

RECEIVED

JAN 15 2021



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

COMMITTEE INFORMATION (required):

CITY OF CHANDLER
Committee Information:

Committee Name: Mark Stewart for Chandler City Council

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought:

Statewide Office:
County Office:

State Legislature:
City/Town Office: City of Chandler

Cumulative Report:

Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.
Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below):

REPORTING PERIOD (check one):

Table with 2 columns: REPORTING PERIOD and REPORT DUE. Rows include various quarterly and pre-election reports from 2018 to 2020. The 2020 4th Quarter Report is marked with an 'X'.

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

FINANCIAL SUMMARY (required):

Table with 3 columns: Activity, Cash Activity This Reporting Period, and Election Cycle to Date. Rows (a) through (d) show financial summary data.

Check here if no financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page need be filed.

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity. All reports are deemed to be filed under penalty of perjury by the committee treasurer (all committees) and candidate (candidate committees only). Arizona Secretary of State Revision 12/12/19 (fillable format)



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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

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

Mark Stewart

Printed Name of Committee Treasurer

M Stewart

Signature of Committee Treasurer

1/15/2021

Date



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

SUMMARY OF RECEIPTS (Schedule A):

Receipts	Cash	Equity
1. Monetary Contributions Received		
(a) Individuals - More than \$50	1,000.00	
(b) Individuals - \$50 or Less (Aggregate)		
(c) Candidate Committees		
(d) Political Action Committees		
(e) Political Parties		
(f) Partnerships		
(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
(h) Labor Organizations (PACs & Political Parties Only)		
(i) Candidate's Personal Monies (Candidate Committees Only)		
(j) Monetary Contributions Subtotal (add 1(a) through 1(i))		
(k) Refunds Given Back to Contributors		
(l) Net Monetary Contributions (subtract 1(k) from 1(j))		
2. Loans		
(a) Loans Received		
(b) Forgiveness on Loans Received		
(c) Repayment on Loans Made		
(d) Interest Accrued on Loans Made		
(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
3. Rebates and Refunds Received		
4. Interest Accrued on Committee Monies		
5. In-Kind Contributions Received		
(a) Individuals - More than \$50		
(b) Individuals - \$50 or Less (Aggregate)		
(c) Candidate Committees		
(d) Political Action Committees		
(e) Political Parties		
(f) Partnerships		
(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
(h) Labor Organizations (PACs & Political Parties Only)		
(i) Candidate's Personal Assets or Property (Candidate Committees Only)		
(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		
6. In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7. Extensions of Credit		
(a) Extensions of Credit Received		
(b) Payments on Extensions of Credit Received		
(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8. Joint Fundraising / Shared Expense Payments Received		
9. Payments Received for Goods / Services		
10. Outstanding Accounts Receivable / Debts Owed to Committee		
11. Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12. Miscellaneous Receipts		
13. Total Receipts (cash: add 1(l), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)		



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

SUMMARY OF DISBURSEMENTS (Schedule B):

Disbursements	Cash	Equity
1. Disbursements for Operating Expenses	570.90	
2. Contributions Made		
(a) Candidate Committees		
(b) Political Action Committees		
(c) Political Parties		
(d) Partnerships		
(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
(f) Labor Organizations (PAC & Political Parties Only)		
(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
(h) Contribution Refunds Provided to the Reporting Committee		
(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3. Loans		
(a) Loans Made		
(b) Loan Guarantees Made		
(c) Forgiveness on Loans Made		
(d) Repayment of Loans Received		
(e) Accrued Interest on Loans Received		
(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4. Rebates and Refunds Made (Non-Contributions)		
5. Value of In-Kind Contributions Provided		
(a) Candidate Committees		
(b) Political Action Committees		
(c) Political Parties		
(d) Partnerships		
(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
(f) Labor Organizations (PAC & Political Parties Only)		
(j) Contributions Subtotal (add 5(a) through 5(f))		
6. Independent Expenditures Made		
7. Ballot Measure Expenditures Made		
8. Recall Expenditures Made		
9. Support Provided to Party Nominees (Political Parties Only)		
10. Joint Fundraising / Shared Expense Payments Made		
11. Reimbursements Made		
12. Outstanding Accounts Payable / Debts Owed by Committee		
13. Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14. Miscellaneous Disbursements		
15. Aggregate of Disbursements - \$250 or Less		
16. Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)		



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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

SCHEDULE A(1)(a)

Individual Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Justin and Katherine Riggs		Date Contribution Received 10/26/2020	1,000.00	1,000.00	1,000.00
	Street Address 3149 E Vaughn Ave					
	City Gilbert	State AZ	ZIP 85234			
	Occupation Self	Employer Sekf				
2	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(a))</small>						

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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

SCHEDULE A(1)(b)

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

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

Candidate Committee Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(c))</small>						

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

Political Action Committee Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(d))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

Political Party Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(e))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

Partnership Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
2	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
3	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
4	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
5	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(f))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

Corporation / LLC Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
5	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(a))</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

Labor Organization Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
2	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
3	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
4	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
5	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(h))</small>						



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

Candidate Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Name		Date Contribution Received				
	Street Address						
	City	State	ZIP				
	Occupation	Employer					
2	Name		Date Contribution Received				
	Street Address						
	City	State	ZIP				
	Occupation	Employer					
3	Name		Date Contribution Received				
	Street Address						
	City	State	ZIP				
	Occupation	Employer					
4	Name		Date Contribution Received				
	Street Address						
	City	State	ZIP				
	Occupation	Employer					
5	Name		Date Contribution Received				
	Street Address						
	City	State	ZIP				
	Occupation	Employer					
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(0))</small>							

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

Contributor Information			Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name				
	Date Contribution Refunded				
	Street Address				
	City	State			
ID Number (if applicable)		Date of Original Contribution			
2	Name				
	Date Contribution Refunded				
	Street Address				
	City	State			
ID Number (if applicable)		Date of Original Contribution			
3	Name				
	Date Contribution Refunded				
	Street Address				
	City	State			
ID Number (if applicable)		Date of Original Contribution			
4	Name				
	Date Contribution Refunded				
	Street Address				
	City	State			
ID Number (if applicable)		Date of Original Contribution			
5	Name				
	Date Contribution Refunded				
	Street Address				
	City	State			
ID Number (if applicable)		Date of Original Contribution			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(k))</small>					



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

LOANS RECEIVED:

SCHEDULE A(2)(a)

Lender Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
2	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
3	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
4	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
5	Lender Name	Date Loan Received			
	Street Address				
	City	State ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(e))</small>					



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

Lender Information			Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name		Date Forgiveness Received		
	Street Address				
	City	State	ZIP		
	Original Amount of Loan	Amount Still Outstanding			
2	Lender Name		Date Forgiveness Received		
	Street Address				
	City	State	ZIP		
	Original Amount of Loan	Amount Still Outstanding			
3	Lender Name		Date Forgiveness Received		
	Street Address				
	City	State	ZIP		
	Original Amount of Loan	Amount Still Outstanding			
4	Lender Name		Date Forgiveness Received		
	Street Address				
	City	State	ZIP		
	Original Amount of Loan	Amount Still Outstanding			
5	Lender Name		Date Forgiveness Received		
	Street Address				
	City	State	ZIP		
	Original Amount of Loan	Amount Still Outstanding			
Enter total only if last page of schedule					
<small>(transfer the total received this period to "Summary of Receipts," line 2(b))</small>					

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

Borrower Information			Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name				
	Date Repayment Received				
	Street Address				
	City	State			
Original Amount Borrowed		Amount Still Outstanding			
2	Borrower Name				
	Date Repayment Received				
	Street Address				
	City	State			
Original Amount Borrowed		Amount Still Outstanding			
3	Borrower Name				
	Date Repayment Received				
	Street Address				
	City	State			
Original Amount Borrowed		Amount Still Outstanding			
4	Borrower Name				
	Date Repayment Received				
	Street Address				
	City	State			
Original Amount Borrowed		Amount Still Outstanding			
5	Borrower Name				
	Date Repayment Received				
	Street Address				
	City	State			
Original Amount Borrowed		Amount Still Outstanding			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(c))</small>					

Schedule A(2)(c), page ___ of



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

Payor Information			Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
2	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
3	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
4	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
5	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 3)</small>					

Schedule A(3), page ___ of



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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)		



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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

SCHEDULE A(5)(a)

Individual Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
2	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(a))</small>						

*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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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 <small>(transfer the total received this period to "Summary of Receipts," line 1(b))</small>		

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

Candidate Committee Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(c))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

Political Action Committee Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule						
<small>(transfer the total received this period to "Summary of Receipts," line 5(d))</small>						



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

Political Party Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(e))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

Partnership Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
2	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
3	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
4	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
5	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule <small>(Transfer the total received this period to "Summary of Receipts," line 5(f))</small>						

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

Corporation / LLC Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
5	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(a))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

Labor Organization Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
2	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
3	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
4	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
5	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(h))</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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
1	Name				
	Date In-Kind Contribution Received				
	Street Address				
	City	State			
Asset or Property Contributed					
2	Name				
	Date In-Kind Contribution Received				
	Street Address				
	City	State			
Asset or Property Contributed					
3	Name				
	Date In-Kind Contribution Received				
	Street Address				
	City	State			
Asset or Property Contributed					
4	Name				
	Date In-Kind Contribution Received				
	Street Address				
	City	State			
Asset or Property Contributed					
5	Name				
	Date In-Kind Contribution Received				
	Street Address				
	City	State			
Asset or Property Contributed					
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(0))</small>					

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

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

SCHEDULE A(6)

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

Creditor Information			Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Provided on Credit					Date of Extension of Credit
2	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Provided on Credit					Date of Extension of Credit
3	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Provided on Credit					Date of Extension of Credit
4	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Provided on Credit					Date of Extension of Credit
5	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Provided on Credit					Date of Extension of Credit
Enter total only if last page of schedule						
<small>(transfer the total received this period to "Summary of Receipts," line 7(a))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

Creditor Information			Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Originally Provided on Credit					Date of Original Extension of Credit
2	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Originally Provided on Credit					Date of Original Extension of Credit
3	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Originally Provided on Credit					Date of Original Extension of Credit
4	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Originally Provided on Credit					Date of Original Extension of Credit
5	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Originally Provided on Credit					Date of Original Extension of Credit
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 7(b))</small>						



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payor Committee Information				Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
2	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
3	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
4	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
5	Committee Name		Payment Date				
	Street Address						
	City	State	ZIP				
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 8)</small>							



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

Payor Information			Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Purchased					Payment Date
2	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Purchased					Payment Date
3	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Purchased					Payment Date
4	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Purchased					Payment Date
5	Name					
	Street Address					
	City	State				ZIP
	Services or Goods Purchased					Payment Date
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 9)</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Name					
	Street Address					
	City	State				ZIP
	Type of Account Receivable or Debt Owed					Date that Debt Accrued
2	Name					
	Street Address					
	City	State				ZIP
	Type of Account Receivable or Debt Owed					Date that Debt Accrued
3	Name					
	Street Address					
	City	State				ZIP
	Type of Account Receivable or Debt Owed					Date that Debt Accrued
4	Name					
	Street Address					
	City	State				ZIP
	Type of Account Receivable or Debt Owed					Date that Debt Accrued
5	Name					
	Street Address					
	City	State				ZIP
	Type of Account Receivable or Debt Owed					Date that Debt Accrued
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 10)</small>						

Schedule A(10), page ___ of ___



STATE OF ARIZONA
 COMMITTEE CAMPAIGN
 FINANCE REPORT

COMMITTEE ID NUMBER
17-11

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)		



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

Source Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
2	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
3	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
4	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
5	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 12)</small>						



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information				Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Mesquite Storage	Disbursement Date 12/31/2020		412.95 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address 5959 S Gilbert Rd					
	City Chandler	State AZ	ZIP 85249			
	Type of Operating Expense Paid Storage unit	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
2	Name Phuket Thai	Disbursement Date 10/22/2020		25.33 <input checked="" type="checkbox"/> Cash <input checked="" type="checkbox"/> Credit	39.88	
	Street Address S Arizona Ave					
	City Chandelr	State AZ	ZIP 85225			
	Type of Operating Expense Paid Campaign meeting	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
3	Name Stillery Chandler	Disbursement Date 10/13/2020		39.88 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit	39.88	
	Street Address S Arizona Ave					
	City Chandler	State AZ	ZIP 85225			
	Type of Operating Expense Paid Meeting	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
4	Name Venmo	Disbursement Date 11/9/2020		92.70 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit	92.70	
	Street Address 2211 n 1st					
	City San Jose	State CA	ZIP 95131			
	Type of Operating Expense Paid Poll workers	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
5	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 1)</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

Candidate Committee Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
Enter total only if last page of schedule						
<small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(a))</small>						

Schedule B(2)(a), page ___ of ___



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

Political Action Committee Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
Enter total only if last page of schedule						
<small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(b))</small>						

Schedule B(2)(b), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

Political Party Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(c))</small>						

Schedule B(2)(c), page ___ of ___



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

Partnership Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Partnership Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(d))</small>						

Schedule B(2)(d), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

Corporation / LLC Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Corporation/LLC Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(e))</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

Labor Organization Recipient Information				Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Labor Organization Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(f))</small>						



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

Contributor Information				Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
2	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
3	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
4	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
5	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(h))</small>						



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

LOANS MADE:

SCHEDULE B(3)(a)

Borrower Information				Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name		Date Loan Made			
2	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name		Date Loan Made			
3	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name		Date Loan Made			
4	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name		Date Loan Made			
5	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name		Date Loan Made			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 3)</small>						



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

Guarantor Information				Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
2	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
3	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
4	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
5	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name		Date Loan Guaranteed			
Enter total only if last page of schedule						
<small>(transfer the total received this period to "Summary of Receipts," line 3(b))</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

Borrower Information				Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
2	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
3	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
4	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
5	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 3(c))</small>						

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

Lender Information				Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
2	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
3	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
4	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
5	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
Enter total only if last page of schedule						
<small>(transfer the total disbursed this period to "Summary of Disbursements," line 3(d))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

Lender Information			Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name	Date Interest Accrued			
	Street Address				
	City	State ZIP			
	Original Amount Borrowed	Amount Still Outstanding			
2	Lender Name	Date Interest Accrued			
	Street Address				
	City	State ZIP			
	Original Amount Borrowed	Amount Still Outstanding			
3	Lender Name	Date Interest Accrued			
	Street Address				
	City	State ZIP			
	Original Amount Borrowed	Amount Still Outstanding			
4	Lender Name	Date Interest Accrued			
	Street Address				
	City	State ZIP			
	Original Amount Borrowed	Amount Still Outstanding			
5	Lender Name	Date Interest Accrued			
	Street Address				
	City	State ZIP			
	Original Amount Borrowed	Amount Still Outstanding			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 3(e))</small>					

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

Recipient Information			Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name of Original Payor				
	Date Rebate/Refund Made				
	Street Address				
	City	State			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
2	Name of Original Payor				
	Date Rebate/Refund Made				
	Street Address				
	City	State			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
3	Name of Original Payor				
	Date Rebate/Refund Made				
	Street Address				
	City	State			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
4	Name of Original Payor				
	Date Rebate/Refund Made				
	Street Address				
	City	State			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
5	Name of Original Payor				
	Date Rebate/Refund Made				
	Street Address				
	City	State			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 4)					

Schedule B(4), page ___ of



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

Candidate Committee Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule						
<small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(a))</small>						

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

Political Action Committee Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule						
<small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(b))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

Political Party Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	City	State				ZIP
	Committee ID Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(c))</small>						

Schedule B(5)(c), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

Partnership Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
2	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
3	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
4	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
5	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(d))</small>						

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

Labor Organization Recipient Information				Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
2	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
3	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
4	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
5	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(f))</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

Expenditure Recipient Information				Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
1	Recipient Name		Mode of Advertising (TV, mail, etc)		<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address							
	City	State	ZIP					
	Candidate(s) Supported (including % supported)			Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year	Office Sought				
2	Recipient Name		Mode of Advertising (TV, mail, etc)		<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address							
	City	State	ZIP					
	Candidate(s) Supported (including % supported)			Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year	Office Sought				
3	Recipient Name		Mode of Advertising (TV, mail, etc)		<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address							
	City	State	ZIP					
	Candidate(s) Supported (including % supported)			Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year	Office Sought				
4	Recipient Name		Mode of Advertising (TV, mail, etc)		<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address							
	City	State	ZIP					
	Candidate(s) Supported (including % supported)			Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year	Office Sought				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 6)</small>								

Schedule B(6), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

Expenditure Recipient Information				Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)			
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year			
2	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)			
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year			
3	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)			
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year			
4	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)		Ballot Measure(s) Opposed (including % opposed)			
	Date of First Publication, Display, Delivery, or Broadcast		Election Month/Year			
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 7)						

Schedule B(7), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

Expenditure Recipient Information				Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled					
	Date of First Publication, Display, Delivery, or Broadcast	Office Held					
2	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled					
	Date of First Publication, Display, Delivery, or Broadcast	Office Held					
3	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled					
	Date of First Publication, Display, Delivery, or Broadcast	Office Held					
4	Recipient Name		Mode of Advertising (TV, mail, etc)	<input type="checkbox"/> Cash <input type="checkbox"/> Credit			
	Street Address						
	City	State	ZIP				
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled					
	Date of First Publication, Display, Delivery, or Broadcast	Office Held					
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 8)</small>							



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

Benefitted Candidate				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	Candidate Name		Date Benefit Provided				
	Street Address						
	City	State	ZIP				
	Type of Benefit Provided						
	Notes:						
2	Candidate Name		Date Benefit Provided				
	Street Address						
	City	State	ZIP				
	Type of Benefit Provided						
	Notes:						
3	Candidate Name		Date Benefit Provided				
	Street Address						
	City	State	ZIP				
	Type of Benefit Provided						
	Notes:						
4	Candidate Name		Date Benefit Provided				
	Street Address						
	City	State	ZIP				
	Type of Benefit Provided						
	Notes:						
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 9)</small>							

Schedule B(9), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

Recipient Committee Information				Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
2	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
3	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
4	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
5	Committee Name		Payment Date	<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)		Type of Shared Expense (if applicable)			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 10)</small>						

Schedule B(10), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

REIMBURSEMENTS MADE:

SCHEDULE B(11)

Recipient Information				Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
2	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 11)</small>						



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
17-11

OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

Debt Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
2	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
3	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
4	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
5	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 <small>(transfer the total received this period to "Summary of Receipts," line 12)</small>						



STATE OF ARIZONA
 COMMITTEE CAMPAIGN
 FINANCE REPORT

COMMITTEE ID NUMBER
17-11

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

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



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
17-11

MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

Recipient Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
2	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 12)</small>						

Schedule B(12), page ___ of ___