RECEIVED

STATE OF ARIZONA **COMMITTEE CAMPAIGN FINANCE REPORT**

COMMITTEE ID NUMBER C17-09

COMMITTEE INFORMATION (required):

	Committee Information:ER	Committee Name:	RICK HEUMANN 20 COUNCIL
CANE	IDATE INFORMATION (ORly if filin	g as a candidate com	mittee);
	Office Sought:	☐ Statewide Office☐ County Office:	:
	☐ Check here if this is the car		rst, cumulative report for the election cycle. Also select appropriate Reporting Period below. rsedes the start date for the Reporting Period selected below):

REPORTING PERIOD (check one)

G P	ERIOD (check one):	
	REPORTING PERIOD	REPORT DUE
	2018 4 th Quarter Report: October 21, 2018 to December 31, 2018	January 1, 2019 to January 15, 2019
	2019 March Pre-Election Report (Local Only): January 1, 2019 to February 23, 2019	February 24, 2019 to March 4, 2019*
	2019 1 st Quarter Report (Local Only): February 24, 2019 to March 31, 2019	April 1, 2019 to April 15, 2019
	2019 1 st Quarter Report: January 1, 2019 to March 31, 2019	April 1, 2019 to April 15, 2019
	2019 May Pre-Election Report (Local Only): April 1, 2019 to May 4, 2019	May 5, 2019 to May 13, 2019*
	2019 2 nd Quarter Report (Local Only): May 5, 2019 to June 30, 2019	July 1, 2019 to July 15, 2019
	2019 2 nd Quarter Report: April 1, 2019 to June 30, 2019	July 1, 2019 to July 15, 2019
	2019 August Pre-Election Report (Local Only): July 1, 2019 to August 10, 2019	August 11, 2019 to August 19, 2019*
	2019 3 rd Quarter Report (Local Only): August 11, 2019 to September 30, 2019	October 1, 2019 to October 15, 2019
	2019 3 rd Quarter Report: July 1, 2019 to September 30, 2019	October 1, 2019 to October 15, 2019
	2019 October Pre-Election Report (Local Only): October 1, 2019 to October 19, 2019	October 20, 2019 to October 28, 2019*
	2019 4 th Quarter Report (Local Only): October 20, 2019 to December 31, 2019	January 1, 2020 to January 15, 2020
	2019 4 th Quarter Report: October 1, 2019 to December 31, 2019	January 1, 2020 to January 15, 2020
	2020 March Pre-Election Report (Local Only): January 1, 2020 to February 22, 2020	February 23, 2020 to March 2, 2020*
	2020 1st Quarter Report (Local Only): February 23, 2020 to March 31, 2020	April 1, 2020 to April 15, 2020
	2020 1st Quarter Report: January 1, 2020 to March 31, 2020	April 1, 2020 to April 15, 2020
	2020 May Pre-Election Report (Local Only): April 1, 2020 to May 2, 2020	May 3, 2020 to May 11, 2020*
	2020 2 nd Quarter Report (Local Only): May 3, 2020 to June 30, 2020	July 1, 2020 to July 15, 2020
/	2020 2 nd Quarter Report: April 1, 2020 to June 30, 2020	July 1, 2020 to July 15, 2020
	2020 July Pre-Election Report: July 1, 2020 to July 18, 2020	July 19, 2020 to July 27, 2020*
	2020 3 rd Quarter Report: July 19, 2020 to September 30, 2020	October 1, 2020 to October 15, 2020
	2020 October Pre-Election Report: October 1, 2020 to October 17, 2020	October 18, 2020 to October 26, 2020*
	2020 4 th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	Final Campaign Finance Report Prior to Committee Termination	End of Previous Period through Today's Da
	L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

*Reporting deadline extended to next business day. A.R.S. §§ 1-243(A) and 1-303.

FINANCIAL SUMMARY (required):

19,336.91 26,050.00	
26.050.00	26.050.00
20,000.00	20,050.00
10,102.20	10,102.20
35,284.71	35,284.71



COMMITTEE ID NUMBER C17-09

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

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

RICK HEUMANN	Rick Herman	7-13-20
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

SUMMARY OF RECEIPTS (Schedule A):

	5 11	1 01	Tanaka.
/	Receipts	Cash	Equity
′ <u>1. </u>	Monetary Contributions Received	10.000.00	
	(a) Individuals - More than \$50	16,050.00	
	(b) Individuals - \$50 or Less (Aggregate)		
	(c) Candidate Committees	10,000,00	
	(d) Political Action Committees	10,000.00	
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Monies (Candidate Committees Only)		
	(j) Monetary Contributions Subtotal (add 1(a) through 1(l))		
	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))		
_2	Loans		
	(a) Loans Received		
********	(b) Forgiveness on Loans Received (c) Repayment on Loans Made	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A BAR TO THE RESIDENCE AND
	(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		Albert Control of the Alberta
	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
•	(c) Candidate Committees		
	(d) Political Action Committees	Craffing and a straight and fill	
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)	terminate property	
	(i) Candidate's Personal Assets or Property (Candidate Committees Only)		***************************************
	(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)	A red with the finding opposite the	
7.	Extensions of Credit	Secretaria de la composição de la compos	
	(a) Extensions of Credit Received	The state of the property of the state of th	
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))	Transport of the Angle Add	
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable	е)	
12.	Miscellaneous Receipts		
13.	Total Receipts (cash: add 1(l), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)	26,050.00	

SUMMARY OF DISBURSEMENTS (Schedule B):

		Conh	Fauity
/	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	10,102.20	
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)		
	(j) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		Allegarian en
10.	Joint Fundraising / Shared Expense Payments Made		
11.	Reimbursements Made		
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements		
15.	Aggregate of Disbursements - \$250 or Less	10.10	
16. \	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)	10,102.20	



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

SCHEDULE A(1)(a)

	Individual Contributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
SEE ATTA	CHED PDF'S	Date Contribution Received			3 11
Street Address					
1 City	State	ZIP			
Occupation	Employer		-		
Name		Date Contribution Received			
Street Address		L.,.			
2 City	State	ZIP	_		
Occupation	Employer				
Name		Date Contribution Received			
Street Address	Streat Address				
3 City	State	ZIP	-		
Occupation	Employer		_		
Name		Date Contribution Received			
Street Address					
4 City	State	ZIP	_		
Ony		Lir			
Occupation	Employer				
Name		Date Contribution Received			
Street Address	Street Address				
5 City	State	ZIP			
Occupation	Employer				
	ast page of schedule	- W A L W W W W W W W			

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

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



committee id number c17-09

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

SCHEDULE A(1)(a)

_	Individual Contributor Information	on 	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
4	-	Data Contribution Recovered Y/14/20 20 ZIP ST012 + CUILY	150	150 .	150
2	Name Chyg Kinj Silvest Address City Ellalo Coccupation Employer	Date Contribution Received			
3	Reed Poten Strate Address SSO W ELLIOT AD 7 Oth Gilbert State Occupation Home BUILDEN Brights	85233	100	100	100
4	Street Address 1443 N CIFTUS COLE City MESP State P2	4/2/22	250	250	250
5	Name Street Address City State Occupation Employer	Daio Coninbulton Received			٥
-	Enter total only if lest page of schedule		500		

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

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

committee id number c17-09

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

SCHEDULE A(1)(a)

Individual Contrib	utor Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	HOL AVE #1600 ATOL AVE #1600 ATOL AVE #1600 ATOL ACTIVE ENTL + Cushy	1000	1000	1000
Glirry Hays Street Address 1672 G. C.	Date Contribution Received 6/25/2020 9140103 PUNCE Tale At ZIP SELF Date Contribution Received 6/29/2020		500	5700
3 Tempe	New VEXV 1340 AT 85284		2000	2000
PATTI Druno	Employer SNEW + W./Mon Data Contribution Placewest 6/25/2022 K. MOON WAY State 12 85225 Employer TT6 //Enith Chris		250	250
Name Manue ECA Street Address City Occupation				
Enter total only if last page of schedule	(re 3(a))	3750		

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

Schedule A(1)(a), page 2of 1



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

SCHEDULE A(1)(a)

Individual Contributor Information	Amount Received Amount this Amount this Reporting Period Election Cycl	: \
Name Michelle Hirsch 5/28/2 Street Address 33/1 W Del Rio ST City Champler Bester Occupation Property Manager SELE	188 100 100	
CARL Johnson Date Cortinguish Reco CARL Johnson 6/5/20 Girect Address 1759 Garmy Way Cary Chimolan State ZIP Chimolan AR 8528 Occupation Accounted ONC Source Acc	100 00 100	
Name JOAQUIN RIOS Date Contribution Reco 6/8/2 Street Address 620 & LA JUI/A DA Gity Tempe Occupation STATE Discolur SIX ACTION	20 EA 00 EA	
Name Date Contribution Res	2020	
Name David Allen Date Contribution Re	2020 /00 /00	<u>.</u> .
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipte," line 1[a])	018	

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

Schedule A(1)(a), page 3 of 5



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

SCHEDULE A(1)(a)

		Individual Contr	ibutor Information	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Occupation	33 E ONKWI		Doto Contribution Received 6/19/20 DL ZIP 85248	1000 00	1000	160 V
2	Caty	Jupith Huma	v ん	20008	258	2,0	257)
3	Name Street Apares Gity Occupation	61ez Cochan 1691 W Gran Champlen Refuer	n Canyin Stala A2 Employer	Dales Contribution Freehold 6-7-20 DA ZIP 81248	- 20i	200	200
4	Street Azdre	KAREN TIBSAR 2158 & Te. Champlen Retirea	/	PLD CZ ZIP 85 249	2:70 02	250	257)
4,	Occupation		ChiO LAN Scale AZ Employer BAYL	Date Contribution Refracted Y/3/2026 X ZIP 85225 + Cully	50°	50	50
	Enter to	tal only if last page of schedule loss received this period to "Summary of Receion			1750		

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

Schedule A(1)(a), page $\frac{1}{2}$ of $\frac{1}{2}$



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

SCHEDULE A(1)(a)

	Individual Contributor Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name NayNe Howard Street Address Street Address 1/8// N TATUM BLVP #/05/ City PHN Occupation OWNER - Development Date Contribution Received 5/12/2020 State 5/12/2020 State Finite Corr AT 8 5028 Cocupation OWNER - Development Wayw SELF	500 Ex	500	<i>5</i> 00
2	Name Date Contribution Received 1/28/2020 Street Address 1/36 1/3 BASELLIAE RP		6450	6450
3	Street Address 452 DIENS DR	500	500	500
4	Name Richnio + Sie Hullmin 4/1/2020 Street Address, 197 Bryhill CT City Brins a State M8 \$5611 Occupation Rhice Employer	500	500	500
47	Name Show Jimenca Philipson Street Address Phi Box 2105 City Boise In Employer Cocupation Rejuester	258	250	250
	Enter total only if last page of schedule (transfer the total received this period to "Summery of Receipts," line 1(a))	8200	16050	

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

Schedule A(1)(a), page of



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

SCHEDULE A(1)(b)

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

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

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

/	Candidate Commit	ee Contributor Info	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		-11000000			
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Recei	ved			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Recei	ved			
	Committee Name					
	Street Address					
3 2	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	ived			
	Committee Name					
	Street Address	and the state of t				
4	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	lved			
	Committee Name					
	Street Address					Table of the state
5	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	eived			
	Enter total only if last page of schedu					

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

/	Political Action Commit	iee Contributor Inf	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	SEE ATTACHED PDF Street Address	'S				
1	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Committee Name	1				
	Street Address			-		
2	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receive	I sd	-		
	Committee Name	<u></u>				
	Street Address			1	Annual of the state of the stat	
3	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address	- 11111				
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	eď			
	Committee Name					
	Street Address	*******				
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Enter total only if last page of schedule	." line 1(d))	1			

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

	Political Action Committee Contributor Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Etrool A	PLEA - PRC Addresse 1/02 W ADAMS ST PHX PHX State At 85007 Differ Contribution Recorded 6/23/20	500	500	500
Street A	Address Add	2500	2500	2500
Street A	Tempe OFFILERS ASSOC Address 120 & 5 5 5T Tempe State Contribution Received 6/26/200	5000	500	500
Street /	Reduced Reduced Arizond Arizond Address Reduced Arizond Reduced Redu	3000	3000	3000
Street /	WITED PHX FIREFILES INCOL 493 Address 6/E COLUMBIA AVE #200 PHX State AT SIP 8.5012 Date Contribution Reperved 6/15/2020	760	700	/200
1 t	er total only if last page of schedule for the intel received this conset to "Summary of Receipts" time 1(d'))	7200		

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

	Political Action Commit	tee Contributor Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name Street Address 1 Oty Committee ID Number	61 E c	Stale AZ 85012.	— — 766	700 .	/200
Committee Name Street Autress City Committee ID Number	15925 W Sugar	Pro FireFisher Proc Dru Ln State AZ Date Contribution Received 6/16/2220	700	700	1200
Committee Name Street Abbress City Committee ID Number	5800 W	FIRC FIG WHED 6/2ND ON A300 State A7 S130/ Date Contribution Received 6/18/2220	760	700	700
Committee Name Street Address 4 City Committee ID Numbe	61 E C	LOCAL 493 FIRE PACE COLUMBUS AVE STORE STORE Date Contribution Received / 6/16/2020	700	700	1260
Committee ID Numb	er	State ZIP Date Contribution Received			
1			1	}	}



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

	Political Party Co	ntributor Informati	on	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	I				
	Street Address		· · · · · · · · · · · · · · · · · · ·	-		
2	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receive	l ed	1		
	Committee Name			:		
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u>l</u>			
	Committee Name	1				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	I ed			
	Committee Name					
	Street Address					
	City	State	ZIP	1		
5	City	1				

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

/						
	Partnership Co	ontributor 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 Contribution Receive	ed	<u>.</u>		
	Partnership Name		4-1			
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Partnership Name					***************************************
	Street Address					
3	City	State	ZIP	•		
	Corporation Commission File Number	Date Contribution Receiv	red	-		
	Partnership Name					
	Street Address			_		
4	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	red	_		
	Partnershlp Name		W/WWW.			
	Street Address			-		
5	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receiv	ved			
	Enter total only if last page of schedule	<u> </u>				
	(transfer the total received this period to "Summary of Receip					

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

	,							
		Corporation / LLC C	ontributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
		Corporation/LLC Name		44004444		1 0	j	
	-	Street Address						
	1	City	State	ZIP				
		Corporation Commission File Number	Date Contribution Receive	d				
ŀ		Corporation/LLC Name		Millionia				
		Street Address						
	2	Oth	ZIP					
	ļ	City	State					İ
		Corporation Commission File Number	Date Contribution Receive	ed .				
		Corporation/LLC Name					:	
		Street Address						
	3	City	State	ZIP				
		Corporation Commission File Number	Date Contribution Receive	ed	-			
-		Corporation/LLC Name		ws.n				
		Street Address			_			
	4	City	State	ZIP	_			
		Corporation Commission File Number	Date Contribution Receive	ed				
		Corporation/LLC Name						
		Street Address						
	5	City	State	ZIP	1			
		Corporation Commission File Number	Date Contribution Receiv	ed				
\setminus		Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	' line 1(a))					

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

/	Labor Organi	zation Contributor Info	ormation	Amount Receive	Cumulative d Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				Reporting Period	Election Cycle
	Street Address	reet Address				
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rec	eived			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Red	zelved			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Red	celved			
	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 Re	ceived			
_	Enter total only if last page of sch	hedule				



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

		Candidate Information		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	l	Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			***************************************
2	Street Address					
	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				
-	Enter total only if last page	of schedule				

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

/	Contribu	utor Information	ו	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	-	Date Contribution Refunded			
	Street Address					
1	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
_	Name		Date Contribution Refunded			
	Street Address					
2	City	State	ZIP			- - -
	ID Number (If applicable)	1	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				La deleter	
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
_	Name		Date Contribution Refunded			
	Street Address					
ō	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			

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



LOANS RECEIVED:

SCHEDULE A(2)(a)

/	Lender	nformation		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?	(PACs and Political Parties Only)			
			,			
	Lender Name	Date Loan Received				
	Streat Address					
3	City	State	ZiP	-		
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
				1.00		
	Lender Name	Date Loan Received				
	Street Address	.1				
5	City	State	ZIP			
	O	Non-Electoral Duma3	(PACs and Political Parties Only)	_		
	Guarantor/Endorser Name	Non-Electoral Purpose?	(FAGS and Pollucal Parties Only)			
_	Enter total only if last page of schedule		MIN			
	(transfer the total received this period to "Summary of Receipts	," line 2(a))				

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



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

	ender Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
er Name		Date Forgiveness Received			
t Address					
1.6 A 4 6 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	State	ZIP			
nal Amount of Loan	Amount Still Outstand	ជាng			
er Name		Date Forgiveness Received			
t Address					
	State	ZIP			
nal Amount of Loan	Amount Still Outstan	ding			
er Name		Date Forgiveness Received			***************************************
Street Address					
	State	ZIP			
nal Amount of Loan	Amount Still Outstan	ding			
er Name		Date Forgiveness Received			
et Address					
	State	ZIP			
nal Amount of Loan	Amount Still Outstan	ding			
er Name		Date Forgiveness Received			
at Address					
	State	ZIP			
nal Amount of Loan	Amount Still Outstan	ding			
nal A	mount of Loan otal only if last page of sc	State	State ZIP mount of Loan Amount Still Outstanding total only if last page of schedule	State ZIP mount of Loan Amount Still Outstanding cotal only if last page of schedule	State ZIP mount of Loan Amount Still Outstanding cotal only if last page of schedule

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

•	Borrowe	r Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address		<u> </u>	_		
1	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	<u> </u>	Date Repayment Received			
	Street Address			-		
2	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name	<u>.l</u>	Date Repayment Received	1		
	Street Address			-		
3	City	State	ZIP		1	
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	<u> </u>	Date Repayment Received	<u> </u>		
	Street Address					
4	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address		<u></u>			
5	City	State	ZIP	+		
	Original Amount Borrowed	Amount Still Outstanding	1			

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/	Bor	rower 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 Outstand	ing			
	Borrower Name		Date Interest Accrued			
	Street Address			***************************************		
2	City	State	ZIP			
	Original Amount Borrowed	gnal Amount Borrowed Amount Still Outstands				
	Borrower Name	<u> </u>	Date Interest Accrued			
	Street Address	fress				
3	City	State	ZIP	***************************************		
	Original Amount Borrowed	unt Borrowed Amount Still Outstandin				
	Borrower Name		Date Interest Accrued			***************************************
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	fing		;	
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ling			
_	Enter total only if last page of sche	edule				
	(transfer the total received this period to "Summary of					

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



REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

/	Payor In	formation		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name	Date Rebate/Refund Received				
	Street Address	itreet Address				
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	1			
	Payor Name		Date Rebate/Refund Received			
	Street Address		1			
2	City	State	ZIP			
	Original Purchase Amount Reason for Refund/Re)			
	Payor Name		Date Rebate/Refund Received			
	Street Address		1			
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	9			
	Payor Name	Date Rebate/Refund Received				
	Street Address		de la constantina de			
4	City	State	ZIP			
	Original Purchase Amount Reason for Refund/Rebat		e			
	Payor Name		Date Rebate/Refund Received			
	Street Address		•			
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebat	le			
	1					



INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)		

Schedule A(4), page ____ of ____



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

SCHEDULE A(5)(a)

/	Individua	l Contributor Informa	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date in-Kind Contribution Received			
	Street Address					
1	City	State	ZIP	-		
	Occupation	Employer	<u> </u>			
	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			1		
4	City	State	ZIP	_		
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address	Street Address				
5	City	State	ZIP			
				-		

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Schedule A(5), page ____ of



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

SCHEDULE A(5)(b)

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

^{*}If contributions of more than \$50 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

St 1 Ci	ommittee ID Number ommittee Name reet Address		ZIP	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
St 1 Ci	ty mmnittee ID Number mmnittee Name					
1 ci	ommittee ID Number ommittee Name reet Address					
C	ommittee ID Number ommittee Name reet Address					
2 0	ommittee Name reet Address	Date In-Kind Contribution F	Received			
2	reet Address					
2						
	ty					
Ci		State	ZIP			
- 1	ommittee ID Number	Date in-Kind Contribution I	Received			
c	ommittee Name			:		
S	reet Address					
3	,					
CI	ty	State	ZIP			
C	ommittee ID Number	Date In-Kind Contribution	Received			
C	ommittee Name					
SI	treet Address					
4	ity	State	ZIP			
c	ommittee ID Number	Received				
- c	ommittee Name					
s	treet Address					
5 c	ity	State	ZIP			
c	ommittee ID Number	Date In-Kind Contribution	Received			

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

/		n Committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ข้อก Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ution Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ution Received			440
	Committee Name					
	Street Address	A. W. A. W. L. A. W.				
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	nnou Kecelved			
	Committee Name					
E	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Received			
	I					

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Political	Party Contributor Infor	mation	Amount Receive	Cumulative d Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
}	Street Address	t Address				
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contril	oution Received			
	Committee Name	<u> </u>				
ł	Street Address					
2	City	State	ZIP			5 m
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name	<u></u>				
	Street Address					3
3	City	State	ZIP			
0	Committee ID Number	Date In-Kind Contr	bution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP		:	
	Committee ID Number Date In-Kind Contribution Received					
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Conti	ibution Received			
	Enter total only if last page of					-

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

		ntributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
٤	Partnership Name					
	Street Address					
1	City	State	ZIP			
C	Corporation Commission File Number	Date In-Kind Contribution	I Received			
F	Partnership Name	<u> </u>				
٤	Street Address					
2	City	State	ZIP			
,	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
F	Partnership Name					
5	Street Address					
3	City	State	ZIP			
ŀ	Corporation Commission File Number	Date In-Kind Contribution	Received			
F	Partnership Name					
-	Street Address			_		
4	City	State	ZIP			
-	Corporation Commission File Number Date In-Kind Contribution Received					
	Partnership Name					
 	Street Address	reet Address				
5	City	State	ZiP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

	Corporation / Li	LC Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					•
	Street Address					
1	City	y State ZIP		_		
	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contribution	Received			
	Corporation/LLC Name					
	Street Address			_		
2		To. 1.	Trip			
	City	State ZIP	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Corporation/LLC Name					
	Street Address			P. Original Property of the Control		
3	City	State	ZIP	-		
				_		
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Corporation/LLC Name		ALCHARLE TO SOME MANAGEMENT OF THE STATE OF			
	Street Address			-		
4	City	State	ZIP	_		
	Our settler Ourseled of Ell Number	Date In-Kind Contributio	- Deserved	1		
	Corporation Commission File Number	Date In-Nind Contributio				
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	1		
	Corporation Commission File Number	Date in-Kind Contributio	n Received	-		
L			COMPANY STORES			
	Enter total only if last page of scheo (transfer the total received this period to "Summary of Re					

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

	Labor Organi	zation Contributor Info	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 Contribut	ion Received			3	
	Labor Organization Name						***************************************
ŀ	Street Address						
2	City	State	ZiP				
	Corporation Commission File Number	Date In-Kind Contribu	tion Received		-		
	Labor Organization Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribu	ition 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 Contribu	ution Received				
	Enter total only if last page of sci						

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



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

SCHEDULE A(5)(i)

	Candidate	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		J			-
	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address			-		
4	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP			
	Asset or Property Contributed			1		
_	Enter total only if last page of schedule					

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



COMMITTEE ID NUMBER

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		1	
	Street Address					
1	City	State	ZIP			
	Type of Item Donated		1			
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			-
	Street Address					
3	City	State	ZIP	1		
	Type of Item Donated		1			
	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					
5	City	State	ZIP	-		
	Type of Item Donated		. I	1		
				1	1	1



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

	Creditor	nformation		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
1	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			
1	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit		And the state of t	
	Name					
	Street Address					
4	City	State	ZIP			1
	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			

Schedule A(7)(a), page___ of ___



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	/	Creditor I	nformation		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	ľ	Name	*				
	1	Street Address					
1	-	City	State	ZIP			
	0,	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
-		Name					
	-	Chr. d Address			_		
		Street Address					
2		City	State	ZIP			
	*	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	-		
		Name					
		Street Address					
3	3	City	State	ZiP			
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	+	Name					
		Street Address			<u> </u>		
4			I	γ			
		City	State	ZIP			
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
		Name					
		Street Address			1		
5	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					
$\setminus L$		(transfer the total received this period to "Summary of Receipts."	' line 7(b))				

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor C	ommittee Informat	ion	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 Exp	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address		1			
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address				:	
4	City	State	ZIP		· ·	
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			

Schedule A(8), page ____ of ___



COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

/		Payor Ir	formation		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		1.1300.00			
	2			A			
	-	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
		Name					
		Street Address					
	3	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
		Name					
		Street Address					
	4	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
		Name		30-30-31 (100 de co 110 de co			
		Street Address					
	5	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
\	F	Enter total only if last page of schedule	5 T 0	ı			
/	<u> </u>	(transfer the total received this period to "Summary of Receipts.	" line 9)				·'/

Schedule A(9), page ____ of ___



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Int	ormation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
1	City	State	ZIP			
,	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
+	Name					
	Name		1.0.000			
	Street Address					
2	City	State	ZIP			
ŀ	Type of Account Receivable or Debt Owed	1	Date that Debt Accrued			
+	Name					
	Street Address					
3	City	State	ZIP	_		
			Date that Debt Accrued			
	Type of Account Receivable or Debt Owed		Date that Dest violated			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_	Name					
	Street Address					
5						
_	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			

Schedule A(10), page ___ of ___



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

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

Schedule A(11), page ____ of ____



COMMITTEE ID NUMBER

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					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
_	Name					
	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	- Wassington					
	Name					
4	Street Address					
7	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					

Schedule A(12), page ____ of ___



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

_	Recipien	t Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name SEE ATTACHED PDF'S Street Address	Disbursement Date				
1	City	State	ZIP	☐ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	o? (PACs and Political Parties Only)	☐ Credit		
	Name	Disbursement Date				
	Street Address	<u> </u>				
2	City	State	ZIP	T Cook		
	Type of Operating Expense Pald	Non-Electoral Purpose	e? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	e? (PACs and Political Parties Only)	☐ Credit		·
	Name	Disbursement Date	***************************************			
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Pald		e? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address		tr.			
5	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpos	e? (PACs and Political Parties Only)	□ Credit		
	Enter total only if last page of schedule		, , ,			
	Lualsier the total dispursed this period to "summary of Disbur	sements, inte I)				

COMMITTEE ID NUMBER

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipient	information	Amount Pald	Cumulative Amount this	Cumulative Amount this
Name Street /		Disbursement Date 4/2/2620	2/1/2	Reporting Period	Election Cycle
1 City	1788 W Chrinole Chrisoler Operang Expense Pald Copres	State ZIP ### ### ############################	☑ Cash ☐ Credit	2115	21/2
2 City	Wired Wordsmik Ander	Disbursement Date J D A State J ZIP ST 281 Non-Electoral Purpose? (PACs and Political Parties Only)	/80 OU /80 Cash □ Credit	180	180
3 Gity	Ooks 6000 Printing Address 338 & Tuckey PHD of Operating Expense Pald \$19N1	Disbursement Date \$\int \lambda \frac{13}{20} \frac{20}{20} Lpv State \$\int \frac{21P}{85012} Non-Electoral Purpose? (PACs and Political Parties Only)	30/6 / <u>6</u> 30/6 / <u>6</u> ⊠ Cash □ Credit	30/6	3016 15
5tract.	Looks 6000 Printing	Distursement Date 6/15/2024 5tate AH ZIP 85-012 Non-Electoral Purpose? (PACs and Political Perosa Only)	725 €, © Cash □ Credit	725-61	72561
Street 5 Cty	Robson Communition Posse E Riss Sun Lakes of Operating Expersed Polit DOV=1+151-7	Clistursoment Onto 6/9/2020 S	306 □ Cash Æ Credit	306	306 20
	er total only if last page of schedule fer the total disbursed this period to "Summary of Disburse	ments,* line 1)			

Schedule B(1), page / of

committee id number c17-09

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipient	Information	Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Street Addr	mes Meoip	130/2c P/Kuy # 219	550	573	550
1 Gay	Tempe erating Expense Pois ADV EXTISING	State ZIP 8.5.282 Non-Ekectoral Purpose 7 [PACs and Political Parties Only)	디 Cash 郊 Credit		
Chn Street Add	roler Alizonan		554 "Y	55414	C 1 1 1 Y
City Type of Op	perating Expense Paid	None Play #218 State A J ZIP 85282 Non-Electoral Purpose? (PACs and Political Parties Only)	口 Cash	77 % .	777
Name		Distription for 2010 6 /26 /2028	3004 \$	306 Y 49	, V ²
3 City	Po Box 82 Philapelphia	State PD ZIP 19182	□ Cash	3064	3004 2
Name	11 omgle News	Non-Elactional Purpose? [PACs and Political Parties Only] Disbursement Date 6/19/202-0			
	2145 E WARNER	RD 4/02	330 85	330 85	330 55
Type of O	Temp Tempe passing Expanse Pald ADVertising	N7 85289 Rion-Electrical Purposa? (PACs acus Poblical Portee Only)	☐ Cash ☐ Credit		
Name 	nn from Sup News 1620 W Found	when PKwy #219	321 36	321 36	32136
5 City	Tempe	Stato A7 ZIP 8.5.2-8.2 Non-Electoral Purpose? (PACs and Political Portion Only)	☐ Cash ☑ Credit		
Enter	ADV LSIM total only if last page of schedule				ò
	he total disbursed this period to "Summary of Disburs	ements," line 1)			

Schedule B(1), page $\frac{2}{2}$ of $\frac{1}{2}$

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information
Since Address 16225 Impact Way 768
Thams FED EN OFFICE Street Accirese 2 City Ch molu State At 85224 Type of Operating Experse Paid Type of Operating Experse Paid Ch molu Ch molu State At 85224 Non-Electoral Purpose 7 (PACs and Political Purpose Cyty) Street Accirese Ch molu
Street Actives State Street Actives State Chample: Blve State AT SS 224 Type of Operating Expense Pold Non-Electronal Purposes? (PACs and Political Publics Crity) Credit Condition Credit
1 1 25.7 E.S. 7 V F. 1
Street Actoress 4 Character Blue A Character Blue Type of Operating Expense Peld Cuples
Name UPS Store Street Micross 1939 W Ray RD State Type of Operating Expense Paid Inch both Verification Continued Political Politics Only) Inch both Verification Continued Politics Only)
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 1)

Schedule B(1), page $\underline{3}$ of $\underline{4}$



COMMITTEE ID NUMBER

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	200.5	Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle
	ANCOOT Street Address	Disburserrent Oete	30-20	24990	24996	77050
	, .	i	ZIP (PACs and Folitical Parties Only)	— Ø Cash □ Credit	4.4	270
	CIEDIS CAYD SERVILL	Dishursement Date		octore experience contribution of the addition was allegated to the second of the seco		
,	Street Address City States ZIP					
1	Туре of Operating Expunse Paid	Non-Electoral Purpose')	(PACs and Polical Paries Only)	□ Cash □ Credit		
	Irreel Address					
3	Gliy	Sinta ZIP		☐ Cash		
	Typa of Operating Experies Palas Nome	Non-Declaral Purpose? (PAC4 and Political Partica Chily)		☐ Credit		
	Street Address	Urbursameni Dele	SECRETARIA			
1	City	State	ZIP	□ Cash		
	Tyne of Operating Expense Paid Name	Nan-Enctoral Porcess? Disbursement Date	(PACs and Potitioal Parties Only)	☐ Credit		
	Street Address					
5	City	Slale ZIP		☐ Cash☐ Credit		
	Type of Operating Expense Paid	Non-Exclored Purpose? (PACs and Poincet Parties Orly)			10/02	I

Schedule B(1), page _____ of _____



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate	Committee Recipient I	nformation	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 I	Made	☐ Credit		
	Committee Name					
	Street Address			1		
	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	☐ Cash☐ Credit		
_	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution	Date Contribution Made			
	Committee Name	<u></u>				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	Committee Name	<u>I</u>				
	Street Address		A Extraordiscons as a second s			
5	City	State	State ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	I	1		I	I	i



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

<u> </u>	Political Action Commi	ttee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
2	Street Address City State ZIP					
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	☐ Cash☐ Credit		
	Committee ID Number Date Contribution Made			LI Great		
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	Date Contribution Made			
	Committee Name					
5	Street Address City	Street Address City State ZIP				
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
		1	***************************************			ļ



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party R	ecipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name			reporting remod	Elodion Cydic	
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP		, ,	
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
3 -	City	City State ZIP				The state of the s
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
4		- In-t-	lan.			
	City	State	ZIP	☐ Cash☐ Credit		
	Committee ID Number	Date Contribution Made		- Oreun		
	Committee Name					
5	Street Address	Street Address				
J	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	:	☐ Credit		
_	Enter total only if last page of schedule					



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

′	Partnership Rec	sipient Information	า	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name		ene saument en .		: :	
	Street Address					
1	City	State	ZiP			Ì
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
+	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
1	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
_	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Partnership Name			1		
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	1	□ Cash □ Credit		
	Enter total only if last page of schedule					



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/ LLC Recipient Infor	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
С	orporation/LLC Name					
s	treet Address					
c	ity	State	ZIP			
C	orporation Commission File Number	Date Contribution Mac	de	□ Cash □ Credit	,	
c	orporation/LLC Name					
S	treet Address					
2	ity	State	ZIP	□ Cash		
0	Corporation Commission File Number	Date Contribution Ma	de	☐ Credit		
1	Corporation/LLC Name					
5	Street Address					
3	city	State	ZIP	□ Cash		
ď	orporation Commission File Number Date Contribution Made			□ Credit		- Artis
,	Corporation/LLC Name					
5	Street Address					
‡ 7	City	State	ZIP	□ Cash		
,	Corporation Commission File Number	Date Contribution Ma	de	☐ Credit		<u> </u>
1	Corporation/LLC Name		····			
	Street Address					
5	City	State	State ZIP			
1	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
	Enter total only if last page of so					



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	ization Recipient Inforr	nation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
-	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
1	Labor Organization Name					
	Street Address					
	ity State ZIP		TI Cook			
	Corporation Commission File Number	Date Contribution Made	e	☐ Cash	□ Cash □ Credit	
-	Labor Organization Name					
***************************************	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	oration Commission File Number Date Contribution Made				
	Labor Organization Name	1			*	
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	de	☐ Credit		
	Labor Organization Name			1		
	Street Address					
5	City	State ZIP		□ Cash		
	Corporation Commission File Number Date Contribution Made			□ Credit		3
_	Enter total only if last page of sc (transfer the total disbursed this period to "Summan	1				



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

_	Contribu	tor Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address	reet Address				
1	City	State				
	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		Date Refund Received			
	Street Address					
4	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	_		
	Committee Name		Date Refund Received			
5	Street Address					
	City	State	ZIP			
	Committee ID Number	,	Date of Original Contribution			
	Enter total only if last page of schedu					

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



LOANS MADE:

SCHEDULE B(3)(a)

/	Borro	wer Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1		1				
,	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
3	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	r/Endorser Name Date Loan Made				
	Borrower Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
			_			
		Street Address				
5	City	State	ZIP			
	Guarantor/Endorser Name Date Loan Made					
_	Enter total only if last page of sched	lule	21/11/2014	<u> </u>		
	(transfer the total received this period to "Summary of Re					[

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



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

Guaranto				Cumulative	Cumulativa
Guaranto	r Information		Amount Guaranteed	Amount this Reporting Period	Cumulative Amount this Election Cycle
Guarantor Name					
Street Address					
City	State	ZIP			
Borrower Name	Date Loan Guaranteed	1			:
Guarantor Name					
Street Address					
City	State	ZIP			
Borrower Name	Date Loan Guaranteed	<u></u>			
Guarantor Name	1	A A A A A A A A A A A A A A A A A A A			
Street Address					
City	State	ZIP	_		
Borrower Name	Date Loan Guaranteed	1			
Guarantor Name					
Street Address			e e e e e e e e e e e e e e e e e e e		
City	State	ZIP			
Borrower Name	Date Loan Guaranteed	1			
Guarantor Name					
Street Address	The second secon	Malakania marana a			
City	State	ZIP	_		
Borrower Name	Date Loan Guaranteed				
	l				
	Borrower Name Guarantor Name Street Address	Street Address City State Borrower Name Date Loan Guaranteed Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name City State Guarantor Name Street Address City State Guarantor Name Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name Street Address	Street Address City State ZIP Borrower Name Oate Loan Guaranteed Street Address City State ZIP Borrower Name Oate Loan Guaranteed City State ZIP Borrower Name Oate Loan Guaranteed City State ZIP Borrower Name Oate Loan Guaranteed Street Address City State ZIP City State ZIP City State ZIP City State ZIP Borrower Name Oate Loan Guaranteed City State ZIP City State Can Guaranteed	Sitest Address City State ZiP Borrower Name Date Loan Guaranteed City State ZiP City State	Site Address City State Sta

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



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

Borrow	er Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Borrower Name		Date Forgiveness Made			
Street Address		<u>I.</u>			
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding		-		
Borrower Name	rrower Name				
Street Address			1		
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
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	Street Address				
City	State	ZIP	1		
Original Amount of Loan	Amount Still Outstanding		_		
	Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan	Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State	Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made	Borrover Name City State City State City State City State City State City Date Forgiveness Made Street Address City State City Sta	Reporting Period Date Fagoreness Mede Street Address City State ZIP Date Fagoreness Mede

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender I	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		· · · · · · · · · · · · · · · · · · ·	Date Repayment Made			
Street Address				_		
1 City		State	ZIP			
Original Amount Borrowed		Amount Still Outstanding				
Lender Name			Date Repayment Made			
Street Address						
2 city		State	ZIP			
Original Amount Borrowed		Amount Still Outstanding		-		
Lender Name	Lender Name		Date Repayment Made			
Street Address						
3 City		State	ZIP	-		
Original Amount Borrowed		Amount Still Outstanding		_		
Lender Name			Date Repayment Made		100000000000000000000000000000000000000	
Street Address				_		
4 city	nest (Mexico)	State	ZIP	_		
Original Amount Borrowed		Amount Still Outstanding	A MANAGEMENT			
Lender Name		1	Date Repayment Made			
Street Address	Street Address					
5 City		State	ZiP	_		
Original Amount Borrowed		Amount Still Outstanding		_		
	laskwana af astrad i					
	last page of schedule this period to "Summary of Disburs	ements," line 3(d))				

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



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lender Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstandin	ng			
Lender Name		Date Interest Accrued			
Street Address	Street Address				
City	State	ZIP			
Original Amount Borrowed Amount Still Outs		ng			
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstandi	ng			
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP	_		i i
Original Amount Borrowed	Amount Still Outstandi	ng	_		
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstand	ing			
	Street Address City Original Amount Borrowed Lender Name Street Address City Original Amount Borrowed	Street Address	Care Address	Lender Name Date Interest Accrused	Lender Name Date Interest Accoused

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	Red	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	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	City	State	ZIP			
	Corporation Commission File Number (If applicable)	Original Payment Amount	Date of Original Payment			
	Name of Orlginal Payor		Date Rebate/Refund Made			
	Street Address					
3	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					
4	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
E	Street Address					
9	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Enter total only if last page of sch					
	(transfer the total disbursed this period to "Summary of	of Disbursements," line 4)			1	1

Schedule B(4), page ____ of



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committee	e Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
:	Street Address					
1	City	State	ZIP			
	Committee ID Number Date In-Kind Contribution Made					
	Committee Name	L				
	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			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name		All A			-
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	l Made			
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disburse	ements." line 5(a))				<u> </u>

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

Political A	Action Committee Recipient II	nformation	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 Contributi	on Made			
Committee Name					
Street Address	Street Address				
2 City	State	ZIP			
Committee ID Number	Date In-Kind Contribut	Date In-Kind Contribution Made			
Committee Name					
Street Address					
3 City	State	ZIP			
Committee ID Number	Date In-Kind Contribut	tion Made			
Committee Name					
Street Address		4407			
4 city	State	ZIP			
Committee ID Number	Date In-Kind Contribu				
***	Suo III rena Soriulou				
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Committee ID Number Date In-Kind Contribution Made				
Enter total only if last page (transfer the total disbursed this period to	of schedule				
Tra ensier me total dispursed tris period to	Summery of Dispulsements. Time 5(0))				

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party R	ecipient Informatio	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	ware				
	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	1				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	1 Made			
	Committee Name		4.7 <u>1.774.4.7</u>			
	Street Address					
5	City	State	ZIP			
	Committee ID Number 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	Cumulative Amount this
	Partnership Name			Communica	Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ution Made			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Made			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Made			
	Partnership Name					
	Street Address					
4		State	ZIP			
	City					
	Corporation Commission File Number	Date In-Kind Contrib	oution Made			
	Partnership Name					
5	Street Address		1			
•	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Enter total only if last page of scl					



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	/ LLC Recipient Info	rmation	Amount	Cumulative Amount this	Cumulative Amount this
1	Corporation/LLC Name			Contributed	Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
-	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
_	Corporation/LLC Name	<u> </u>				
Street Address						
,	- Aller		T			
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Corporation/LLC Name					
	Street Address					4
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrit	oution Made			
_	Corporation/LLC Name					
	Street Address	Maria de Maria de Carta de Car				
4	City	State	ZIP	<u>_</u>		
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
		Pare Ill-tolin coulds				
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Enter total only if last page of sc					

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organizat	ion Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Streat Address			l		
1	City	State	ZIP			i :
	Corporation Commission File Number	Date In-Kind Contribution	I Made			
	Labor Organization Name	<u></u>				
Street Address						
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name					
5	Street Address					
3	City	State	ZIP			
	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					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Enter total only if last page of sched	ule				

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



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure F	Recipient Informati	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name	Mode of Advertising (TV, mail, eto)				
	Street Address		4			
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		i
1	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address					
2	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			
3	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (inc	cluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Recipient Name	- L	Mode of Advertising (TV, mail, etc)			
	Street Address		L			
4	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	L cluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Enter total only if last page of schedu			1		



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

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



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

/	Expenditure F	Recipient Information	n	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 Reca	liled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Reciplent Name	<u></u>	Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reca	alled	☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Date of First Publication, Display, Delivery, or Broadcast Office Held				
	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		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
	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		
	Date of First Publication, Display, Delivery, or Broadcast	blication, Display, Delivery, or Broadcast Office Held		_ □ Credit		
_	Enter total only if last page of schedu					



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Bene	fitted 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					
	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			
	Street Address					
4	City	State	ZIP			
	Type of Benefit Provided					
	Notes:	. 2400-010-0	AMADE AND			
	Enter total only if last page of sche	dule				4
L	(transfer the total disbursed this period to "Summary of	Disbursements," line 9)				

Schedule B(9), page ____ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient (Committee Inforn		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (If applicable)	Type of Shared E	xpense (If applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	☐ Credit		
	Committee Name Payment Date		Payment Date			
	Street Address				Account of the control of the contro	
4	City	State	ZIP	□ Cash		
	Date of Joint Fundralsing Event (if applicable)	ate of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)		☐ Credit		
	Committee Name Payment Date		Payment Date			
	Street Address					
5	City	State	ZIP	☐ Cash		
	Type of Shared Expense (if applicable)		☐ Credit			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 10)					
_	Quantities the total dispursed this period to Summary of	Dispuisements, line 10)				1



REIMBURSEMENTS MADE:

SCHEDULE B(11)

Recipient Information				Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					l
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
1	Name					
	Street Address					
?	City	State	ZIP			
	Services or Goods Reimbursed	1	Reimbursement Date	□ Cash □ Credit		
1	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
***************************************	Street Address					
ţ	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 ransfer the total disbursed this period to "Summary of Disbursements," line 11)					



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

/					Cumulative	Cumulative
	Debt		Amount	Amount this Reporting Period	Amount this Election Cycle	
	Name					
	Street Address			-		
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name		J.,			
		Street Address				
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
<u> </u>	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
\vdash	Name					
	Street Address		***************************************	-		
5	City	State	ZIP	-		
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
	77	- and anal mout flow and				
	Enter total only if last page of schedul					
√└	T. Santa San		WWW			L



TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

		,
	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Reciplent 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 Monles / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 14)		



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

Recipient Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name				
1	Street Address				
	City	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit		
	Name				
	Street Address				
2	City	ZIP			
	Disbursement Type	Disbursement Date	□ Cash □ Credit		
	Name				
	Street Address			·	
3	City	ZIP			
	Disbursement Type	Disbursement Date	□ Cash □ Credit		
	Name				
	Street Address				
4	City	ZIP			
	Disbursement Type	Disbursement Date	□ Cash □ Credit		
	Name				
	Street Address				
5	City	State ZIP			
	Disbursement Type Disbursement Da		□ Cash □ Credit		
	Enter total only if last page of schedule				