RECEIVED



COMMITTEE ID NUMBER

COMMITTEE INFORMATION (required):

- [Committee Information:	Committee Name:	Farhana Shifa for Chandler	
CAND	DATE INFORMATION (only if fil	ing as a candidate com	nmittee):	
	Office Sought:	☐ Statewide Office		☐ State Legislature:
		☐ County Office:		■ City/Town Office: City Council
1	Cumulative Report:			
	■ Check here if this is the c	andidate committee's fi	rst, cumulative report for the elec	ction cycle. Also select appropriate Reporting Period below.
	Cumulative reporting period	start date (which supe	rsedes the start date for the Rep	orting Period selected below): October 27, 2021

REPORTING PERIOD (check one);

G P	ERIOD (check one):	
	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 March 1, 2021*
	2021 March Post-Election (Q1) Report (Local Only): February 21, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1: 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 10, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 26, 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
100 m	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 25, 2021*
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 18, 2022*
1	2021 Quarter 4 Report: October 27, 2021 to December 31, 2021	January 1, 2022 to January 18, 2022*
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2022 to February 28, 2022*
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 9, 2022*
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
,	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 25, 2022*
	2022 Post-Primary (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 17, 2022*
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2022 to October 31, 2022*
*****	2022 Post-General (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 Dat

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

FINANCIAL SUMMARY (required):

	Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a)	Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	0.00	
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	12,665.00	12,665.00
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	808.96	808.96
(d)	= Balance at close of reporting period	11,856.04	11,856.04



Under A.R.S. \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.

Mary Fritsche	Mary Fritsche Digitally signed by Mary Fritsche Date: 2022.01.13 21:41:41 -0700		1/13/2022
Printed Name of Committee Treasurer	Signature of Con	nmittee Treasurer	Date

SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) Individuals - More than \$50	11,705.00	
	(b) Individuals - \$50 or Less (Aggregate)	960.00	
	(c) Candidate Committees	0.00	
	(d) Political Action Committees	0.00	
	(e) Political Parties	0.00	
	(f) Partnerships	0.00	
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)	0.00	
	(h) Labor Organizations (PACs & Political Parties Only)	0.00	1000
	(i) Candidate's Personal Monies (Candidate Committees Only)	0.00	
	(j) Monetary Contributions Subtotal (add 1(a) through 1(i))	0.00	
	(k) Refunds Given Back to Contributors	0.00	
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))	0.00	
2.	Loans		
	(a) Loans Received	0.00	
	(b) Forgiveness on Loans Received		0.00
	(c) Repayment on Loans Made	0.00	
	(d) Interest Accrued on Loans Made	0.00	
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	0.00	
3.	Rebates and Refunds Received	0.00	
4.	Interest Accrued on Committee Monies	0.00	
_5	In-Kind Contributions Received		F00.00
	(a) Individuals - More than \$50		500.00
	(b) Individuals - \$50 or Less (Aggregate)		0.00
	(c) Candidate Committees		0.00
	(d) Political Action Committees		0.00
	(e) Political Parties		0.00 0.00
	(f) Partnerships		0.00
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		0.00
	(h) Labor Organizations (PACs & Political Parties Only)		0.00
	(i) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		0.00
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)	999	0.00
<u>7. </u>	Extensions of Credit		0.00
	(a) Extensions of Credit Received	A	0.00
	(b) Payments on Extensions of Credit Received		0.00
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))	0.00	0.00
8.	Joint Fundraising / Shared Expense Payments Received	0.00	
9.	Payments Received for Goods / Services	0.00	
10.	Outstanding Accounts Receivable / Debts Owed to Committee		0.00
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable		0.00
12.	Miscellaneous Receipts	0.00	0.00
13.	Total Receipts (cash: add 1(i), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)	12,665.00	500.00

SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	509.81	
2.	Contributions Made		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(a) Candidate Committees	0.00	
	(b) Political Action Committees	0.00	
	(c) Political Parties	0.00	
	(d) Partnerships	0.00	
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)	0.00	
	(f) Labor Organizations (PAC & Political Parties Only)	0.00	
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	0.00	7.7.1.2.2.917.7.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
	(h) Contribution Refunds Provided to the Reporting Committee	0.00	
		0.00	
3.	(i) Monetary Contributions Total (subtract 2(h) from 2(g)) Loans	0.00	
<u> </u>	(a) Loans Made	0.00	
	(b) Loan Guarantees Made	0.00	0.00
	(c) Forgiveness on Loans Made		0.00
	(d) Repayment of Loans Received	0.00	0.00
		0.00	
	(e) Accrued Interest on Loans Received (f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))	0.00	0.00
4.	Rebates and Refunds Made (Non-Contributions)	0.00	0.00
5.	Value of In-Kind Contributions Provided	0.00	0.00
<u> </u>	(a) Candidate Committees		0.00
	(b) Political Action Committees		0.00
	(c) Political Parties		0.00
	(d) Partnerships		0.00
			0.00
			0.00
	(f) Labor Organizations (PAC & Political Parties Only)		
	(j) Contributions Subtotal (add 5(a) through 5(f))		0.00
6.	Independent Expenditures Made	0.00	
7.	Ballot Measure Expenditures Made	0.00	
8.	Recall Expenditures Made	0.00	
9.	Support Provided to Party Nominees (Political Parties Only)	0.00	
10.	Joint Fundraising / Shared Expense Payments Made	0.00	
11.	Reimbursements Made	0.00	
12.	Outstanding Accounts Payable / Debts Owed by Committee		0.00
13.		0.00	0.00
14.	Miscellaneous Disbursements	0.00	0.00
15.	Aggregate of Disbursements - \$250 or Less	299.15	
	<u> </u>	808.96	0.00

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

SCHEDULE A(1)(a)

Indi	vidual Contributor Infor		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Stacey Langhoffer	l i					
	Street Address 2545 W Loughlin Dr			4 000 00	1 000 00	
Chandler	State AZ	85224	1,000.00	1,000.00	1,000.00	
Occupation Manager	TSVC,	JS				
Kevin Dang		Date Contribution Received 11/3/2021				
Street Address 23417 N 64th Ave			-	222.22	000.00	
Glendale	State AZ	85310	200.00	200.00	200.00	
Occupation Pharmacist	Employer Dignity	Health Arizona				
Gina Godbehere TI	Name Gina Godbehere Thomas Date Contribution Received 11/3/2021			400.00	100.00	
Street Address 14076 W Cambridge Ave						
Goodyear	State AZ	85395	100.00	100.00	100.00	
Occupation Attorney	Employer City of	Goodyear				
Name Cindy Casaus						
Street Address 2367 E Desert Trur						
Phoenix	State AZ	85048	100.00	100.00	100.00	
Occupation CFO	Employer State o	of Arizona				
Marie Cunning		Date Contribution Received				
			500.00	500.00	500.00	
5 Phoenix	State AZ	85023		300.00	300.00	
Occupation Owner						
Enter total only if last page of						

*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 __1 of __9

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

SCHEDULE A(1)(a)

	Individual	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Olivier Mirza		Date Contribution Received 11/19/2021			
	Street Address 3870 W Linda Ln				300.00	300.00
1	Chandler	State AZ	85226	300.00	300.00	300.00
	Occupation Project Manager	Employer HDR In	C			
	Albert Lin		Date Contribution Received			
İ	Street Address 1714 S River Dr					
2	Tempe	State AZ	85281	100.00	100.00	100.00
	Occupation Retired	Employer Retired				
	Name Tram Chu		Date Contribution Received 12/2/2021			
	Street Address 5130 W Topeka Dr					
3	Glendale	State AZ	^{ZIP} 86308	500.00	500.00	500.00
	Occupation Broker Associate	Employer West U	SA Realty			
	Name Matthew Barto					
	Street Address 5641 W Megan St			7		
4	Chandler	State AZ	85226	250.00	250.00	250.00
	Occupation Facilities	Occupation Employer				
	Name Karrin Taylor Robson		Date Contribution Received			
	Street Address 16 Biltmore Estates					
5		State AZ	85018	500.00	500.00	500.00
	Occupation Founder	pation Employer				
	Enter total only if last page of sche	edule				

*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 2 of 9

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

SCHEDULE A(1)(a)

	Individ	lual Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name Charl	es Shinke		Date Contribution Received 12/17/2021			
	Street Address 2458 S Salida Del So	ol		10000	400.00	400.00
Chan	dler	State AZ	85286	100.00	100.00	100.00
Occupation Risk	Manager	Employer Chase				
Name Mona	Oshana		Date Contribution Received 12/17/2021			
Street Addres	w Taro Ln	WARRANT PROPERTY AND A STATE OF THE STATE OF				
² Glenc	dale	State AZ	^{ZIP} 85308	1,000.00	1,000.00	1,000.00
Occupation Realt	or	Employer Southw	rest Property Sales			
Jae C	Chin		Date Contribution Received 12/17/2021			
1	Street Address 3290 S Camellia Pl					
3 City Chan	dler	State AZ	85248	500.00	500.00	500.00
Occupation	er	Employer Super (Cleaners #15			
Name Lisa J	James		Date Contribution Received 12/17/2021	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Street Addres	E Cortez Dr					
4 City Scotts	sdale	State AZ	85254	75.00	75.00	75.00
Occupation	ultant	Employer Gordon	C James Consulting			
Name	ir Zulfiqur		Date Contribution Received 12/17/2021			
Street Addres						
5 city Temp		State AZ	^{ZIP} 85281	100.00	100.00	100.00
Occupation		Employer	dependent			
Enter tot	al only if last page of so	chedule	,			

*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 9

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

SCHEDULE A(1)(a)

				1 1	Cumulative	Cumulative
	Individual	Contributor Inform	nation	Amount Received	Amount this Reporting Period	Amount this Election Cycle
Name Edward F	Name Edward Robson		Date Contribution Received 12/17/2021			
Street Address 9532 E R	reet Address 9532 E Riggs Rd					4 000 04
Sun Lake		State AZ	85246	1,000.00	1,000.00	1,000.00
Occupation Retired		Retired				
Name Kelly Cod	per		Date Contribution Received 12/20/2021			
Street Address 725 W. E	l Prado Rd					
² Chandler	•	State AZ	85225	500.00	500.00	500.00
Occupation Partner /	Occupation Employer BKD's Backyard		Backyard Joint			
Edgar Ch	Name Date Contribution Received 12/20/2021					
	Street Address 698 N Iowa St				400.0	
3 Chandler		State AZ	85225	100.00	100.00	100.0
Broker		Employer Momen	tum Brokers			
Moses S			Date Contribution Received 12/21/2021			
	Street Address 1714 West Satinwood Drive					
4 City Phoenix		State AZ	85012	100.00	100.00	100.0
Occupation Digital M	Occupation Employer Digital Marketing Self					
Name Mohamm	Name		Date Contribution Received 12/22/2021			
Street Address 881 W F	Street Address 881 W Folley St.			500.00	500.00	500.0
5 Chandler	-	State AZ	^{ZIP} 85226		500.00	300.0
Occupation Managin	g Director	Employer Towels	N More			
	ly if last page of sche					

*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 4 of 9

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

SCHEDULE A(1)(a)

In	dividual Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Joel Ferch					
Street Address 882 N Naples Dr			500.00	500.00	500.00
Chandler	State AZ	85226	500.00	500.00	500.00
VP Operations	Employer Interior	Logic Group	-		
Garry Ong		Date Contribution Received 12/28/2021			
Street Address 1502 W Thomas					
Phoenix	State AZ	^{zip} 85015	200.00	200.00	200.00
Occupation Retired	Employer Retired	I			
Brenda Kinsey	l				
	Street Address 10404 E Superstition Range Rd				400.00
Gold Canyon	State AZ	85118	100.00	100.00	100.0
Occupation Substitute Teache	er Americar	n Leadership Academy			
James Park		Date Contribution Received 12/28/2021			
Street Address 670 E Betsy Ln		•		100.00	
4 Gilbert	State AZ	85296	100.00		100.0
Occupation Realtor	Employer NexGer	n Real Estate			
Name Carlos Arellano	1	Date Contribution Received 12/28/2021			
Street Address 3003 N Central Av	/e #1160				
5 Phoenix	State AZ	^{zip} 85012	250.00	250.00	250.00
Occupation Realtor	Employer NexGer	n Real Estate			
Enter total only if last page					

*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 $\frac{5}{9}$ of $\frac{9}{1}$

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

SCHEDULE A(1)(a)

	Individual Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Jorge Arelland	,	Date Contribution Received 12/28/2021				
Street Address 3003 N Centr	Il Ave #1160		250.00	250.00	250.00	
Phoenix	State AZ	85012	250.00	250.00	250.00	
Realtor	NexGer	n Real Estate				
Kimberly Owe	ns	Date Contribution Received 12/28/2021				
Street Address 20483 W Dan	el Pl		150.00	450.00	150.0	
² Buckeye	State AZ	85396	150.00	150.00 150.00		
Account Direct	tor Gordon C	. James Public Relations				
Helen Zhang						
	Street Address 7574 E Monterra Way]	050.00	050.00	
Scottsdale	State AZ	85266	250.00	250.00	250.0	
Realtor	Employer West U	SA Realty				
Kim Kunasek		Date Contribution Received 12/28/2021				
Street Address 5800 East Le	vis Ave					
4 Scottsdale	State AZ	85257	500.00	500.00	500.0	
Occupation	Employer Oei Des	sign				
Loan Dao		Date Contribution Received 12/29/2021				
	Street Address 11310 W Flintlock Dr		100.00	400.00	100.0	
5 Chandler	State AZ	^{zip} 85249	100.00	100.00	100.0	
Dentist	Employer Smile C	Care AZ				
Enter total only if las	page of schedule iod to "Summary of Receipts," line 1(a))					

*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 $\frac{6}{9}$ of $\frac{9}{1}$

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

SCHEDULE A(1)(a)

Individ	ual Contributor Inforr	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Anwar		Date Contribution Received 12/29/2021			
			050.00	050.00	252.22
е	State AZ	85281	250.00	250.00	250.00
ger	AZ Sun	nmit LLC			
/a Khanam		Date Contribution Received			
s W Drake St					300.00
dler	State AZ	85226	300.00	300.00 300.00	
d	Retired				
Bret King 12/30/		Date Contribution Received 12/30/2021			
Street Address 815 Lenora Ave					
io	State TX	78840	100.00	100.00	100.00
d	Employer Retired				
rd Pellegrino		Date Contribution Received 12/31/2021			
s E Squawbush F	P				
nix	State AZ	85048	200.00	200.00	200.00
ed .	Employer Retired				
ahim		Date Contribution Received 12/31/2021			
s E Pampa Ave			100.00	100.00	100.00
	State AZ	85212		100.00	100.00
Mesa AZ 85212 Occupation Employer Branch Chief US Dept of Commerce					
	Anwar Hardy Dr #122 e ger /a Khanam W Drake St dler d King enora Ave io E Squawbush F nix d ahim E Pampa Ave th Chief al only if last page of s	Anwar Hardy Dr #122 e	## Anwar ## 12/29/2021 ## Hardy Dr ## 122 ## ## AZ ## 85281 ## ## ## ## 85281 ## ## ## ## ## ## ## ## ## ## ## ## ##	Anwar Tarrel Tar	Individual Contributor Information

*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 7 of 9

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

SCHEDULE A(1)(a)

Individu	al Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Carol Baldwin		Date Contribution Received 12/31/2021			
Street Address 24433 S 201st PI					100.00
Queen Creek	State AZ	85142	100.00	100.00	100.00
Flight Attendant	Americ	an Airlines			
Rocky Singh		Date Contribution Received 12/31/2021			
Street Address 3744 E Del Rio St					
² Gilbert	State AZ	85295	100.00	100.00	100.00
Occupation Manager	Employer 212 IC6	Cream Studio			
Name Barry Wong					
Street Address 29 W Medlock Dr					
3 City Phoenix	State AZ	85013	200.00	200.00	200.00
Executive Director	Employer State o	of Arizona			
Raphael Ahmed		Date Contribution Received 12/31/2021			
Street Address 5755 W Drake Ct					
⁴ City Chandler	State AZ	85226	100.00	170.00	170.00
Occupation Consultant	Employer R Ahm	ed & Associates			
Ismat Ara		Date Contribution Received 12/31/2021			
Street Address 13229 W Peck Dr					
5 Litchfield Pk	State AZ	85340	60.00	60.00	60.00
Occupation Substitute Teacher	Employer ESI				
Enter total only if last page of sci	nedule				
Reminister are total received and period to Continuary (

*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 8 of 9

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

SCHEDULE A(1)(a)

Individu	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle			
Name Andy Zhang Street Address		Date Contribution Received 12/31/2021				
1060 S Robin Ln	200.00	200.00	200.00			
^{City} Mesa	State AZ	85204		200.00	200.0	
Consultant		nder Inc				
Name Raphael Ahmed		Date Contribution Received 11/3/2021				
Street Address 5755 W Drake Ct						
^{City} Chandler	State AZ	85226	50.00	170.00	170.00	
Occupation Consultant	R. Ahm	ed & Associates				
Raphael Ahmed		Date Contribution Received				
Street Address 5755 W Drake Ct				470.00	470.0	
Chandler	State AZ	85226		170.00	170.0	
Consultant	Employer R. Ahm	ed & Associates				
Name		Date Contribution Received				
Street Address						
City	State	ZIP				
Occupation	Employer					
Name	<u> </u>	Date Contribution Received				
Street Address						
City	State	ZIP				
Occupation	Employer					
Enter total only if last page of scl						
	Name Andy Zhang Street Address 1060 S Robin Ln City Mesa Occupation Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Occupation Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Occupation Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Occupation Consultant Name Street Address City Occupation Name Street Address City Occupation Name Street Address City Occupation Name	Name Andy Zhang Street Address 1060 S Robin Ln City Mesa Cocupation Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Cocupation Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Cocupation Cocupation Consultant Name Street Address City State Cocupation Employer R. Ahm Name Street Address City State Cocupation Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer Employer	Andy Zhang Street Address 1060 S Robin Ln City Mesa AZ 85204 Cocupation Consultant Raphael Ahmed Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Cocupation Consultant Name Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Cocupation Cocupation Consultant Raphael Ahmed Street Address 5755 W Drake Ct City Chandler Cocupation Cocupation Consultant State Raphael Ahmed Street Address 5755 W Drake Ct City Chandler AZ 85226 Cocupation Cocupation Raphael Ahmed Street Address 5755 W Drake Ct City State Chandler AZ 85226 Cocupation City State Zip Chandler Cocupation Cocupation Cocupation Cocupation City State Zip Cocupation Cocupation Cocupation City State Zip Cocupation City State Zip Cocupation C	Name Andy Zhang Sized Address 1060 S Robin Ln City Mesa AZ State AZ State Cocupation Consultant Sized Address 5755 W Drake Ct City Chandler Cocupation Consultant Sized Address 5755 W Drake Ct City State Chandler AZ State Chandler AZ State Chandler Cocupation Consultant Sized Address 5755 W Drake Ct City State Chandler Cocupation Consultant Sized Address State Cocupation Consultant Sized Address Si	Individual Contributor Information Name Andy Zhang 12/31/2021	

*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 9 of 9



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	960.00	960.00
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	960.00	960.00

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

/	Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name				Tropic and a second	
	Street Address		1000000			
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address		* * * * * * * * * * * * * * * * * * * *			
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address		1			
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule	line 1(c))			0.00	0.00

Schedule A(1)(c), page ___ of __1



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

/	Political Action Committ	ee Contributor Inf	ormation	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 Received	d			
	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	GOMMINGO IS COMMISSION					



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

	Political Party Co	ntributor Informati	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			_		
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	l d	_		
1	Committee Name					
	Street Address					
2	City State		ZIP	-		1
	Committee ID Number	Date Contribution Receive	ed	-		
	Committee Name					
	Street Address			_		
3	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receive	ed	-		
	Committee Name	L				
	Street Address			-		
4	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receive	ed	1		
	Committee Name					
	Street Address	***************************************		-		
5	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receiv	ed	1		
_	Enter total only if last page of schedule			1	0.00	0.0



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

/	/	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Partnership Name					
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	d .			
		Partnership Name					
		Street Address					
	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 Receive	ed .			
		Partnership Name	<u> </u>				
		Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Partnership Name	<u> </u>				
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	d			
		Enter total only if last page of schedule	1 (10)	-		0.00	0.00
\		(transfer the total received this period to "Summary of Receipts,"	(ICIG 1(1))			1	



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

	Corporation	/ LLC Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP	_		
	City	State				
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address			4		
2	City	State	ZIP	4		
	Corporation Commission File Number	Date Contribution Receiv	ed			
r	Corporation/LLC Name					
	Street Address			-		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	ed			
_						
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
F	Corporation/LLC Name					
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	red	1		
_	Enter total only if last page of sch	nedule			0.00	0.00
١L.	(transfer the total received this period to *Summary of				0.00	0.00

Schedule A(1)(g), page ____ of ___1



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

/_	Labor Organization	n Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address			_		
1	1 City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	OSS, POR SELECTION OF THE PROPERTY OF THE PROP					
	Labor Organization Name					
	Street Address					
2	2 City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Labor Organization Name					
	Street Address	38				
3	3 City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
r	Labor Organization Name					
	Street Address					
4	4		I			
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
H	Labor Organization Name					
	Street Address					
,	5			_		
ľ	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
F	Enter total only if last page of schedule			L	0.00	0.00
١L	(transfer the total received this period to "Summary of Receip	ts," line 1(h))				

Schedule A(1)(h), page ____ of ___1



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

	Candi	date 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		Date Contribution Received			
	Street Address			_		
2						
	City	State	ZIP			
	Occupation	Employer		1		
	Name	<u> </u>	Date Contribution Received			
	Street Address			_		
3	City	State	ZIP	1		
	Оссиратоп	Employer		_		
_	Name		Date Contribution Received			
	Name		Date Guilland Guille			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
H	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer		_		
	Enter total only if last page of sched				0.00	0.00



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

/	Contributo	r Information		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)	Date of Original Contribution	_			
	Name	Date Contribution Refunded				
	Street Address			_		
3	City	State	ZIP	1		
	ID Number (if applicable)	Date of Original Contribution				
	Name		Date Contribution Refunded			
	Street Address			_		
4	City	State	ZIP	-		
	ID Number (if applicable)	ID Number (if applicable)				-
	Name		Date Contribution Refunded			
	Street Address	Street Address				
5	City	State	ZIP	-		
	ID Number (if applicable)		Date of Original Contribution			
	Enter total only if last page of schedule				0.00	0.0
	(transfer the total received this period to "Summary of Receipts,"	line 1(k))			0.00	0.00

Schedule A(1)(k), page __1 of 1



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		UNIVERSAL OF			
1	City	State	ZIP	_		
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	-		
	Lender Name	Date Loan Received				
	Street Address	1		-		
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	1		
_	Lender Name	Date Loan Received				
Lender Name		Date Loan Neverves				
	Street Address					
3	City	State	ZiP	1		
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
	Lender Name	Date Loan Received				
			440-24114			
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	-		
	Lender Name	Date Loan Received				
Street Address						
5	City	State	ZIP	-		
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	-		
	Enter total only if last page of schedule				0.00	0.00
	(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)

Lender Information		Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
	Street Address			_		
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address			-		
2	City	State	ZIP	1		
	Original Amount of Loan	Amount Still Outstanding		-		
	Lender Name		Date Forgiveness Received			
	Street Address	treel Address				
3	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstanding		-		
	Lender Name		Date Forgiveness Received			
	Street Address			_		
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address			+		
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule		···		0.00	0.0

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

Borrower Information				Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	nding			
	Borrower Name	l	Date Repayment Received			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	nding			
	Borrower Name		Date Repayment Received			
	Street Address		wanter to a second			
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	nding			
_	Borrower Name		Date Repayment Received			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	nding			•
	Borrower Name		Date Repayment Received			
	Street Address			_		
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	Inding			
	Enter total only if last page of so	I chedule			0.00	0.0

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP		:	
	Original Amount Borrowed	Amount Still Outstanding				
	Вогrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name	Sorrower Name Date Interes				
	Street Address	_				
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address	Street Address				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
-	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	I	-		
L	Enter total only if last page of schedule	1			0.00	0.00
1	(transfer the total received this period to "Summary of Receipts,	" line 2(d))				

Schedule A(2)(d), page __1 of 1



REBATES AND REFUNDS RECEIVED:

COMMITTEE ID NUMBER

SCHEDULE A(3)

Payor Name Date Rebate/Refund Received Figure Address Date Rebate/Refund Received							
Stock Address	_	Payor II	nformation		Amount Rebated or Refunded	Amount this	Cumulative Amount this Election Cycle
City State ZIP		Payor Name	Date Rebate/Refund Received				
Original Purchase Amount Paper Name Date RebateRefund Received		Street Address					
Payor Name City 1	City	State	ZIP				
Street Address Street Address		Original Purchase Amount	Reason for Refund/Rebate	9			
City State ZiP		Payor Name	I	Date Rebate/Refund Received			
Chignal Purchase Amount Payor Name Date Rebate/Refund Received Street Address City Original Purchase Amount Pasor for Refund/Rebate Date Rebate/Refund Received Street Address Date Rebate/Refund Received Street Address Date Rebate/Refund Received Street Address City State Date Rebate/Refund Received Street Address		Street Address					
Payor Name Street Address City State City State Date Rebate/Retund Received Street Address Payor Name Date Rebate/Retund Received City Street Address City State ZIP Date Rebate/Retund Received Street Address City State ZIP Original Purchase Amount Reason for Retund/Rebate Date Rebate/Retund Received Street Address City State ZIP Original Purchase Amount Date Rebate/Retund Received Street Address City State ZIP Original Purchase Amount Reason for Retund/Rebate Street Address Street Address City State ZIP Original Purchase Amount Reason for Retund/Rebate	2	City	State	ZiP			
Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate Date Rebate/Refund Received Street Address City State ZIP Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate Date Rebate/Refund Received Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate		Original Purchase Amount Reason for Refund/Rebat		2			
City State ZIP Drignal Purchase Amount Reason for Retund/Rebate Payor Name City State ZIP Original Purchase Amount Reason for Retund/Rebate Payor Name Date Rebate/Retund Received Street Address City State ZIP Original Purchase Amount Reason for Retund/Rebate Date Rebate/Refund Received Street Address City State ZIP Original Purchase Amount Reason for Retund/Rebate		Payor Name		Date Rebate/Refund Received			
Crignal Purchase Amount Payor Name City Crignal Purchase Amount Reason for Refund/Rebate City Crignal Purchase Amount Reason for Refund/Rebate Date Rebate/Refund Received Flagor Name Date Rebate/Refund Received City Crignal Purchase Amount Reason for Refund/Rebate City Crignal Purchase Amount Reason for Refund/Rebate City Crignal Purchase Amount Reason for Refund/Rebate		Street Address					
Payor Name Date Rebate/Refund Received Street Address City State ZIP Ortiginal Purchase Amount Payor Name Date Rebate/Refund Received Street Address City State ZIP Date Rebate/Refund Received Street Address To Refund/Rebate Date Rebate/Refund Received Street Address City State ZIP Ortiginal Purchase Amount Reason for Refund/Rebate	3	City	State	ZIP	-		
Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate		Original Purchase Amount	Reason for Refund/Rebate	e			
4 City State ZIP Original Purchase Amount Reason for Refund/Rebate Payor Name Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate		Payor Name		Date Rebate/Refund Received			
City State ZIP Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate		Street Address					
Payor Name Date Rebate/Refund Received Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate	4	City	State	ZIP			
Street Address City State ZIP Original Purchase Amount Reason for Refund/Rebate		Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
City State ZIP Original Purchase Amount Reason for Refund/Rebate		Payor Name		Date Rebate/Refund Received			
Original Purchase Amount Reason for Refund/Rebate		Street Address			_		
	5	City	State	ZIP			
		Original Purchase Amount	Reason for Refund/Rebat	e	_		
Enter total only if last page of schedule 0.00		Enter total only if last page of schedule				0.00	0.0

Schedule A(3), page ____ of 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)	0.00	0.00

Schedule A(4), page __1 of __1



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

SCHEDULE A(5)(a)

	Individual Contributor Information					Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		^{Name} Raphael Ahmed		Date In-Kind Contribution Received 12/5/2021			
		Street Address 5755 W Drake Ct			500.00	500.00	500.00
		Chandler	State AZ	^{ZIP} 85226	500.00	500.00	500.00
	- 1	Occupation Consultant	Employer R. Ahmed & Asso	ociates (sole proprietorship			
		Name		Date In-Kind Contribution Received			
	ŀ	Street Address					
2	2 - 	City	State	ZIP			
		Occupation Employer		<u> </u>			
-	\dagger	Name		Date In-Kind Contribution Received			
	ŀ	Street Address					
3	3	City	State	ZIP			
	-	Occupation Employer					
-	\dagger	Name Date In-Kind Contribution Received		Date In-Kind Contribution Received			
	ŀ	Street Address					
	4	City	State	ZIP			
	ŀ	Occupation Employer					
ŀ	1	Name		Date In-Kind Contribution Received			
		Street Address					
	5	City	State	ZIP			
		Occupation	Employer				
-	\dashv	Enter total only if last page of schedule				500.00	500.00
		(transfer the total received this period to "Summary of Receipts,"	line 5(a))			300.00	300.00

*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 1



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))	0.00	0.00

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

Schedule A(5)(b), page __1 of __1



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

				1	1	
	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	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	I				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Received			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	<u> </u>		I	0.00	0.00

Schedule A(5)(c), page ___1 of __1



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

/	Political Actio	on Committee Contributor	Information	Amount Receive	Cumulative d Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State ZIP				
	Committee ID Number	Date In-Kind Contribut	ion Received			
_	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
-						
	Committee Name					
	Street Address	treet Address				
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Committee Name	ommittee Name				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
_	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	rtion Received			
_	Enter total only if last page o	f schedule			0.00	0.00
	(transfer the total received this period to "Sum	mary of Receipts," line 5(d))				



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

Political Party Contributor Information				Amount Receive	Cumulative d Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					İ
1 7	City	State	ZIP			;
	Committee ID Number	Date In-Kind Contr	ibution Received		ļ	
1	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received			
1	Committee Name					
	Street Address	MANA CONTRACTOR OF THE CONTRAC				
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	tribution Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Received	MARCON T. T.		
_	Enter total only if last page	of schedule			0.00	0.0



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

	/							
		Partnership Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
[/] [Partnership Name						
		Street Address						
	1	City	State	ZIP	<u> </u>	1 1 1 1 1 1 1 1 1 1 1		
		Corporation Commission File Number	Date In-Kind Contribution f	Received				
		Partnership Name						
		Street Address						
	2	City	State	ZIP				
		Corporation Commission File Number						
		Partnership Name						
		Street Address						
	3	City	State	ZIP				
		Corporation Commission File Number	Date In-Kind Contribution	Received				
		Partnership Name						
		Street Address	- AMINISTRES COLOR					
	4	City	State	ZIP				
		Corporation Commission File Number	Date In-Kind Contribution	Received				
		Partnership Name						
		Street Address						
	5	City	State	ZIP	-			
				· · · · · · · · · · · · · · · · · · ·				
\		Corporation Commission File Number Date In-Kind Contribution Received						
		Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(f))				0.00	0.00	/

Schedule A(5)(f), page ____ of ___1



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

						_
	Corporation a	/ LLC 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	n Received			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contributi	on Received			
<u> </u>						
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Received					
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Received					
r	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	1		
	Corporation Commission File Number					
-	Enter total only if last page of sch	l nedule			0.00	0.00

Schedule A(5)(g), page ___1 of __1



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

/	Labor Organizatio	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	1		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Labor Organization Name					
	Street Address			_		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	ı Received	-		
	Labor Organization Name					
	Street Address	_				
4	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address	_				
5	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	n Received	1		

Schedule A(5)(h), page ____ of ___1



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

SCHEDULE A(5)(i)

	/	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ſΓ		Name		Date In-Kind Contribution Received			
	-	Street Address					
1	,	City	State	ZIP			
		oily	o, u, u				
		Asset or Property Contributed					
F	+	Name		Date In-Kind Contribution Received			
	ŀ	Street Address					
2							
		City	State	ZIP			
	l	Asset or Property Contributed					
F	1	Name		Date In-Kind Contribution Received			· · · · · · · · · · · · · · · · · · ·
		Street Address					
3	3			T			
		City	State	ZIP			
		Asset or Property Contributed					
	1	Name		Date In-Kind Contribution Received			
		Street Address	L. L. ANGEL PERMINENT				
4	4	City	State	ZIP			
		Annal or Proposition of the Indian			<u> </u> 		
		Asset or Property Contributed					
		Name		Date In-Kind Contribution Received			
		Street Address	1.0.000				
5	5	City	State	ZIP			
		Asset or Property Contributed	<u> </u>				
_					<u></u>		
		Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	line 5(i))			0.00	0.00

Schedule A(5)(i), page ____ of ___1



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

SCHEDULE A(6)

/					Cumulative	Cumulative
_	Source	Information		Amount Received	Amount this Reporting Period	Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP			
	Type of Item Donated	Audd		_		
_	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP	- -		
	Type of Item Donated			-		
L	Name		Date In-Kind Donation Received			,
3	Street Address					
ľ	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
4	City	State	ZIP			
	Type of Item Donated	<u> </u>				
l	Name		Date In-Kind Donation Received			
	Street Address			1		
5	City	State	ZIP			
	Type of Item Donated			-		
	Enter total only if last page of schedule		and the state of t		0.00	0.00
	(transfer the total received this period to "Summary of Receipts,"	line 6)			1 0.00	0.00

Schedule A(6), page ____1 of ___1



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

						The same of the sa
,				,		
/	Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	-	·	
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address			_		
2	Ou.	ZIP	-			
	City	State	ZIF			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name		<u> </u>			
	Street Address			-		
3		1.	T	_		
	City	State	ZIP			
	Services or Goods Provided on Credit Date of Extension of C					
	Name					
	Street Address					
4			A CONTRACTOR OF THE CONTRACTOR			
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit	-		
	Name					
	Street Address			-		
5	1		-	_		
Ĭ	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Enter total only if last page of schedule				0.00	0.00
	(transfer the total received this period to "Summary of Receipts	,* line 7(a))				

Schedule A(7)(a), page 1 of 1



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

/	Credito	r Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address		-			
1	City	State	ZIP	-		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	- -		
1	Name					
	Street Address			_		
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
$\frac{1}{1}$	Name					
	Street Address			-		
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit Date of Original Exten		Date of Original Extension of Credit			
+	Name					
	Street Address			1		
4	City	State	ZIP	-		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
_	Name					
	Street Address	MINUTE IN THE PROPERTY OF THE		-		
5	City	State	ZIP	-		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	1		
	Enter total only if last page of schedule	····				

Schedule A(7)(b), page __1 of __1



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

/	/	Payor Comm	littee Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
۱ ا		Committee Name		Payment Date				
		Street Address						
	1	City	State	ZIP				
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)	-			
		Committee Name		Payment Date				
		Street Address						
	2	City	State	ZIP				
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
		Committee Name		Payment Date				
		Street Address			-			
	3	City	State	ZIP				
		Date of Joint Fundralsing Event (if applicable)	Type of Shared Expense (if applicable)				
		Committee Name		Payment Date				
		Street Address						
	4	City	State	ZiP				
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
		Committee Name		Payment Date				
		Street Address						
	5	City	State	ZIP				
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
		Enter total only if last page of schedule				0.00	0.00	
\		(transfer the total received this period to "Summary of Receipts	,* line 8)			l		. /

Schedule A(8), page ____ of ___1



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

/	Payor II	nformation		Payment Amount	Cumulative Amount this	Cumulative Amount this
7	Name				Reporting Period	Election Cycle
,	Street Address		,	\dashv		
1	City	State	ZIP			
	uiy	Otalic				
	Services or Goods Purchased		Payment Date			
	Name					
ŀ	Street Address					
2	City	State	ZIP	_		
	Services or Goods Purchased		Payment Date			
	Contract of Cooks Formation					
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
_	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
5			I-va			
,	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
			1		0.00	0.00



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					
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					***************************************
	Street Address			_		
3	City	State	ZIP			
	ype of Account Receivable or Debt Owed Date that Debt Accrued					
	Name		<u> </u>			
	Street Address					
4	City	State	ZIP			
	ype of Account Receivable or Debt Owed Date to		Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed	<u> </u>	Date that Debt Accrued			
	Enter total only if last page of schedule				0.00	0.00

Schedule A(10), page __1 of __1



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
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		
Source of Surplus Monies / Recipient of Transferred Debt		
Total (transfer the total received this period to "Summary of Receipts," line 11)	0.00	0.00

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					
$\Big $				_		
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
l	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
4	Name					
	Street Address			<u> </u>		
اہ			T			
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					AWWW
	Street Address					
5	City	State	ZIP			
	Receipt Type		Receipt Date			
_	Enter total only if last page of schedule				0.00	0.0



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

						_
/	Recipient	Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursement Date				
	RocketChics	1/3/2021		_		
	Street Address 2301 E Indian Wells Dr			211.70		
1	City	State	ZIP		211.70	211.70
	Chandler	AZ	85249	■ Cash		
	Type of Operating Expense Paid Communications - Advertising	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Credit		
	Name	Disbursement Date				
	Amsterdam Printing	12/3/2021				
	Street Address PO Box 580			298.11		
2	City	State	ZIP	-	298.11	298.11
	Amsterdam	NY	12010	■ Cash		
	Type of Operating Expense Paid Communications - Advertising	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Credit		
	Name	Disbursement Date				
	Street Address	Address				
3	City	State	ZIP			
				☐ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
	Name	Disbursement Date				
	Division Address			_		
	Street Address					
4	City	State	ZIP			
	P. J. Company	Non-Electoral Purnosa?	(PACs and Political Parties Only)	☐ Cash☐ Credit		
	Type of Operating Expense Paid	Mon-Electoral Purpose?	(PACS and Pollucal Parties Only)	Li Credit		
	Name	Disbursement Date				
	Street Address					
5	City	State	ZIP	☐ Cash		
		Man Clarker 15	(DACe and Balikest Code Code)	_ ☐ Credit		
	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)			
		I —		l		
	Enter total only if last page of schedule				509.81	509.81

Schedule B(1), page ___1 of __1



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
Co	ommittee Name					
Str	reet Address					
Cit	ty	State	ZIP	□ Cash		
Co	ommittee ID Number	Date Contribution Made		☐ Credit		
Co	ommittee Name					
Str	reet Address					
City	ty	State	ZIP	□ Cash		
Co	ommittee ID Number	☐ Credit				
Co	ommittee Name	1				
St	reet Address					
3	ty	State	ZiP			
Co	ommittee ID Number	Date Contribution Made		☐ Cash☐ Credit		
Co	ommittee Name					
St	reet Address					
4 ci	ity	State	ZIP			
Co	ommittee ID Number	Date Contribution Made		☐ Cash☐ Credit		
Cc	ommittee Name					
St	reet Address					
5 ci	ity	State	ZIP			
C	ommittee ID Number	Date Contribution Made		□ Cash □ Credit		
+	nter total only if last page of schedule				0.00	0.0



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/	Political Action Co	ommittee Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	Date Contribution Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address	y-,				
3	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	Date Contribution Made			
	Committee Name	Committee Name				
	Street Address	ATTHIS SEA SEALURE TO THE SEALURE SEAL				
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
5		Date Contribution Made		☐ Cash☐ Credit		
5	Committee ID Number					



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political P	arty Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
ł	Street Address					
,	City	State	ZIP			
				□ Cash		
	Committee ID Number	Date Contribution Made	е	☐ Credit		
1	Committee Name					
ŀ	Street Address					
2	City	State	ZIP		-	
-	Committee ID Number	Date Contribution Mad	le	□ Cash □ Credit		
+	Committee Name					
ŀ	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Mad	de	□ Cash □ Credit		
-	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Mac	de	☐ Credit		
1	Committee Name					
ŀ	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Mad	de	□ Cash □ Credit		
	Enter total only if last page of sch	edule			0.00	0.00



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

/				1	Cumulative	Cumulative
	Partnership Re	cipient Informatio	n	Amount Contributed	Amount this Reporting Period	Amount this Election Cycle
	Partnership Name					
	treet Address			- 		
1	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Cash		
	Partnership Name					
	Street Address					
2	City	State	ZIP	<u> </u>		
	Corporation Commission File Number		☐ Cash☐ Credit			
-	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	1		
	Corporation Commission File Number	Date Contribution Made	1	☐ Cash☐ Credit		
-	Partnership Name	1				
	Street Address			-		
5	City	State	ZiP	_		
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
	Enter total only if last page of schedule				0.00	0.00
∖└	(transfer the total disbursed this period to "Summary of Disburs		edule B(2)(d) page 1 c	1		



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

,	Corporation	/ LLC Recipient Info	rmation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
Street Address						
1	City	State	ZIP		***************************************	
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
	Corporation/LLC Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	☐ Cash☐ Credit		
	Corporation/LLC Name	<u> </u>				
3	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	☐ Cash☐ Credit		
_	Corporation/LLC Name					
	Street Address					
ţ	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	☐ Cash☐ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	☐ Cash☐ Credit		
_	Enter total only if last page of sci	nedule of Disbursements," line 2(e))			0.00	0.0



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

′	Labor Organ	ization Recipient Infor	mation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	e	□ Cash □ Credit		
_	Labor Organization Name					
	Street Address					
2	City	State	Z(P	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	de	□ Credit		
_	Labor Organization Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number Date Contribution Made			☐ Credit		
	Labor Organization Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	de	☐ Credit		
_	Labor Organization Name					
	Street Address					
5	City	State	ZIP	□ Cash	☐ Cash	
	Corporation Commission File Number Date Contribution Made			☐ Credit		
	Enter total only if last page of sch			1	0.00	0.00



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Contribut	or Information	1	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address					
1	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	_		
	Committee Name		Date Refund Received			
	Street Address	***************************************	<u> </u>			
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	<u> </u>	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	ZIP	_		
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule				0.00	0.00



LOANS MADE:

SCHEDULE B(3)(a)

/.	/	Borrower	Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
′		Воггоwer Name					
		Street Address					
l	1	City	State	ZIP			
		City	Ciaic	- 11			
		Guarantor/Endorser Name	Date Loan Made				
		Borrower Name	I				
		Street Address					
	2						
	_	City State ZIP					
		Guarantor/Endorser Name	Date Loan Made				
		Воггоwer Name	I				
		Street Address					
	3						
	3	City	State	ZIP			
		Guarantor/Endorser Name	Date Loan Made				
		Guil and Allicons France	IZIOOSS IVAILLE				
		Borrower Name	L				
		Street Address					
	4		T	Y			
	7	City	State	ZIP			
		Guarantor/Endorser Name	Date Loan Made				
		Guaranto/Endoise Ivanie	Date Loan made				
	_	Borrower Name	I				
		Street Address					
	5						
	٥	City	State	ZIP			
		Guarantor/Endorser Name	Date Loan Made				
	<u> </u>	Enter total only if last page of schedule			I.	0.00	0.00
		(transfer the total received this period to "Summary of Receipts."	line 3(a))			0.00	0.00

Schedule B(3)(a), page ____1 of ____1



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

/.	/	Guarantor	Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
/		Guarantor Name						١
		Street Address		A - A - A - A - A - A - A - A - A - A -				
	1	City	State	ZIP				
		Borrower Name	Date Loan Guaranteed					
		Guarantor Name						
		Street Address						
	2	City	State ZIP					
		Вопоwer Name	Date Loan Guaranteed					
		Guarantor Name						
		Street Address	····					
	3	City	State	ZIP				
		Borrower Name	Date Loan Guaranteed	- MANAGEMENT				
		Guarantor Name						
		Street Address						
	4	City	State	ZIP				
		Borrower Name	Date Loan Guaranteed	<u></u>				
		Guarantor Name						
		Street Address						
	5	City	State	ZIP				
		Borrower Name	Date Loan Guaranteed	1				
\		Enter total only if last page of schedule (transfer the total received this period to 'Summary of Receipts.'	line 3/h))		1	0.00	0.00	,
١.	ı	purament die total received une period to Summary of Receipts,	010//					- /

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



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

Borrower Information Borrower Information Cumulative Amount this Reporting Period Cumulative Amount this Reporting Period Street Advisors Colls Feligiveness Made Col							
Size of Andrews	_	Borrow	ver Information		Amount Forgiven	Amount this	Amount this \
Coly	Γ	Borrower Name		Date Forgiveness Made			
Original Amount of Lian Amount SN Outstanding Borrows Name City City State Date Forgiveness Made Streed Address Date Forgiveness Made Streed Address Date Forgiveness Made Date Forgiveness Made Streed Address Only Original Amount of Lean Amount SN Outstanding Borrows Name Date Forgiveness Made Enter Address Date Forgiveness Made		Street Address			-		
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Enter total only if last page of schedule 0.00 0.00	5	City	State	ZIP			
		Original Amount of Loan	Amount Still Outstanding				
(transfer the total disbursed this period to "Summary of Disbursements." line 3(ci))	H					0.00	0.00



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		<u> </u>			
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	<u> </u>	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		_		

Schedule B(3)(d), page ____ of 1



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

Lender Information Amount of Interest Accrued Lender Name Date Interest Accrued Dispersion Amount Borrowed Lender Name Date Interest Accrued	Cumulative Amount this Election Cycle
Street Address City State Address Lender Name Date Interest Accrued City State Address City State Address City Date Interest Accrued City State City Date Interest Accrued City Date Interest Accrued City Date Interest Accrued City State City Date Interest Accrued City State	
Total City State ZIP Diginal Amount Borrowed Amount SBI Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount SBI Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount SBI Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount SBI Outstanding Lender Name Date Interest Accrued Street Address Street Address City State ZIP Original Amount Borrowed Amount SBI Outstanding Lender Name Date Interest Accrued	
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Lender Name Date Interest Accrued	
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Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP	
Lender Name Date Interest Accrued Street Address City State ZIP	
Street Address City State ZIP	
4 City State ZIP	
City State ZIP	
Crisical Account December 4	
Original Amount Borrowed Amount Still Outstanding	
Lender Name Date Interest Accrued	
Street Address	
5 City State ZIP	
Original Amount Borrowed Amount Still Outstanding	
Enter total only if last page of schedule 0.00	0.0

Schedule B(3)(e), page __1 of 1



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

_	Rec	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address	A A A A A A A A A A A A A A A A A A A]		
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	<u> </u> 		
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address			1		
3						
ľ	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			
	Street Address			м.		
5	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	-		
	Enter total only if last page of sche				0.00	0.00

Schedule B(4), page __1 of 1



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

				•	1 1	
/	Candidate Committe	ee Recipient Inforr	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	 Made			
F	Committee Name	Committee Name				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
-	Committee Name					
	Street Address	erreson narrow viv				
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
_	Committee Name			***************************************		
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
_	Committee Name	Committee Name				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	l Made			
L	Enter total only if last page of schedule				0.00	0.00
1	(transfer the total disbursed this period to "Summary of Disbur	amenta * lina E/a))			1	

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Action Commi	ttee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Commit	ttee Name					
Street A	Address					
1 City		State	ZiP			
Commit	ttee ID Number	Date in-Kind Contribution	I Made			
Commit	ttee Name					
Street A	Address					
2 city		State	ZIP			
Commit	ttee ID Number	Date In-Kind Contribution	Made			
Commit	ttee Name					
Street A	Address		AMMANANA			
3 City		State	ZIP			
Commit	ttee ID Number	Date In-Kind Contribution	Made			
Commit	ttee Name					
Street A	Address					
4 City		State	ZIP			
Commit	ttee ID Number	Date In-Kind Contribution	Made			
Commit	ttee Name	İ.				
Street A	Address					
5 city		State	ZIP			
Commit	ttee ID Number	Date In-Kind Contribution	Made			
Enter	r total only if last page of schedule				0.00	0.00
	r the total disbursed this period to "Summary of Disburse	ments." line 5(b))			1	5.00

Schedule B(5)(b), page ___1 of __1



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Politi	cal Party Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Made			
	Committee Name					
	Street Address					
2	City	State	ZíP			
	Committee ID Number	Date In-Kind Contr	ibution Made			
+	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Made			
_	Committee Name					
	Street Address		Marie Va			
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Made			
	Enter total only if last page o				0.00	0.0



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/						
/	Partnership R	ecipient Informatio	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address		4			
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name	1				
	Street Address]		
2	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Partnership Name					
•	Street Address			1		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
-	Partnership Name					
	Street Address			-		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Partnership Name					
ŀ	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
-	Enter total only if last page of schedule	:			0.00	0.0



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

/				ı	Cumulativa	Cumulativa
	Corporation	/ LLC Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributio	n Made			
	Corporation/LLC Name					
	Street Address	100				
2 city	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	on Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File 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 Contributi	on Made			
	Enter total only if last page of sch	edule			0.00	0.0



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organization	n Recipient Inform	aation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name		ara an indicata a cara a cara a cara a cara a cara a cara a cara a cara a cara a cara a cara a cara a cara a c			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name	•				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution) Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	ı Made			
	Labor Organization Name					
	Street Address					
4		T	T			
	City	State	ZIP			
	Corporation Commission File Number					
	Labor Organization Name					
ŀ	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
_						
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburs	ements.* line 5(f)			0.00	0.00

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



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/					Cumulative	Cumulative
	Expenditure	Recipient Informa	tion	Expenditure Amount	Amount this Reporting Period	Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	- AND STATEMENT STATEMENT		+		
1	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	iduding % 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	_		
L	Candidate(s) Supported (including % supported) Candidate(s) Opposed (in		nduding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		-			
3	City	State	ZIP	4		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	nduding % 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			-		
4	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		
	Enter total only if last page of schedu	<u>l</u>			0.00	0.0
	(transfer the total disbursed this period to "Summary of Disb				0.00	0.0



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

_	Expenditure F	Recipient Informa	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		<u> </u>			
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppos	ed (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed		l ed (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) Oppos	ed (including % opposed)	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			T Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
4	City	State	ZIP	1		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)		☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year)			
_	Enter total only if last page of schedul (transfer the total disbursed this period to "Summary of Disbu				0.00	0.00



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

/	Expenditure I	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	1 10 1 10 10 10 10 10 10 10 10 10 10 10	l			
1	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Re		alled	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	_		
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Rec		alled	_ ☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	···		_		
3	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reca	alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
4	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rece	l alled	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	on, Display, Delivery, or Broadcast Office Held		_ □ Credit		
4		1				



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

Benefitted Candidate Amount Amount this Amoun									
City City	nt this	Cumula Amount Election	Amount this	Amount		ed Candidate	Benefitt		/
City State ZIP Type of Benefit Provided Notes: Condidate Name Date Benefit Provided Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided State ZIP Type of Benefit Provided Notes: City State ZIP Type of Benefit Provided Notes:					Date Benefit Provided			Candidate Name	
Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State Candidate Name Date Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Notes: Candidate Name Date Benefit Provided					1			Street Address	
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Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided								Notes:	
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Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided								Type of Benefit Provided	
Street Address City State ZIP Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided								Notes:	
Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State ZIP A Type of Benefit Provided					Date Benefit Provided			Candidate Name	
Type of Benefit Provided Notes: Candidate Name Date Benefit Provided Street Address City State Zip Type of Benefit Provided								Street Address	
Notes: Candidate Name Date Benefit Provided Street Address City Type of Benefit Provided					ZIP	State		City	
Candidate Name Date Benefit Provided Street Address City Type of Benefit Provided				-				Type of Benefit Provided	
Street Address City State ZIP Type of Benefit Provided				•				Notes:	
4 City State ZIP Type of Benefit Provided					Date Benefit Provided			Candidate Name	
Type of Benefit Provided								Street Address	
					ZIP	State		City	
Notes:						I		Type of Benefit Provided	
								Notes:	
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 9)	0.00		0.00	1			ast page of schedule	Enter total only if last	

Schedule B(9), page ____ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

_	Recipient Co	ommittee Informa	tion	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 Fundralising Event (if applicable) Type of Shared Expense (nse (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address	*****				
2	City State		ZIP	☐ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	□ Cash		
	Date of Joint Fundralsing Event (if applicable)	Type of Shared Expe	nse (if applicable)	☐ Credit		
-	Committee Name		Payment Date			
	Street Address		second visites v	AND AND AND AND AND AND AND AND AND AND		
4	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (If applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)	☐ Credit		
	Enter total only if last page of schedu	le			0.00	0.00



REIMBURSEMENTS MADE:

SCHEDULE B(11)

_	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					I
1	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
_	Name					
	Street Address					İ
2	City	State ZIP			İ	
	Services or Goods Reimbursed		Reimbursement Date		İ	
	Name					
	Street Address					İ
3	City	State	ZIP	- Cook		İ
	Services or Goods Reimbursed	L	Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					İ
4	City	State	ZIP	□ Cash		İ
	Services or Goods Reimbursed	<u> </u>	Reimbursement Date	☐ Cash		İ
	Name					
	Street Address				:	
5	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	1	Reimbursement Date	☐ Casii		
	Enter total only if last page of schedule			<u> </u>	0.00	0.00



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

Rome State Address City State Dise that Debt Advanced Content Physide or Debt Coned Content Debt Advanced C							
City	/	Debt Ir	formation		Amount	Amount this	Cumulative Amount this Election Cycle
Type of Account Psyside or Data Owed Date that Deat Account Date that Deat A		Name					
Type of Account Psystèle or Debt Oved Date that Debt Account Date that Debt		Street Address					
Name Street Address 2 City State	1	City	State	ZIP	_		
Name Street Address 2 City State		Type of Account Payable or Debt Owed		Date that Debt Accrued	1		
Street Address 2 City State ZIP Type of Account Payable or Dritt Owed Date that Debt Accound Name Street Address 3 City State ZIP Type of Account Payable or Dritt Owed Date that Dritt Accound Name Street Address 4 City State ZIP Type of Account Payable or Dritt Owed Date that Dritt Accound Name Street Address 4 City State ZIP Type of Account Payable or Dritt Owed Date that Dritt Accound Name Street Address 5 City State ZIP Type of Account Payable or Dritt Owed Date that Dritt Accound Enter total only if fast page of schedule Enter total only if fast page of schedule			······				
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Type of Account Payable or Debt Owed Name Street Address City State ZIP Type of Account Payable or Debt Owed Date that Debt Accrued Enter total only if last page of schedule O.00 O.00		Name					
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Type of Account Payable or Debt Owed Name Street Address City State ZIP Type of Account Payable or Debt Owed Date that Debt Accrued Enter total only if last page of schedule 0.00 0.00	4	City	State	ZIP			
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City State ZIP Type of Account Payable or Debt Owed Date that Debt Accrued Enter total only if last page of schedule 0.00 0.0		Name					
Type of Account Payable or Debt Owed Date that Debt Accrued Enter total only if last page of schedule 0.00 0.0		Street Address		1			
Enter total only if last page of schedule 0.00 0.0	5	City	State	ZIP	-		
		Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
	_						
Utransfer the total received this period to "Summary of Receipts." line 12)		Enter total only if last page of schedule (transfer the total received this period to 'Summary of Receipts,	• line 12)			0.00	0.0

Schedule B(12), page ____ of ___1



TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monles / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 13)	0.00	0.00

Schedule B(13), page ____ of ___



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipient	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name	ne				
	treet Address					
	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
2	City	<u> </u>	ZIP			
			Disbursement Date	☐ Cash☐ Credit		
	Disbursement Type		Joseph Market Company of the Company			
	Name					
	Street Address					
3	City		ZIP	☐ Cash		
	Disbursement Type	<u> </u>	Disbursement Date	□ Credit		
	Name					
	Street Address					
4	City		ZiP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	A STATE OF THE STA		Disbursement Date	☐ Cash☐ Credit		
	Disbursement Type Disbursement Date					
Enter total only if last page of schedule (transfer the total disbursed this period to *Summary of Disbursements,* line 14)				0.00	0.0	