

POLITICAL COMMITTEE
CITY OF Chandler
CAMPAIGN FINANCE REPORT 2015
August Special Election

FOR OFFICE USE ONLY

RECEIVED

SEP 2 2015

CITY OF CHANDLER
 CITY CLERK

1. Elect Nora Ellen

Full Name of Committee
 883 N. Sicily Drive

Address
 Chandler 85226 Maricopa 480.496.7114

City ZIP Code County Phone

2. Sponsoring Organization or Candidate and office

Name of Candidate and Office Sought (if applicable)

E-Mail Address Fax #

3A. ID#

4. REPORTING PERIOD (Please check appropriate box)

DUE BETWEEN

- June 30 Report - For Period of Nov. 25, 2014 thru May 31, 2015 June 1, 2015 and June 30, 2015
- Pre- Election Report - For Period of June 1, 2015 thru August 13, 2015 August 14, 2015 and August 21, 2015
- Post-Election Report - For Period of August 14, 2015 thru September 14, 2015 September 15, 2015 and September 24, 2015
- **January 31, Report - For Period of Sept. 15, 2015 thru December 31, 2015 J anuary 1, 2016 and January 31, 2016
-
-

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		
5b Cash on Hand at the Beginning of this Reporting Period	\$20,500.61	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$579.94	\$58,523.60
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	\$21,080.55	\$58,523.60
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		\$0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$373.98	\$37,817.03
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	\$20,706.57	\$20,706.57

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Elect Nora Ellen
 3. Report covering period from 6/1/2015 Thru 8/13/2015

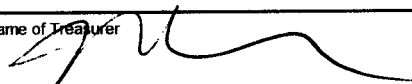
2. ID#

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	\$579.94	\$40,292.94
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	0	\$840.00
(c) Political Committees (Total from Schedule B)	0	\$7,240.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	\$579.94	\$48,372.94
(e) Refund of contributions (Total from Schedule F-2)	0	0
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	\$579.94	\$48,372.94
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0	\$9,100.00
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total Loans [add 5(a) and 5(b)]	0	\$9,100.00
6. In-kind contributions (Total from Schedule E)	0	\$1,050.66
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	0
8. Total Receipts [add 4(f), 5(c), 6, and 7]	\$579.94	\$58,523.60
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	\$373.98	\$27,666.37
10. Independent Expenditures (Total from Schedule D-1)	0	0
11. Value of In-kind expenditures (Total from Schedule E)	0	\$1,050.66
12. Loans made by reporting committee (Total from Schedule D-2)	0	0
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	\$9,100.00
(b) Repayment of all other loans (Total from Schedule D-5)	0	0
(c) Total Loan Repayments [add 13(a) and 13(b)]	0	\$9,100.00
14. Transfers to other political committees (Total from Schedule D-6)	0	0
15. Any other disbursement (Total from Schedule D-7)	0	0
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	\$373.98	\$37,817.03
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	0
18. Total disbursements [subtract line 17 from line 16]	\$373.98	\$37,817.03
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0	0

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Nora Ellen

Type or Print Name of Treasurer



8/21/2015

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

1. Committee Name Elect Nora Ellen

3. Report covering period from 6/1/2015 thru 8/13/2015

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE															
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																		
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Unknown</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	Unknown			STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER		Unknown	\$579.94	\$579.94
LAST	FIRST	MI																	
Unknown																			
STREET ADDRESS																			
CITY	STATE	ZIP																	
OCCUPATION	EMPLOYER																		
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER							
LAST	FIRST	MI																	
STREET ADDRESS																			
CITY	STATE	ZIP																	
OCCUPATION	EMPLOYER																		
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER							
LAST	FIRST	MI																	
STREET ADDRESS																			
CITY	STATE	ZIP																	
OCCUPATION	EMPLOYER																		
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER							
LAST	FIRST	MI																	
STREET ADDRESS																			
CITY	STATE	ZIP																	
OCCUPATION	EMPLOYER																		
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER							
LAST	FIRST	MI																	
STREET ADDRESS																			
CITY	STATE	ZIP																	
OCCUPATION	EMPLOYER																		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		\$579.94																

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID #

1. Committee Name Elect Nora Ellen

3. Report covering period from June 1, 2015 thru August 13, 2015

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP iPower	6/3/2015	\$33.98
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Web Service		
b.	NAME, ADDRESS, CITY, STATE AND ZIP National Federation of Republican Women	7/16/15	\$40.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Convention Meeting		
c.	NAME, ADDRESS, CITY, STATE AND ZIP RAPAC Event 1363 South Vineyard Mesa, Arizona 85210	7/22/15	\$50.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Fundraiser		
d.	NAME, ADDRESS, CITY, STATE AND ZIP National Federation of Republican Women	7/26/15	\$225.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED National Convention		
e.	NAME, ADDRESS, CITY, STATE AND ZIP National Federation of Republican Women	7/26/15	\$25.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED National Convention		
f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		\$373.98

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit