RECEIVED

JUL 8 2022



 $\begin{array}{c} \text{COMMITTEE ID NUMBER} \\ c21\text{-}02 \end{array}$

COMITY OF CHANDLER

CHILL CLERK	Committee Name: Cody Newcomb for C	Chandler city Council
NDIDATE INFORMATION (only if filing as a candidate committee): Office Sought:		
Office Sought:		☐ Special District Office:
	☑ City/Town Office: Chandler city Council	☐ School Board District:
•		
☐ Check here if this is the	•	
☐ Check here if this is the Cumulative reporting peri	•	

	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*
11	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
10 N	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
10	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 2022
70	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
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
1	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
	2022 Post-Primary Election (Q3) Report: July 17, 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 Post-General Election (Q4) Report: October 23, 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):

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) 	124.76		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	0		
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	30		
(d) = Balance at close of reporting period	94.76		



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	12 12	07/08/2022	
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date	

committee id number

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)	******	
	(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 Monies (Candidate Committees Only)		
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		
	(I) Refunds Given Back to Contributors		
	(m) Net Monetary Contributions (subtract 1(I) from 1(k))		
2.	Loans Control Description		
	(a) Loans Received (b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made	A Section of the sect	
	(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		
5.	(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))		
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
	Outstanding Accounts Receivable / Debts Owed to Committee		
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12.	Miscellaneous Receipts (use cash and/or equity as applicable)		



### SUMMARY OF DISBURSEMENTS (Schedule B):

/			
	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses		
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
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))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
11.	Reimbursements Made		
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements (use cash and/or equity as applicable)		
15,	Aggregate of Disbursements - \$250 or Less (use cash and/or equity as applicable)	30	
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)	30	





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

SCHEDULE A(1)(a)

Individual Continuance  Indivi	State  State  Employer  State	Date Contribution Received  ZIP  Date Contribution Received	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ity ccupation ame treet Address ity	Employer	ZIP  Date Contribution Received			
ame treet Address ity	Employer	Date Contribution Received			
ame  treet Address  ity	Employer	Date Contribution Received			
ame treet Address ity ecupation	State				
ity eccupation					
ity		ZIP			
ecupation		ZIP	_		1
	Employer				
ame			_		
		Date Contribution Received			
Street Address					
ity	State	ZIP			
occupation	Employer				
ame		Date Contribution Received			
Ireet Address					
ity	State	ZIP	_		
occupation	Employer				
darne		Date Contribution Received			
Street Address					
	State	ZIP			
sity	5,6,6	1		1	1
- i	ty ccupation ame	ty State  ccupation Employer  ame	reet Address  ty State ZIP  ccupation Employer  ame Date Contribution Received  reet Address	ty State ZIP  ccupation Employer  Date Contribution Received  reet Address	ty State ZIP  Coupation Employer  Date Contribution Received  reet Address

*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 ____



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 on Schedule A(1)(b).



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

SCHEDULE A(1)(c)

		Individual Contribu	itor Information	1	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name			Date Contribution Received			
	Street Address		***************************************				
1	City	Sta	ate	ZIP	-		
	Occupation	Em	player				
	Name			Date Contribution Received			
	Street Address				_		
2	City	Sta	ate	ZIP	-		
	Occupation	Em	Employer		_		
	Name			Date Contribution Received		***************************************	
	Street Address	Street Address			_		
3	City	Sta	ate	ZIP			
	Occupation	Err	nployer				
	Name			Date Contribution Received			
	Street Address			<u> </u>			
4	City	Sta	ate	ZIP		And Andrews	
	Occupation	En	nployer				
	Name			Date Contribution Received			
	Street Address						
5	City	Sta	ate	ZIP			
	Occupation	En	mployer		-		
	Enter total only if last (transfer the total receive	page of schedule		P 4/			
L	(transfer the total receive	ed this period to "Summa	ary of Receipts,"	line 1(c))			

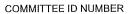
Schedule A(1)(c), page____ of ____

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

_	-	andidate Committee Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	/ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved			
F	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee (D Number Date Contribution Received					
r	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number Date Contribution Received					
	Committee Name	I				
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	l ed			

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





MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

Political Action Committ	aa Cantributar Inf			Cumulative	Cumulative
	ee Contributor in	formation	Amount Received	Amount this Reporting Period	Amount this Election Cycle
nittee Name					
Street Address					
	State	ZIP			
nittee ID Number	Date Contribution Received	d			
nittee Name					
t Address					
	State	ZIP			
nittee ID Number	Date Contribution Receive	ed			
Committee Name					
Street Address					
	State	ZIP			
Committee ID Number Date Contribution Received					
nittee Name					
Street Address					
	State	ZIP			
	State	Zir			
mittee ID Number Date Contribution Received					
Committee Name					
Street Address					
	State	ZIP	_		
mittee ID Number	Date Contribution Receiv	red			
m	Address	Address  State  Date Contribution Receiv	Address  State ZIP  Date Contribution Received	Address  State  ZIP	Address  State ZIP  Date Contribution Received

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

	/						
/	_	Political Party Co	ntributor Informat	iion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ı		Committee Name					
		Street Address					
	1	City	State	ZIP			
		Committee ID Number	Date Contribution Receive	ad			
		Committee Name					
		Street Address					
	2	City	State	ZIP			
		Committee ID Number	nittee ID Number Date Contribution Received				
		Committee Name					
		Street Address					
	3	City	State	ZIP			
		ommittee ID Number Date Contribution Received					
		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			
ſ		Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts," li	ine 1(f))			

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

,						
	Partnership Cont	ributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZĮP			
	Corporation Commission File Number	Date Contribution Receive	d			
Partnership Name						
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	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	sission File Number Date Contribution Received				
	Partnership Name					
	Street Address			-		
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum					

Arizona Secretary of State Revision 12/29/21 (fillable format)

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

/_	_	Corporation / LLC C	Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ſ		Corporation/LLC Name					
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	d .			
		Corporation/LLC Name					
	Street Address						
	2	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
L		Corporation/LLC Name					
		Street Address					
	3						
		City	State	ZIP			
		Corporation Commission File Number Date Contribution Received					
ľ		Corporation/LLC Name					
	Ì	Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number Date Contribution Received		ed			
F		Corporation/LLC Name		WHAT A STATE OF THE STATE OF TH			
		Street Address					
	5	City State ZIP					
			Date Coatribution Pressing	Total Control of the			
		Corporation Commission File Number  Date Contribution Received					
Ĺ		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 Organiz	ation Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address	and the second s				
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved			
	Labor Organization Name					
ł	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Recei	lved		-	
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
-	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
_	Enter total only if last page of sch (transfer the total received this period	edule				

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	1	Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	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			17.7		
5	City	State	ZIP			
	Occupation	Employer				
	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 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					
1	City	Stale	ZIP			
	ID Number (if applicable)	I	Date of Original Contribution			:
	Name		Date Contribution Refunded			
	Street Address					
2	City	State	ZIP	-		
	ID Number (if applicable)		Date of Original Contribution			
Ç	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)		Date of Original Contribution	-		
	Name	Name				
	Street Address					
5	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
<u> </u>	Enter total only if last page of schedule (transfer the total received this period to "Sum					

Schedule A(1)(I), page ____ of___



LOANS RECEIVED: SCHEDULE A(2)(a)

/		Lender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received				
	Street Address	Street Address				
1						
'	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose	? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
2	City	State	ZIP			
				_		
	Guarantor/Endorser Name	Non-Electoral Purpose	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose	7 (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Puroose	? (PACs and Political Parties Only)	_		
	Lender Name	Date Loan Received				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	1	? (PACs and Political Parties Only)			

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





FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

_	L	ender 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	g			
	Lender Name		Date Forgiveness Received			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstandin	g			
	Lender Name	Lender Name				
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstandin	g			
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP	_		
	Original Amount of Loan Amount Still Outstanding					
$\vdash$	Lender Name	Lender Name				
	Street Address		L			
5	City	State	ZĮP	_		
	Original Amount of Loan	Amount Still Outstandin	l Ng			

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			
	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	-			
		Borrower Name		Date Repayment Received		The state of the s	
		Street Address					
	2	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	L			
		Borrower Name		Date Repayment Received			
		Street Address					
	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	I			
		Borrower Name	<u> </u>	Date Repayment Received			
		Street Address		· · · · · · · · · · · · · · · · · · ·			
	4	City	State	ZIP	Į		
		Original Amount Borrowed Amount Still Outstanding					
		Borrower Name	1	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 ____

SCHEDULE A(2)(d)

	COMMITTEE CAMPAIGN FINANCE REPORT
INTEREST ACCRUED ON LOANS MADE:	

_	/	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	3	City	State	ZIP			
	-	Original Amount Borrowed	Amount Still Outstanding				
-	-	Borrower Name		Date Interest Accrued			
		Street Address			-		
4	1	City	State	ZIP			
		Original Amount Borrowed Amount Still Outstanding				1	
		Волоwer Name		Date Interest Accrued			
		Street Address					
1	5	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	1	-		ł
		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 2(d))			

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



c21-02

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

/	<b>,</b>	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		124.76	
	Original Purchase Amount	Reason for Refu	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
2	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			<b></b>
	Street Address	Street Address				
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	id/Rebate		·	
-	Payor Name		Date Rebate/Refund Received			
	Street Address					
1	City	State	ZIP	_		
	Original Purchase Amount Reason for Refund/Rebate		d/Rebate			
	Payor Name	Werter Annual Control of the Control	Date Rebate/Refund Received			
	Street Address			_		
;	City	State	ZIP			
	Original Purchase Amount	Reason for Refun	d/Rebate	-		
1	Enter total only if last page of (transfer the total received this per	schedule				
	(transfer the total received this per	riod to "Summary of Rece	ipts," line 3)			



SCHEDULE A(4)

#### INTEREST ACCRUED ON COMMITTEE MONIES:

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		3,0.0
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
a's		
West of the second seco		
Account with Interest Earned (Bank Name / Type of Account)		
Account that interest Control (control 1995 of Accounty		
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)		
	<u> </u>	

Schedule A(4), page____ of ____

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

SCHEDULE A(5)(a)

_		Individual Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP	-		<i>66</i>
	Occupation	Employer				
-	Name		Date In-Kind Contribution Received			
	Street Address			1		
2	City	Slate	ZIP	**************************************		
	Occupation	Employer	I	_		į
-	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	Ζ(P		To the second	
	Occupation	Employer		_		
	Name		Date In-Kind Contribution Received			
	Street Address		L			
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 (transfer the total receiv	page of schedule ed this period to "Summary of Receip	ots," line 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 ___



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))		

^{*}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 Conf	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name		Date In-Kind Contribution Received			
Street Address					
City	State	ZIP		124.76	
Occupation	Employer				
Name	<u> </u>	Date In-Kind Contribution Received			
Street Address					
City	State	ZIP			
Occupation	Employer				
Name		Date In-Kind Contribution Received			
Street Address					
City	State	ZIP			
Occupation	Employer				
Name		Date In-Kind Contribution Received			
Street Address					
City	State	ZIP			
Occupation	Employer				
Name	L	Date In-Kind Contribution Received			
Street Address					
City	State	ZIP			
Occupation	Employer	L			
Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(c))			
	Street Address  City  Occupation  Name  Street Address  City  Occupation  Street Address  City  Occupation  City  Occupation  Name  Street Address  City  Occupation  Occupation  Name	Street Address  City State Occupation Employer  Name  Street Address  City State  Cocupation Employer  Name  Street Address  City State  City State	Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  City State ZIP  Occupation Employer  Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Date In-Kind Contribution Received  Street Address  Street Address  Street Address  City State ZIP  Occupation Employer  Name ZIP  Occupation Employer  Date In-Kind Contribution Received  Street Address  Street Address  Street Address  Street Address	Name   Date for-Kind Contribution Received	Reporting Period   Received   State   State

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

_	Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	Received			
	Committee Name	<u> </u>				
	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	L				
	Street Address					
4	city	State	ZIP			
	Committee ID Number	Date in-Kind Contribution	Received	- - -		
-	Committee Name	<u> </u>				
	Street Address			-		
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I. Received	-		
	Enter total only if last page of schedule (transfer the total received this period to "Surr	mary of Receipts,"	line 5(d))			

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

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

<u>/</u>	Political Action Commit	tee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	110000000000000000000000000000000000000				
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	I			***************************************	
	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))			

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





IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

Political F	Party Contributor Inforn	nation	Amoun	t Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name			100			
Street Address						
City	State	ZIP				
Committee ID Number	Date In-Kind Contribu	tion Received				
Committee Name	<u> </u>					-
Street Address						
City	State	ZIP				
Cammittee ID Number	Date In-Kind Contribu	ution Received				
Committee Name						
Street Address						
City	State	ZIP				
Committee ID Number	Date In-Kind Contrib	ution Received			!	
Committee Name						
Street Address	- With				***************************************	
City	State	ZIP			1	
Committee ID Number	Date In-Kind Contrib	ution Received			***************************************	
Committee Name						
Street Address						
City	State	ZIP				
Committee ID Number	Date In-Kind Contrib	ution Received				
Estantatal anhuif last naga of a	shadula					
	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 Contribut  Street Address  City  State  Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Contribut  Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Contribut  Committee ID Number  Date In-Kind Contribut  Committee ID Number  Date In-Kind Contribut  Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Contribut  Street Address  City  State  Committee ID Number  Date In-Kind Contribut  Street Address  City  State  Committee ID Number  Date In-Kind Contribut  Dat	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 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 Name  Street Address  City State ZIP  Committee Name  Street Address  City State ZIP  Committee Name  Committee Name  Street Address  City State ZIP  Committee Name  Date In-Kind Contribution Received	Street Address  City State ZIP  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received	Street Address  City State In Number State State ID Number ID Numb	Political Party Contributor Information Committee Name  Site of Address  City  City  Committee ID Number  Committ

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

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnership Cor	ntributor 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	1			TO STANDARD TO	
	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		, and the state of	
	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 Infor	mation	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	on Received				
+	Corporation/LLC Name						
	Street Address						
2	City	State	ZIP				
-	Corporation Commission File Number	Date In-Kind Contribut	ion Reœived				
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribut	tion Received				
-	Corporation/LLC Name		<u> </u>				
	Street Address						
4	City	State	ZIP			F	
	Corporation Commission File Number	Date In-Kind Contribu	tion Received				
	Corporation/LLC Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribu	ltion Received				
_	Enter total only if last page of sche (transfer the total received this period to	dule					

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

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

/	Labor Organiza	ation Contributor Ir	nformation	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 Contrib	bution Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Labor Organization Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contril	bution Received			
	Labor Organization Name		DOWNSON MANAGEMENT OF THE STREET			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	bution Received			
	Enter total only if last page of scheo (transfer the total received this period to	dule				
	(transfer the total received this period to	"Summary of Receip	ts," line 5(i))			

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



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 Contributed					
	,					
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP	-		
	Asset or Property Contributed			-		
L	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZiP			
	Asset or Property Contributed			-		
-	Name		Date In-Kind Contribution Received			
	Street Address			-	A C	
4	Tou.	State	ZIP	_		
	City	State	ZIF			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address			-		
5	City	State	ZIP			
	Asset or Property Contributed		,	_		
L	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,	' line 5(j))			
		Sc	hedule A(5)(j), pagec	of		

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	<u> </u>	J			
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donated					
	-lame		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					
1	Name		Date In-Kind Donation Received			
	Street Address	Street Address				
5	City	State	ZIP			
	Type of Ilem Donated					
-	Enter total only if last page of schedule (transfer the total received this period to "Sumr					***************************************



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

_				Amount of Credit	Cumulative	Cumulative
	Creditor	Information		Extended	Amount this Reporting Period	Amount this Election Cyc
T	Name					
	Street Address			***************************************		
	City	State	ZIP			
ŀ	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		App.			
		I				
	City	State	ZIP		-	
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
-	Street Address				· ·	
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
_	Name					
	Street Address					
5	City	State	ZIP		-	
	Services or Goods Provided on Credit		Date of Extension of Credit			
_	Enter total only if last page of schedule					

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

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

/	_	Creditor		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				and the second s		
		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						
	5	Clly	State	ZIP				
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit				
-	_	Enter total culti life to a second state to a						
L		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," li	ine 7(b))				/

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

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

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

Schedule A(8), page____ of ____

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor	Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	City State		ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address		-			
4	City	ZIP				
	Services or Goods Purchased		Payment Date			
	Name		T Byrnen Sale			
	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 "Sun	nmary of Receip	ots," line 9)			

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Infor	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZiP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name	-	1			
	Street Address					
2	City	State	ZIP	1		
	Type of Account Receivable or Debt Owed	L	Date that Debt Accrued	1		
	Name					
	Street Address		:			
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZíP			
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address					
5	City	State	Ζ(P			
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
_	Enter total only if last page of schedule					

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 Monles / 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 ____



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Source I	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		AV			
2	City	State	ZIP			
	Receipt Type		Receipt Date			
+	Name					
	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
5	Street Address					
J	City	State	ZIP			
	Receipt Type		Receipt Date			

Schedule A(12), page____ of ____



COMMITTEE	ID	NUMBER

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

ame treet Address	Disbursement Date		l l	Reporting Period	Election Cycle
treet Address	Disbursement Date				
		**************************************			:
		T			
City State ZIP		- Cook			
ype of Operating Expense Paid	Non-Electoral Purpose	?? (PACs and Political Parties Only)	☐ Cash☐ Credit☐ Credi		
ame	Disbursement Date				
reet Address					
ity	State	ZIP			
ype of Operating Expense Paid	1	Non-Electoral Purpose? (PACs and Political Parties Only)			
ame	Disbursement Date				
reel Address					
ıty	State	ZIP			
			☐ Cash		
ype of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)			Li Credit		
ame	Disbursement Date	Disbursement Date			
reet Address					
ty	State	ZIP			
vpe of Operating Expense Paid		? (PACs and Political Parties Only)	☐ Cash☐ Credit		
эте	Disbursement Date				
reet Address			_		
ty	State	ZIP	☐ Cash		
pe of Operating Expense Pald	Non-Electoral Purpose?	7 (PACs and Political Parties Only)	☐ Casn ☐ Credit		
nter total only if last page of sched ransfer the total disbursed this period to	ule "Summary of Disburse	ements," line 1)			
ity // an ity // ity	pe of Operating Expense Paid  me eet Address  y pe of Operating Expense Paid  me eet Address  y pe of Operating Expense Paid  me eet Address  y pe of Operating Expense Paid  me eet Address	y State  pe of Operating Expense Paid Non-Electoral Purpose  eat Address  y State  Pe of Operating Expense Paid Non-Electoral Purpose  me Disbursement Date  State  Pe of Operating Expense Paid Non-Electoral Purpose  eat Address  y State  pe of Operating Expense Paid Non-Electoral Purpose  me Disbursement Date  The Company of Disbursement Date  and Company of Disbursement Date  pe of Operating Expense Paid Non-Electoral Purpose  me Disbursement Date  The Company of Disbursement Date  pe of Operating Expense Paid Non-Electoral Purpose  me Disbursement Date  The Company of Disbursement Date Date  The Company of Disbursement Date Date Date Date Date Date Date Dat	State   ZIP   pe of Operating Expense Paid   Non-Electoral Purpose? (PACs and Political Parties Only)	State   ZIP     Cash   Credit   Credit   Cash   Credit   Credit   Cash   Credit   Credit   Cash   Credit   Credit	State   2IP



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committe	e Recipient Inforr	mation	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	☐ Credit				
	Committee Name					
	Street Address					
3	City	State	ZIP	☐ Cash		
	Committee  D Number	☐ 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	☐ Credit	
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	ummary of Disburse	ments," line 2(a))			
		Sch	edule B(2)(a), page_	of		



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

_	Political Action Comm	nittee Recipient Int	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	Date Contribution Made		☐ Credit		
	Committee Name		Am Winds			
	Street Address					
2	City	State	ZIP	- Cook		
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
2	Committee Name					
	Street Address					
	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	J	☐ Credit		
	Committee Name	- F				
	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	ımmarv of Disbursen	ments " line 2/h))			



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party Re	ecipient Informatio	on	Amount Contributed	Cumulative Amount this	Cumulative Amount this
	Committee Name		OGNINATION	Reporting Period	Election Cycle	
	Street Address	As a state of the				
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
1	Committee Name					
-	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit	☐ Cash☐ Credit	
	Committee Name					
	Street Address					
3	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		:
	Committee Name	<u> </u>				
	Street Address					
4	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	.1	☐ Credit		
	Committee Name	<u>I</u>				
	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 "Su					

COMMITTEE	ID	NUMBER
J C 1711 1 1 LL LL		1101110111

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

Partnership Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
3	City	State	ZIP	***************************************		
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	Date Contribution Made			
	Partnership Name			West 19 19 19 19 19 19 19 19 19 19 19 19 19		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	☐ Cash☐ Credit		
	Enter total only if last page of sch (transfer the total disbursed this period	edule		<u> </u>		



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/ LLC Recipient Information	ation	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		☐ Credit		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Corporation/LLC Name					
	Street Address		had t			
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					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	3	☐ Credit		
_	Enter total only if last page of sch (transfer the total disbursed this perio	nedule d to "Summary of Disburse	ements," line 2(e))			



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orga	nization Recipient I	nformation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Made	☐ Cash☐ Credit		
	Labor Organization Name	L				
	Street Address					
	City	State	ZIP			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Corporation Commission File Number	Date Contribution	n Made	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	n Made	☐ Cash☐ Credit		
	Labor Organization Name		MANUAL CONTRACTOR OF THE CONTR			
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	n Made	□ Cash □ Credit		
	Labor Organization Name	· · · · · · · · · · · · · · · · · · ·				
	Street Address					
	City	State	Z{P			
	Corporation Commission File Number	Date Contribution	) Made	☐ Cash☐ Credit		
-	Enter total only if last page of sch transfer the total disbursed this period	edule d to "Summary of Disb	oursements," line 2(f))	L		
L		-				





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		144004000000000000000000000000000000000			
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	L	Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
4	City	State	ZIP	_		
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
5	City	State	ZíP	-		
	Committee ID Number	1	Date of Original Contribution	_		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburse	ments," line 2(h))			

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						
1	City	State	ZIP				
	Guarantor/Endorser Name	Date Loan Made					
	Borrower Name						
	Street Address						
2	City	State	ZIP	· · · · · · · · · · · · · · · · · · ·			
	Guarantor/Endorser Name	Dale Loan Made					
	Вогrower Name						
	Street Address						
3	City	State	ZIP				
	Guarantor/Endorser Name	Date Loan Made					
	Borrower Name						AII.
	Street Address						
4	City	State	ZIP				
	Guarantor/Endorser Name	Date Loan Made					
	Borrower Name						
	Street Address						
5	City	State	ZIP				
	Guarantor/Endorser Name	Date Loan Made					

Schedule B(3)(a), page___of ___



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

_	Gu	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				i	
	Street Address		AL POST OF THE POS			
2	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	1			
	Guarantor Name		- Marine			
	Street Address			_		
5	City	State	ZIP	_		
		Date Loan Guaranteed				

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

FORGIVENESS ON LOANS MADE: SCHEDULE B(3)(c)

/	·	er Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	1			
	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	<u> </u>	Date Forgiveness Made			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u> </u>			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Si	I ummary of Disbursen	nents," line 3(c))			

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





REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	/	Lender l	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Γ		Lender Name		Date Repayment Made			
		Street Address					
	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
$\mid$	1	Lender Name		Date Repayment Made			
		Street Address					
	2	City	State	ZiP			
		Original Amount Borrowed	Amount Still Outstanding				
ŀ		Lender Name		Date Repayment Made			
		Street Address					
	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-		Lender Name		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 Outstanding				
$\setminus  $		Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburser	nents," line 3(d))			

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



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/	Lender	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address					
1						
'	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			:
	Street Address		1	-		
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address					
3		<b>T</b>				
	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	<u> I</u>	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 "Su	mmary of Disbursen	nents." line 3(e)\			

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Rec	ipient 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	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor	<u> </u>	Date Rebate/Refund Made			
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
4	City	State	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
_	Name of Original Payor	1	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	<u> </u> edule				
	(transfer the total disbursed this period	to "Summary of Disburs	sements," line 4)			

Schedule B(4), page____ of ____

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

Candidate Committe	e Recipient Inforr		Amount	Cumulative	Cumulative
		mation 	Contributed	Amount this Reporting Period	Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution I	Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Made			
Convnittee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Made			
Committee Name					
Street Address					
Sity	State	ZĮP			
Committee ID Number	Date In-Kind Contribution	Made			
	Committee ID Number  Committee Name  Street Address  City  Committee ID Number  Committee ID Number	Committee ID Number  Date In-Kind Contribution I  Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Contribution  Committee Name  Street Address  City  State  Date In-Kind Contribution  Date In-Kind Contribution  Date In-Kind Contribution  Committee Name	Committee ID Number  Date In-Kind Contribution Made  Committee Karne  Street Address  City  State  ZIP  Committee Name  Street Address  City  State  ZIP  Committee ID Number  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made  Committee Name  Committee ID Number  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made	Committee ID Number  Date In-Kind Contribution Made  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made  Street Address  State ZIP  Committee ID Number Date In-Kind Contribution Made  Street Address  State ZIP  Committee ID Number Date In-Kind Contribution Made  Street Address  State ZIP  Committee ID Number Date In-Kind Contribution Made  Street Address  State ZIP  Committee ID Number Date In-Kind Contribution Made	Committee ID Number  Date In-Kind Contribution Made  Street Address  Street Address

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

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/	Political Action Commit	itee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address		THE PROPERTY OF THE PROPERTY O			
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	n Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made	_		:
	Committee Name					
	Street Address			_		
5		State	ZIP			
		Date In-Kind Contribution		_		
	Committee ID Number	Date H-Mild COTHIOUBO	n move			

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

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

Political Party Formittee Name  treet Address  try  promittee ID Number  treet Address  ty  promittee ID Number  promittee ID Number  promittee ID Number  promittee ID Number	State  State  Date In-Kind Contribution	ZIP Made	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ity  mmittee ID Number  met Address  treet Address  treet Address  by  mmittee ID Number  mmittee ID Number	Date In-Kind Contribution	Made			
ommittee ID Number  promittee Name  reet Address  by  promittee ID Number  promittee Name	Date In-Kind Contribution	Made			
ommittee ID Number  promittee Name  reet Address  ty  promittee ID Number  promittee Name	Date In-Kind Contribution	Made			
ommittee Name reet Address by mmittee ID Number committee Name	State	ZIP			
ty  by  by  by  committee ID Number  committee Name					
ommittee ID Number					
ommittee ID Number					
ommittee Name	Date In-Kind Contribution	n Made			
reet Address					
ty	State	ZIP			
ommittee ID Number	Date In-Kind Contribution	Made			
nmrittee Name					
reet Address					
		<b>T</b>			
у	State	ZIP			
mmittee ID Number	Date In-Kind Contribution	Made			
mmiltee Name					,
eet Address					
у	State	ZIP			
	Date In-Kind Contribution	Made			
	pet Address  minittee ID Number  minittee Name	State  State  Date In-Kind Contribution  mmittee ID Number  Date In-Kind Contribution  mmittee Name  set Address  State	State ZIP  mmittee ID Number Date In-Kind Contribution Made  mmittee Name  eet Address  State ZIP	State ZIP  mmittee ID Number Date In-Kind Contribution Made  mmittee Name  set Address  State ZIP  ZIP  ZIP	State ZIP  mmittee ID Number Date In-Kind Contribution Made  mmittee Name  set Address  State ZIP  Date In-Kind Contribution Made

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/	Partners	hip Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address		, , , , , , , , , , , , , , , , , , , ,	a kirikaka ma		
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contril	bution Made			
	Partnership Name					· · · · · · · · · · · · · · · · · · ·
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	butlon Made			
	Partnership Name					
	Street Address	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	n / LLC Recipient Inforn	nation	Amount Contributed	Cumulative Amount this	Cumulative Amount this
Corporation/LLC Name					Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	on Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission Fite Number	Date In-Kind Contribution	on Made			
	Corporation/LLC Name					
	Street Address				:	
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	on Made			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	on Made			
	Enter total only if last page of sch (transfer the total disbursed this period	edule				

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organization	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution N	Aade			
Labor Organization Name						
-	Street Address					
2	City	State	ZIP			
l	Corporation Commission File Number	ber Date In-Kind Contribution Made				
	Labor Organization Name					
	Street Address		A de la constanta de la consta			
3	City	State	ZIP			
ŀ	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
+	Labor Organization Name	1				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	I. Made	-		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disburser	nents," line 5(f))	1		
3		Labor Organization Name  Street Address  City  Corporation Commission File Number  Labor Organization Name  Street Address  City  Corporation Commission File Number  Labor Organization Name  Street Address  City  Corporation Commission File Number  Labor Organization Name  Street Address  City  Corporation Commission File Number  Labor Organization Name  Street Address  City  Corporation Commission File Number  Labor Organization Name  Street Address  City  Corporation Commission File Number	Labor Organization Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Labor Organization Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Labor Organization Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Labor Organization Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Labor Organization Name  Street Address  City State  Corporation Commission File Number Date In-Kind Contribution  Labor Organization Name  Street Address	Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Nama  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made	Labor Organization Name  Street Address  City State   ZIP    Corporation Commission File Number   Date In-Kind Contribution Made    Labor Organization Name    Street Address    City   State   ZIP    Corporation Commission File Number   Date In-Kind Contribution Made    Labor Organization Name    Street Address    City   State   ZIP    Corporation Commission File Number   Date In-Kind Contribution Made    Labor Organization Name    Street Address    City   State   ZIP    Corporation Commission File Number   Date In-Kind Contribution Made    Labor Organization Name    Street Address    City   State   ZIP    Corporation Commission File Number   Date In-Kind Contribution Made    Labor Organization Name    Street Address    City   State   ZIP    Corporation Commission File Number   Date In-Kind Contribution Made    Street Address    City   State   ZIP    Corporation Commission File Number   Date In-Kind Contribution Made	Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made

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

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure	Recipient Informa	ation	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 (i	ncluding % 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	***				
2	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (ii	ncluding % 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	ZĮP			
	Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % supported)			□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Reciplent Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "t	e Summary of Disburs	ements," line 6)			



COMMITTEE	ID	NUMBER	

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	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	-14404330014407				
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		
1	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	-		
	Ballot Measure(s) Supported (including % supported)  Ballot Measure(s) Oppos		(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					
3	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (including % opposed)	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		Jerotodik		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	<u>, L</u>				
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		_ Li Ciedit		
	Enter total only if last page of schedu (transfer the total disbursed this period to "	le Summary of Disburse	ements," line 7)			

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

_	Expenditure	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Recipient Name Mode of Advertising (TV, mail				Reporting Fenou	Liection Cyc
	Street Address					
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	called	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
	City	State	ZIP	-		
Supporting or Opposing Issuance of Recall Order?  Candidate Sought to be Rec		.i. zalleď	☐ Cash			
_	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP			
The second secon	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	Lalled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
_	Recipient Name	1.	Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	l alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	te of First Publication, Display, Delivery, or Broadcast Office Held		☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "t	e Summary of Disbursen	nents," line 8)			
		-	•			

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	В	enefitted 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	Type of Benefit Provided				
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
2	Zily City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
r	Candidate Name Date Benefit Provided					
	Street Address	***************************************	<u> </u>			
1	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address			-		
,	4 City	State	ZIP			
	Type of Benefit Provided	Type of Benefit Provided				
	Nates:					
	Enter total only if last page of so (transfer the total disbursed this perior	chedule	ements " line 9)			
	(transier the total dispulsed this peri	od to duminary of Dispulse	onena, mo o,			

Schedule B(9), page____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

_	T	Committee Inform	nation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Payment Date				
1	Street Address					
ı	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	rpense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
2	Street Address					
2	City	State	ZIP	☐ Cash		
	Date of Joint Fundralsing Event (if applicable)	pense (if applicable)	☐ Credit			
3	Committee Name	Payment Date				
	Street Address					
J	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)	☐ Credit		
	Committee Name	Payment Date				
4	Street Address				To the state of th	
7	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
5	Street Address					
J	City	State	ZIP	☐ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)	☐ Credit		
	Enter total only if last page of scheo (transfer the total disbursed this period to	fule o "Summary of Disbu	ursements," line 10)			



COMMITTEE ID NUMBER	

REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed	<u> </u>	Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	1	Reimbursement Date	☐ Credit	<u>:</u>	
	lame					
	Street Address					
	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Dist	oursements," line 11)	•		

OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

/_	_		ıformation		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			
l		Name					
		Street Address					
	2	City	State	ZIP			
		Type of Account Payable or Debt Owed	<u> </u>	Date that Debt Accrued		1	
ŀ		Name					
		Street Address					
	3	City	State	ZIP			
		Type of Account Payable or Debt Owed		Date that Debt Accrued			
-		Name					
		Street Address	ALL ALA				
	4	City	State	ZIP			
		Type of Account Payable or Debt Owed Date that Debt Accrued					
-	-	Name					
		Street Address					
	5	City	State	ZIP			
		Type of Account Payable or Debt Owed		Date that Debt Accrued			
	1	Enter total only if last page of schedule (transfer the total received this period to "Sumn	nary of Disburseme	nts," line 12)			
\ L							

Arizona Secretary of State Revision 12/29/21 (fillable format)



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 Monles / 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)

	Recipient	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Disbursement Type	Disbursement Date	□ Cash □ Credit			
	Name					
	Street Address		ss			
2	City	State	ZIP			
	Disbursement Type	L	Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City	State	ZIP	_		
	Disbursement Type		Disbursement Date	☐ Cash☐ 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 "Sur	nmary of Disburs	ements," 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)		

*If disbursement(s) of \$250 or less is listed on another disbursement schedule, do not include them on Schedule B(15).

## 1_Fillable Q2 Campaign Finance Report

Final Audit Report

2022-07-08

 $L^{\infty} : \mathcal{M}_{\mathcal{A}} = \{ 1, \dots, n \}$ 

Created:

2022-07-08

By:

Cody Newcomb (codynewcomb@email.arizona.edu)

Status:

Signed

Transaction ID:

CBJCHBCAABAAFtw7kpjVSjbBOCFxkwvuaRJqqc5U3FhI

## "1_Fillable Q2 Campaign Finance Report" History

- Document created by Cody Newcomb (codynewcomb@email.arizona.edu) 2022-07-08 4:41:47 PM GMT
- Document emailed to noah@nexusintegratedsolutions.com for signature 2022-07-08 4:44:04 PM GMT
- Email viewed by noah@nexusintegratedsolutions.com 2022-07-08 4:44:38 PM GMT
- Agreement completed. 2022-07-08 - 4:46:00 PM GMT