)(a)

_	/	Individual Conti	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name		Date In-Kind Contribution Received			
		Street Address	Street Address				
1	1	City	State	ZIP			
		Occupation	Employer				
	1	Name		Date In-Kind Contribution Received			
		Street Address					
2	2	City	State	ZIP			
		Occupation	Employer				
		Name Date In-Kind Contribution Received					
		Street Address					
3	3	City	State	ZIP			
		Occupation	Employer				
r		Name		Date In-Kind Contribution Received			
		Street Address					
4	1	City	State	ZIP			
	ŀ	Occupation Employer					
		Name		Date In-Kind Contribution Received			
		Street Address					
5	5	City	State	ZIP			
		Occupation	Employer				
		Enter total only if last page of schedule (transfer the total received this period to "Sum		ine 5(a))			

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

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



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 5(b))		

<sup>\*</sup>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 c21-02

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

SCHEDULE A(5)(c)

/	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this	Cumulative Amount this
			·		Reporting Period	Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					2
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		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	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," I	ine 5(c))			

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

Candidate Committee	Contributor Infor	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Received			
Committee Name					
Street Address	7				
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Received	1		
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Received		_	
Committee Name					
Street Address					
City	State	ZIP	-		
Committee ID Number	Date In-Kind Contribution	Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Received			
Enter total only if last page of schedule					1
	Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Street Address  City  Committee ID Number  Committee ID Number  Committee ID Number	Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Contribution  Street Address  City  State  Committee ID Number  Date In-Kind Contribution  Street Address  City  State  Committee ID Number  Date In-Kind Contribution  Street Address  City  State  Committee ID Number  Date In-Kind Contribution  Committee ID Number  Date In-Kind Contribution  Committee ID Number  Date In-Kind Contribution  Street Address  City  State  Committee ID Number  Date In-Kind Contribution  Street Address  City  State  Committee ID Number  Date In-Kind Contribution  Date In-Kind Contribution  Committee ID Number  Date In-Kind Contribution	Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received	Street Address  City State In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Convenition Name  Street Address  City State ZIP  Convenition Name  Street Address  City State ZIP  Convenition Name  Street Address  City State ZIP  Convenition Number  Date In-Kind Contribution Received  Convenition ID Number  Date In-Kind Contribution Received  Convenition Name  Street Address  City State ZIP  Convenition Name  Street Address	Candidate Committee Contributor Information  Committee Name  Street Address  City  State  Committee IN Number  Date In-North Contribution Received  Committee ID Number  Committee ID Number  Date In-North Contribution Received  Committee ID Number  Committee ID Number  Date In-North Contribution Received  Committee ID Number  Committee ID Number  Date In-North Contribution Received  Committee ID Number  Committee ID Number  Date In-North Contribution Received  Committee ID Number  Committee ID Number  Date In-North Contribution Received  Committee ID Number  Date In-North Contribution Received

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/_	/	Political Action Commit	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name					
		Street Address					
3	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	Received			
		Committee Name					
		Street Address					
;	3	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Received			
r		Committee Name				1	
		Street Address					
1	4	City	State	ZIP			
		Committee ID Number Date In-Kind Contribution Received					
		Committee Name					
		Street Address					
	5	City	State	ZIP			9
		Committee ID Number	Date In-Kind Contribution	Received			
		Enter total only if last page of schedule (transfer the total received this period to "Sum	I mary of Receipts," li	ine 5(e))			

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





IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(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 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	1		
	Committee ID Number	Date In-Kind Contribution	Received			
-	Committee Name					
	Street Address					
4	City	State	ZIP			
		Date In-Kind Contribution	Received			
	Committee ID Number  Date In-Kind Contribution Received					
	Committee Name					
E	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersh	ip Contributor Inform	ation	Amour	nt 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 Contribu	Ition Received				
	Partnership Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contrib	ution Received				
	Partnership Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	ration Commission File Number Date In-Kind Contribution Received					
	Partnership Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	poration Commission File Number  Date In-Kind Contribution Received					
_	Partnership Name						
	Street Address						
5	City	State	ZIP				
		Date In-Kind Contrib					

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

		Corporation / LLC C	ontributor Inform	ation	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 Contribution	Received			
Ì		Corporation/LLC Name					
		Street Address					
	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
Ì		Corporation/LLC Name					
		Street Address					
	3	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution				
		Corporation/LLC Name					
		Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number	Received				
Ì		Corporation/LLC 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(h))			





IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

/						
/	Labor Organizatio	n 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	Date In-Kind Contribution	Received	-		
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	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 "Su	mmary of Receipts," I	ine 5(i))			

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

COMMITTEE ID NUMBER

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

SCHEDULE A(5)(j)

/							
		Candidate	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name			Date In-Kind Contribution Received			
	Street Address						
1	City		State	ZIP			
	Asset or Property Contrib	uted			-		
	Name			Date In-Kind Contribution Received			
	Street Address						
2	City		State	ZIP			)
	Asset or Property Contril	nuted	5 32/14				
			-	Date In-Kind Contribution Received			
	Name						
	Street Address						
3	City		State	ZIP			'
	Asset or Property Contributed						
	Name			Date In-Kind Contribution Received			
	Street Address						
4	City		State	ZIP			
	Asset or Property Contril	Asset or Property Contributed					
	Name			Date In-Kind Contribution Received			
	Street Address	Street Address			-		
5	City		State	ZIP			
	Asset or Property Contril	puted			-		
	Enter total only	if last name of schedule	-1				
L	(transfer the total	if last page of schedule received this period to "Sum	mary of Receipts,"	line 5(j))			
1			Sch	nedule A(5)(j), pageo	f		/



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

SCHEDULE A(6)

	Source I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received		, ,	
	Street Address					
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			-
	Street Address		1			
2	City	State	ZIP			
	Type of Item Donated		1			
	Name	Date In-Kind Donation Received				
	Street Address					
3	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
4	City	State	ZIP			
	Type of Item Donated		L			
	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated					
-	Enter total only if last page of schedule (transfer the total received this period to "Sum					
	(transfer the total received this period to "Sum	mary of Receipts,"	line 6)			

Schedule A(6), page\_\_\_\_



COMMITTEE ID NUMBER

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name					
Street Address					
City	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
City	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					-
Street Address			-		
City	State	ZIP	-		
		Date of Extension of Credit	_		
Street Address					
City	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name	1				
Street Address					
City	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Enter total only if last page of schedule					
	Name  Street Address  City  Services or Goods Provided on Credit  Name  Street Address  City  Services or Goods Provided on Credit  Name  Street Address  City  Services or Goods Provided on Credit  Name  Street Address  City  Services or Goods Provided on Credit  Name  Street Address  City  Services or Goods Provided on Credit  Name  Street Address  City  Services or Goods Provided on Credit  Name  Street Address  City  Services or Goods Provided on Credit  Name  Street Address	Street Address  City State  Services or Goods Provided on Credit  Name  Street Address  City State  Services or Goods Provided on Credit  Name  Street Address  City State  Services or Goods Provided on Credit  Name  Street Address  City State  Services or Goods Provided on Credit  Name  Street Address  City State  Services or Goods Provided on Credit  Name  Street Address  City State  Services or Goods Provided on Credit  Name  Street Address  City State  Services or Goods Provided on Credit  Name  Street Address  City State  Services or Goods Provided on Credit  Name  Street Address	Street Address  City State	Name Sitest Address City State Services or Goods Provided on Credit ZiP  Services or Goods Provided on Credit ZiP  City Services or Goods Provided on Credit ZiP  Services or Goods Provided On Credit	Name Storet Address City

Schedule A(7)(a), page\_\_\_\_ of \_\_\_\_



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

_	Creditor	Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address			-		
1	City	State	ZIP			
	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	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					
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					

Schedule A(7)(b), page\_\_\_\_ of \_\_\_\_



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payment Amount This   Amount this   Reporting Period   Payment Date							
City   State   ZiP	/	Payor Co	Payment Amount	Amount this	Cumulative Amount this Election Cycle		
Date of Joint Fundration Event (Flagolicable)   Type of Shared Expense (Flagolicable)	1	Committee Name		Payment Date			
Date of Joint Fundraising Event (if applicable)  Committee Name  Payment Date  Street Address  City  Convoltate Name  Payment Date  Street Address  City  Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)  Payment Date  Street Address  City  Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)  Payment Date  Street Address  City  Committee Name  Payment Date  Street Address  Type of Shared Expense (if applicable)  Type of Shared Expense (if applicable)		Street Address					
Committee Name   Payment Date    Street Address    City   State   ZiP    Date of Joint Fundraising Event (if applicable)   Type of Shared Expense (if applicable)    Street Address    City   State   ZiP    Date of Joint Fundraising Event (if applicable)   Type of Shared Expense (if applicable)    Date of Joint Fundraising Event (if applicable)   Type of Shared Expense (if applicable)    Storet Address    City   State   ZiP    Date of Joint Fundraising Event (if applicable)   Type of Shared Expense (if applicable)    Storet Address    City   State   ZiP    Date of Joint Fundraising Event (if applicable)   Type of Shared Expense (if applicable)    State   ZiP    Date of Joint Fundraising Event (if applicable)   Type of Shared Expense (if applicable)    Enter total only if last page of schedule		City	State	ZIP			
Street Address   Street Address   Street Address   Street Address   Street Address   Street Address   Payment Date		Date of Joint Fundraising Event (if applicable)  Type of Shared Expens		se (if applicable)			
2 City State of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZiP  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  4 City State ZiP  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  4 City State ZiP  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  5 City State ZiP  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule	2	Committee Name		Payment Date			
City State 2P  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Street Address  City State ZIP  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  4 City State ZIP  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  5 City State ZIP  Date of Joint Fundralaing Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule  Enter total only if last page of schedule		Street Address					
Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Street Address  Committee Name Payment Date  Street Address  Type of Shared Expense (if applicable)  Fayment Date  Street Address  Fayment Date  Fayment Date		City	State	ZIP			
Streat Address  City  Date of Joint Fundralsing Event (if applicable)  Committee Name  Payment Date  Streat Address  City  State  ZIP  Date of Joint Fundralsing Event (if applicable)  Type of Shared Expense (if applicable)  Type of Shared Expense (if applicable)  Type of Shared Expense (if applicable)  Committee Name  Payment Date  Streat Address  City  State  ZIP  Date of Joint Fundralsing Event (if applicable)  Fundralsing Event (if applicable)  Type of Shared Expense (if applicable)  Fundralsing Event (if applicable)  Type of Shared Expense (if applicable)		Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)		-	
City   State   ZIP		Committee Name		Payment Date			
City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule		Street Address					
Committee Name    Payment Date	3	City	State	ZIP			
Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule		Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)			
4 City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule	4	Committee Name		Payment Date			
City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule		Street Address					
Committee Name  Street Address  City  Date of Joint Fundraising Event (if applicable)  Enter total only if last page of schedule		City	State	ZIP			
Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule		Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)			
5 City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Enter total only if last page of schedule	5	Committee Name		Payment Date			
Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)  Enter total only if last page of schedule		Street Address					
Enter total only if last page of schedule		City	State	ZIP			
Enter total only if last page of schedule		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)			
(transfer the total received this period to "Summary of Receipts," line 8)	_	Enter total only if last page of schedu					

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			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
$\vdash$	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					
	Street Address					
5	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 9)			

Schedule A(9), page\_\_\_\_ of \_\_\_\_



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

_		mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed	L	Date that Debt Accrued			
	Name				1	
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts."	line 10)			

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

## TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	ı	1
	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
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	4	
Source of Surplus Monies / Recipient of Transferred Debt		
Total (transfer the total received this period to "Summary of Receipts," line 11)		



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Source	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address			$\dashv$		
2	City	State	ZIP			
	Receipt Type	'	Receipt Date	_		
_	Name					
3	Street Address					
		T				
	City	State	ZIP  Receipt Date			
	Receipt Type					
	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 schedule (transfer the total received this period to "Sum					

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



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Re	ecipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursement Date				
	Street Address					
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpos	ee? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
2	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpos	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP	 □ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpos	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP			
	7. (0. 1. 5	Non Electoral P	a2 (PACe and Political Parties Only)	☐ Cash☐ Credit		
	Type of Operating Expense Paid	Non-Electoral Purpos	e? (PACs and Political Parties Only)	Li Credit		
	Name	Disbursement Date				
	Street Address					
5	City	State	ZIP	☐ Cash☐ Credit		
	Type of Operating Expense Paid	Non-Electoral Purpos	Non-Electoral Purpose? (PACs and Political Parties Only)			

Schedule B(1), page\_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committe	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name					
	Street Address					
1	City	State	ZIP	☐ Cash	-	
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	l	☐ Credit		
	Committee Name					
	Street Address	Street Address				
3	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	_ □ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name	Committee Name				
	Street Address					
5	City	State	ZIP	☐ Cash		
	Committee ID Number	committee ID Number Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	I mmary of Disbursen	nents," line 2(a))	1		



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

		Committee Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	☐ Credit				
	Committee Name					
	Street Address					
2	City	State ZIP				
	Committee ID Number	ttee ID Number Date Contribution Made				
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	i	☐ Cash		
	Committee Name	L				
	Street Address	Street Address				
4	City	State	ZIP	□ Cash		
	Committee ID Number	ittee ID Number Date Contribution Made				
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
4	Enter total only if last page of sch (transfer the total disbursed this period					

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



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party R	Recipient Informati	ion	Amount Contributed	Cumulative Amount this	Cumulative Amount this
	Committee Name	50. 40. 30. 30. 30. 30.	Reporting Period	Election Cycle		
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	-	☐ Credit		
†	Committee Name					
	Street Address					-
3	City	State	ZIP	□ Cash		1
	Committee ID Number	Date Contribution Made		□ Credit		
	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 "Si	L				



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

		hip Recipient Informati	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
1	Street Address					
•	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name					
2	Street Address					
-	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
3	Partnership Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name	Partnership Name				
,	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name					
5	Street Address					
٦	City	State	ZIP	□ Cash		
	Corporation Commission File Number  Date Contribution Made			☐ Credit		
	Enter total only if last page of sch (transfer the total disbursed this period	edule I to "Summary of Disburse	ments " line 2(d))			

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

/	Corporation /	LLC Recipient Inform	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Corporation/LLC Name				•		
	Street Address						
1	City	State	ZIP	□ Cash			
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit			
	Corporation/LLC Name						
	Street Address						
2	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Made	(	☐ Credit			
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Made		☐ Credit			
	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Made		☐ Credit			
	Corporation/LLC Name						
	Street Address	Street Address					
5	City	State	ZIP	□ Cash			
	proporation Commission File Number  Date Contribution Made		☐ Credit				
		dule o "Summary of Disburse					



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

/				7		
	Labor Orga	nization Recipient Ir	nformation	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					
	Street Address					
2	City State ZIP					
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	proporation Commission File Number  Date Contribution Made			□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Made	☐ Cash☐ Credit		
	Labor Organization Name					
	Street Address					
5	City	ly State ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Enter total only if last page of sch	nedule				
	(transfer the total disbursed this perio	d to "Summary of Disb	ursements," line 2(f))			

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





CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date of Original Contribution				
	Committee Name		Date Refund Received			
	Street Address					
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				
	Committee Name	Committee Name				
	Street Address					
4	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address		1			
5	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disburser	ments," line 2(h))	1		

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
1	Borrower Name					
	Street Address					
1		Taxy	T			
1	City	State	ZIP			
	Guarantor/Endorser Name					
	Customariemons	Date Loan Made				
-	Borrower Name					
	Street Address					
		ı				
2	City	State	ZIP			
	*					
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
					1	
	Street Address					
3						
٦	City	State	ZIP			
	Guaranton/Endorser Name Date Loan Made					
_						
	Borrower Name					
	Street Address					
	Silect Addless					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
١,						
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
L						
	Enter total only if last page of schedule	man, of District	nto " line 2/o\\			
1	(transfer the total received this period to "Sumi	nary of Disburseme	ms, iine 3(a))			

Schedule B(3)(a), page\_\_\_of \_\_\_





LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

/	Guaranto	r Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name				. 3	
	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	1				
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name	I				
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Disburseme	ents," line 3(b))			

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				
	Borrower Name		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			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	I nmary of Disbursen	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					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outs	tanding			
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outs	tanding	_		
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outs	tanding			
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outs	tanding	$\dashv$		
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outs	tanding	_		
	Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Original Amount Borrowed	Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outs  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outs  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outs  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outs  Lender Name  Street Address  City State  Street Address  City Amount Still Outs  Lender Name  Street Address  Street Address	Lender Name   Date Repayment Made    Street Address   State   ZIP    Original Amount Borrowed   Amount Still Outstanding    Lender Name   Date Repayment Made    Street Address   ZIP    Original Amount Borrowed   Amount Still Outstanding    Lender Name   Date Repayment Made    Street Address   ZIP    Original Amount Borrowed   Amount Still Outstanding    Lender Name   Date Repayment Made    Street Address   ZIP    Original Amount Borrowed   Amount Still Outstanding    Lender Name   Date Repayment Made    Street Address   ZIP    Original Amount Borrowed   Amount Still Outstanding    Lender Name   Date Repayment Made    Street Address   ZIP    Original Amount Borrowed   Amount Still Outstanding    Lender Name   Date Repayment Made    Street Address   ZIP    Original Amount Borrowed   Amount Still Outstanding    Date Repayment Made    Date Re	Lender Name  Street Address  City State  Amount Still Outstanding  Lender Name  Date Repayment Made  City  Amount Still Outstanding  Street Address  City State  ZIP  Date Repayment Made  Street Address  City State  ZIP  Original Amount Borrowed  Amount Still Outstanding  City State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Lender Name  Date Repayment Made  Street Address  City Date Repayment Made  City State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Street Address  City State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Lender Name  Date Repayment Made  Street Address  City Date Repayment Made  Date Repayment Made  Street Address  City Date Repayment Made	Lender Name    Column   Colum

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





ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/_	/	Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Lender Name		Date Interest Accrued			
		Street Address					
	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
		Lender Name		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				
r		Lender Name		Date Interest Accrued			
		Street Address			4		
	4	City	State	ZIP			
	Ì	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))			

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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			_		
1	1	City	State	ZIP			
		Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
		Name of Original Payor		Date Rebate/Refund Made			
		Street Address		-			
2	2	City	State	ZIP	-		
	ŀ	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
-		Name of Original Payor		Date Rebate/Refund Made			
	2	Street Address					
(		City	State	ZIP			
		Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	-		
		Name of Original Payor		Date Rebate/Refund Made			
		Street Address					
4	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	edule	ments " line 4)	J	1.	
		(transier trie total dispursed triis period	to Summary of Dispurser	monto, intery			

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IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committe	ee 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			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	City	State	ZIF			
	Committee ID Number Date In-Kind Contribution Made					
	Committee Name	1				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			

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





IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

_	Political Action Commit	tee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name			1		
	Street Address					
1	City	State	ZIP			,
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made	4		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made	ı		
	Committee Name					
	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 (transfer the total disbursed this period to "Sui	nmary of Disbursen	nents," line 5(b))			

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





IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/						
	Polit	ical Party Recipient Inforn	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					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	Date In-Kind Contribution Made			
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Made			

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	,						
	/	Partnership Rec	cipient Information	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			
r		Partnership Name					
		Street Address					
;	3	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
r		Partnership Name					
		Street Address					
1	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
r		Partnership Name		<del></del>			
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
-		Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	I nmary of Disbursen	nents," line 5(d))			

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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					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	<u> </u> Made			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation/LLC Name					
	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			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursen	nents," line 5(e))			

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

		Y				
	Labor Organ	ization Recipient Info	rmation	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 Contribut	ion Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Made			
+	Labor Organization Name			п		
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Made			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ition Made			
	Labor Organization Name					
	Street Address	Street Address				
5	City	State	ZIP			

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

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure	Recipient Informati	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (inc	luding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % supported)		luding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)	(s) Supported (including % supported)  Candidate(s) Opposed (including % supported)		☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ L Cledit		
	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address		1			
4	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (incl	uding % opposed)	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	J. Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "	e Summary of Disburse	ments " line 6)	1		
L	Constitution and all all all all all all all all all al	Jammary or Disburse				

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BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/	Expenditure F	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		
	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)		(including % opposed)	□ Cash □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast					
	Recipient Name	Mode of Advertising (TV, mail, etc)				
	Street Address	1				
3	City 3	State	ZIP	1		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash	5	
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		I.			
4	City	State	ZIP	1		
	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			_ L Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	e Summary of Disburser	ments," line 7)			



RECALL EXPENDITURES MADE: SCHEDULE B(8)

/	Expenditure F	Recipient Informatio	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 Re		l 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			
	Supporting or Opposing Issuance of Recall Order?  Candidate Sought to be Rec		alled	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			_ Li 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 Rec	alled	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			2 Green		
	Recipient Name		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 ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		L Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "S	e Summary of Disbursen	nents," line 8)			

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SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/_	Benefitted 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						
		Notes:						
		Candidate Name		Date Benefit Provided				
		Street Address						
	2	City	State	ZIP				
		Type of Benefit Provided						
		Notes:						
		Candidate Name	Date Benefit Provided					
		Street Address						
,	3	City	State	ZIP				
		Type of Benefit Provided						
		Notes:						
		Candidate Name		Date Benefit Provided				
	Ì	Street Address						
	4	City	State	ZIP				
		Type of Benefit Provided					,	
		Notes:						
		Enter total only if last page of schedule (transfer the total disbursed this period to "S	ummary of Disbursen	nents," line 9)				
L								/

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JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient Co	mmittee Informatio	n	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Payment Date				
	Street Address					
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address		1			
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name	Payment Date				
	Street Address			8		
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name	Payment Date				
	Street Address	Street Address				
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name	Payment Date				
	Street Address		J			
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	☐ Cash☐ Credit		
	Enter total only if last page of schedul	<u> </u>				
	(transfer the total disbursed this period to "S	Summary of Disburser	ments," line 10)			

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REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Relmbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
+	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
1	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Relmbursed		Reimbursement Date	☐ Cash☐ Credit		
+	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Reimbursed Reimbursement Date			☐ Cash☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disburse	ements," line 11)			



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

		Debt In	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name					
		Street Address					
	1	City	State	ZIP			
		Type of Account Payable or Debt Owed		Date that Debt Accrued			
r		Name					
		Street Address					
	2	City	State	ZIP			
		Type of Account Payable or Debt Owed		Date that Debt Accrued			
-		Name					
		Street Address					
;	3	City	State	ZIP			
		Type of Account Payable or Debt Owed	Date that Debt Accrued				
r		Name					
		Street Address					
1	4	City	State	ZIP			
		Type of Account Payable or Debt Owed	Date that Debt Accrued				
-		Name					
		Street Address					
1	5	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					
		(transfer the total received this period to "Sumi	mary of Disburseme	nts," line 12)			



## 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 13)		

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



MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

<b>5</b>			1		
Recipient	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name					
Street Address					
City	State	ZIP	□ Cook		
Disbursement Type		Disbursement Date	☐ Credit		
Name		L			
Street Address					
City	State	ZIP			
Disbursement Type		Disbursement Date	☐ Cash ☐ Credit		
Name					
Street Address					
City	State	ZIP	-		
Disbursement Type		Disbursement Date	☐ Cash ☐ Credit		
Name					
Street Address					
city	State	ZIP			
Disbursement Type		Disbursement Date	_ □ Cash □ Credit		
Name					
Street Address					
City	State	ZIP	-		
Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
Enter total only if last page of schedule transfer the total disbursed this period to "Sun	nmary of Disbursen	nents," line 14)	1		
	Street Address  City  Plant    Street Address  City  Disbursement Type  Name  Street Address  City  Disbursement Type  Name  Street Address  City  Disbursement Type  Name  Street Address  City  Disbursement Type  Street Address  City  Disbursement Type  Street Address  City  Disbursement Type  Street Address  City  Disbursement Type	Street Address  City State  Name  Street Address  City State  State  Street Address  City State  Street Address  City State  State  Street Address  City State  State	Street Address  Street Address	Street Address  Street Address	Street Address    Cash   Credit

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 (If disbursements of \$250 or less are listed on any of the other disbursement schedules, do not include them on Schedule B(15))	\$208.5	
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 15)	\$208.5	

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