

CHANDLER CITY CLERK JAN 18 2024 PM3:24

COMMITTEE ID NUMBER
C23-01

☐ Special District Office:

☐ School Board District:

COMM	THE INFORMATION (required).		
	Committee Information:	Committee Name:	Cicely for Chandler
CANDID	ATE INFORMATION (only if filing	as a candidate comr	mittee):

☐ County Office:

☐ City/Town Office: Chandler City Council

Cumulative Report:

Office Sought:

☐ Check he	ere if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below
Cumulative r	reporting period start date (which supersedes the start date for the Reporting Period selected below):
REPORTING PERIOD (d	check one):

	DEPORTING PERIOR	DEBORT DUE
	REPORTING PERIOD	REPORT DUE
	2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023	February 26, 2023 to March 4, 2023
	2023 March Post-Election (Q1) Report (Local Only): February 26, 2023 to March 31, 2023	April 1, 2023 to April 15, 2023
	2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
	2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
	2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 15, 2023
	2023 Quarter 2 Report: April 1, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
	2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
	2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
	2023 Quarter 3 Report: July 1, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
	2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
	2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
1	2023 Quarter 4 Report: October 6, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
	2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024	February 25, 2024 to March 2, 2024
	2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
	2024 Quarter 1 Report: January 1, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
	2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024	May 5, 2024 to May 11, 2024
	2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
	2024 Quarter 2 Report: April 1, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
	2024 August Pre-Primary Election Report: July 1, 2024 to July 20, 2024	July 21, 2024 to July 27, 2024
	2024 August Post-Primary Election (Q3) Report: July 21, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
	2024 Quarter 3 Report: July 1, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
	2024 November Pre-General Election Report: October 1, 2024 to October 19, 2024	October 20, 2024 to October 26, 2024
	2024 November Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024	January 1, 2025 to January 15, 2025
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination
$\overline{}$	*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§§ 1-24	3(A), 1-301 and 1-303.

## FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	o	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	810.00	810.00
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	13.59	13.59
(d) = Balance at close of reporting period	796.41	
<ul> <li>Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must lead to be filed.</li> </ul>	De completed, but only this	



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.

Cicely Rocha-Miller		01/18/23
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

### SUMMARY OF RECEIPTS (Schedule A):

/	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100	100.00	
	(b) In-State Individuals - \$100 or Less (Aggregate)	110.00	
<del></del>	(c) Out-of-State Individuals	0	
	(d) Candidate Committees	0	
	(e) Political Action Committees	0	
	(f) Political Parties	0	
	(g) Partnerships	0	
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)	0	
	(i) Labor Organizations (PACs & Political Parties Only)	0	
	(j) Candidate's Personal Monies (Candidate Committees Only)	600.00	
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))	810.00	
	(I) Refunds Given Back to Contributors	0	
	(m) Net Monetary Contributions (subtract 1(l) from 1(k))	810.00	
2.	Loans		
<u></u> -	(a) Loans Received	0	
	(b) Forgiveness on Loans Received		0
	(c) Repayment on Loans Made	0	
	(d) Interest Accrued on Loans Made	0	
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	0	
3.	Rebates and Refunds Received	0	
4.	Interest Accrued on Committee Monies	0	
5.	In-Kind Contributions Received		
	(a) In-State Individuals - More than \$100		0
	(b) In-State Individuals - \$100 or Less (Aggregate)		0
	(c) Out-of-State Individuals		0
	(d) Candidate Committees		0
	(e) Political Action Committees		0
	(f) Political Parties		0
	(g) Partnerships		0
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		0
	(i) Labor Organizations (PACs & Political Parties Only)		0
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		0
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		0
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		0
7.	Extensions of Credit		
	(a) Extensions of Credit Received .		0
	(b) Payments on Extensions of Credit Received		0
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		0
0		0	
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services	0	-
10.	Outstanding Accounts Receivable / Debts Owed to Committee		0
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)	0	0
12.	Miscellaneous Receipts (use cash and/or equity asapplicable)	0	0
13.	Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)	810.00	

### SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	0	
2.	Contributions Made		
	(a) Candidate Committees	0	
	(b) Political Action Committees	0	
	(c) Political Parties	0	
	(d) Partnerships	0	
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)	0	
	(f) Labor Organizations (PAC & Political Parties Only)	0	
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	0	
	(h) Contribution Refunds Provided to the Reporting Committee	0	
***************************************	(i) Monetary Contributions Total (subtract 2(h) from 2(g))	0	
3.	Loans		
	(a) Loans Made	0	
-	(b) Loan Guarantees Made		0
	(c) Forgiveness on Loans Made		0
***************************************	(d) Repayment of Loans Received	0	
	(e) Accrued Interest on Loans Received	0	
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))	0	0
4.	Rebates and Refunds Made (Non-Contributions)	0	0
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		0
	(b) Political Action Committees		0
	(c) Political Parties		0
	(d) Partnerships		0
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		0
	(f) Labor Organizations (PAC & Political Parties Only)		0
	(g) Contributions Subtotal (add 5(a) through 5(f))		0
6.	Independent Expenditures Made	0	
7.	Ballot Measure Expenditures Made	0	
8.	Recall Expenditures Made	0	
9.	Support Provided to Party Nominees (Political Parties Only)	0	
10.	Joint Fundraising / Shared Expense Payments Made	0	
11.	Reimbursements Made	0	
12.	Outstanding Accounts Payable / Debts Owed by Committee		0
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)	0	0
14.	Miscellaneous Disbursements	0	0
15.	Aggregate of Disbursements - \$250 or Less	0	0
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)	0	0

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

SCHEDULE A(1)(a)

/	Ind	ividual Contributor Inform	aation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cyc
	<sub>Name</sub> Moriah Colon		Date Contribution Received 10/28/24	100.00	100.00	100.00
	Street Address 36575 W. Santa Maria St					
1	city Maricopa	state Arizona	zip 85138			
	Occupation	Employer	•			
	Name Cicely Rocha	<u></u>	Date Contribution Received	610.00	610.00	610.00
	Street Address 310 West San Marcos Dr.		<b>'</b>	-		
2	c <sub>ity</sub> Chandler	State AZ	zip 85225	Ē		
	Occupation	Employer				
	Name		Date Contribution Received			THE TAX AND THE TA
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
1	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
-	Occupation	Employer				
1	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
-	Occupation	Employer			- 1000/mil	
4	Enter total only if last page of schedule					

\*If in-state individual contributions of \$100 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

Schedule A(1)(a), page\_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):\*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from In-State Individuals - \$100 or Less	110.00	110.00
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	110.00	110.00

<sup>\*</sup>If in-state individual contributions of more than \$100 are listed on Schedule A(1)(a), do not include them.

Schedule A(1)(b), page\_\_\_\_ of \_\_\_\_



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

SCHEDULE A(1)(c)

/	Individual Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address	<u> </u>				
1	City	State	ZIP			
	Occupation	Employer				
	Name	<u> </u>	Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name	1	Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address	<u> </u>				
4	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	Name	Date Contribution Received				
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
1	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," li	ne 1(c))		0	0



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/		Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name						
	Street Address						
1	City		State	ZĮP			
	Committee ID Number		Date Contribution Receive	Zd			
	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		-		
	Committee ID Number		Date Contribution Receive				
	Committee Name						
	Street Address						
4	City		State	ZIP			
	Committee ID Number		Date Contribution Receive	I ed	-		
_	Committee Name		L				
	Street Address						
5	City		State	ZIP			
	Committee ID Number		Date Contribution Receive	<u>L</u>			
	Enter total only if I	ast page of schedule					
	(transfer the total rec	eived this period to "Sum	mary of Receipts," I	ine 1(d))		0	0

Schedule A(1)(d), page\_\_\_\_ of \_\_\_



#### MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/	Political Act	ion Committee Contributor I	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved			
	Committee Name					
	Street Address			_		
2	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receive	ved			
_	Committee Name					
	Street Address	· · · · · · · · · · · · · · · · · ·	_			
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved			
	Committee Name					
	Street Address	WANTA - WANTA		_		
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	Date Contribution Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
-	Enter total only if last page of	schedule				
	Enter total only if last page of (transfer the total received this pe	eriod to "Summary of Receipts,"	line 1(e))		0	0

Schedule A(1)(e), page\_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

Committee Name  City State Address  Committee ID Number		Political Party	y Contributor Informa	ition	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name  Severt Address  City State 2IP  Committee Name  Severt Address  City State 2IP  Committee Name  Street Address  City State 2IP  Committee Name  Street Address  City State 2IP  Committee Name  Street Address  Committee Name		Committee Name					
Committee ID Number  Committee Name  Street Adde ass  City State ZIP  Committee ID Number Oate Contribution Received  City State ZIP  Committee ID Number Oate Contribution Received		Street Address					
Committee Name  Street Address  Zire  Committee ID Number  Date Combitation Received  Committee ID Number  Date Combitation Received  Committee Name  Street Address  Committee ID Number  Date Combitation Received  Committee Name  Street Address  Committee Name  Street Address  Committee ID Number  Date Combitation Received  Committee Name  Street Address  Committee ID Number  Date Combitation Received  Committee ID Number  Street Address  Committee ID Number  Date Combitation Received  Committee ID Number  Date Combitation Received  Committee ID Number  Date Combitation Received	1	City	State	ZIP	-		
Shreet Address  Zip  Committee ID Number  Date Contribution Received  Committee ID Number  Street Address  Committee ID Number  Date Contribution Received		Committee ID Number	Date Contribution Receiv	ved			
Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received  Committee ID Number  Committee Name  Street Address  City  Committee ID Number  Committee ID Number		Committee Name					# COOD CO.
Committee ID Number  Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee ID Number Date Contribution Received  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  Committee ID Number Date Contribution Received		Street Address			_		
Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received	2	City	State	ZIP			
Street Address  Clty State ZIP  Committee ID Number Date Contribution Received  Street Address  Clty State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP		Committee ID Number	Date Contribution Recei	ved			
State   ZIP	_	Committee Name					
Committee ID Number  Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  City State ZIP		Street Address					
Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  City State ZIP	3	City	State	ZIP			
Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP		Committee ID Number	Date Contribution Recei	ved		7	
4 City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP		Committee Name					
Committee ID Number  Date Contribution Received  Committee Name  Street Address  City  State  ZIP  Date Contribution Received		Street Address			annual property of the second		
Committee ID Number  Date Contribution Received  Committee Name  Street Address  City  State  ZIP	4	Ch	State	710			
Committee Name  Street Address  City State ZIP					-		
Street Address  City State ZIP		Committee ID Number	Date Contribution Recei	ved			
5 City State ZIP		Committee Name					
City State ZIP	_	Street Address					
Committee ID Number Date Contribution Received	5	City	State	ZĮP			
		Committee ID Number	Date Contribution Recei	ved			

Schedule A(1)(f), page\_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnersl	nip Contributor Informat	ion	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 Receiv	red	_		
	Conputation Commission ( the National	Date Continuation Necesia				
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved			
_						
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Partnership Name					
	Street Address				71	
4	C.	Tou	ZIP			
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name	i	<del></del>			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of sche (transfer the total received this period to	edule o "Summary of Receipts," li	ine 1(g))		0	0

### MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

Corporation Commission File Number  Corporation Commission File Number  Corporation Commission File Number  Cotyporation Commission File Number  Cotyporation Commission File Number  Cotyporation Commission File Number  Date Contribution Received	outor Information Amount Received Cumulative Amount this Amount the Reporting Period Election Cyc
Corporation Commission File Number  Date Contribution Received  Corporation LLC Name  Streat Address  Corporation Commission File Number  Date Contribution Received	
Corporation Commission File Number  Date Contribution Received  Corporation LLC Name  Street Address  City State 2IP  Corporation Commission File Number Date Contribution Received  Street Address  Corporation Commission File Number Date Contribution Received	
Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Street Address  City State ZIP  Corporation/LLC Name  Street Address  Street Address  Corporation Commission File Number Date Contribution Received	ZIP
Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation Commission File Number Date Contribution Received  City State ZIP  Corporation Commission File Number Date Contribution Received	intribution Received
Corporation Commission File Number  Date Contribution Received  Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address  City State ZIP  Corporation/LLC Name  Street Address  City State ZIP  Corporation/LLC Name  Street Address  City State ZIP  Corporation/LLC Name  Street Address  State ZIP  Corporation/LLC Name  Street Address  State ZIP	
Corporation Commission File Number  Date Contribution Received  Corporation/LLC Name  Street Address  City State ZiP  Corporation Commission File Number Date Contribution Received  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address  Corporation/LLC Name  Street Address	
Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address  City State ZIP  Corporation/LLC Name  Street Address  Corporation Commission File Number Date Contribution Received  Street Address  Street Address  Street Address  Street Address	ZIP
Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received	ontribution Received
Corporation Commission File Number  Date Contribution Received  Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation Commission File Number Date Contribution Received  Street Address	
Corporation Commission File Number  Date Contribution Received  Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation Commission File Number Date Contribution Received  Street Address	
Corporation/LLC Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address	ZIP
Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address	ontribution Received
City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation/LLC Name  Street Address	
Corporation Commission File Number  Date Contribution Received  Corporation/LLC Name  Street Address	
Corporation/LLC Name  Street Address	ZIP
Street Address	ontribution Received
5	
5 City State ZIP	
	ZIP
Corporation Commission File Number Date Contribution Received	ontribution Received

Schedule A(1)(h), page\_\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

Labor Organization Name    Labor Organization Name   Election Cy							
Liber Organization Name	/	Z Labor Organiza	tion Contributor Infori	nation	Amount Received	Amount this	Cumulative Amount this Election Cycle
Cuty   Blate   ZIP		Labor Organization Name				1 0	
Coperation Commission File Number  Date Contribution Received  Labor Organization Name  Steed Address  2 City State 2IP  Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Steed Address  3 City State 2IP  Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Steed Address  3 City State 2IP  Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Steed Address  5 City State 2IP  Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Steed Address  5 City State 2IP  Corporation Commission File Number  Date Contribution Received  Date Contribution Received		Street Address					
Corporation Commission File Number  Date Contribution Reserved  Labor Organization Name  Deed Address  ZiP  Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Deed Address  3 Ohy State ZiP  Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Labor Organization Name  Labor Organization Name  Date Contribution Received  Labor Organization Name  Street Address  4 Only State ZiP  Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Street Address  Street Address  Street Address  Street Address  Street Address  Street Address  Corporation Commission File Number  Date Contribution Received  Date Contribution Received  Date Contribution Received	1	City	State	ZIP	_		
Labor Organization Name  Street Address  Zip  Carporation Commission File Number  Date Contribution Received  Labor Organization Name  Street Address  3 Cay  Carporation Commission File Number  Carporation Commission File Number  Carporation Commission File Number  Carporation Commission File Number  Date Contribution Received  Labor Organization Name  Street Address  4 City  Carporation Commission File Number  Date Contribution Received  Labor Organization Name  Street Address  5 City  Carporation Commission File Number  Date Contribution Received  Lober Organization Name  Street Address  5 City  Cooperation Commission File Number  Date Contribution Received  Date Contribution Received							
Street Address  City State 2IP  Corporation Commission File Number Date Contribution Resolved  Labor Organization Name  Street Address  City State 2IP  Corporation Commission File Number Date Combibition Resolved  Lubor Organization Name  Street Address  City State 2IP  Corporation Name  Street Address  Lubor Organization Name  Street Address  Labor Organization Name  Street Address  City State 2IP  Corporation Commission File Number Date Combibition Resolved  Labor Organization Name  Street Address  City State 2IP  Corporation Commission File Number Date Combibition Resolved  Corporation Commission File Number Date Combibition Resolved  Corporation Commission File Number Date Combibition Resolved		Corporation Commission File Number	Date Contribution Receive	ed			
2 City Corporation Commission File Number  Date Contribution Reselved  Labor Organization Name  Street Address  City Corporation Commission File Number  Date Contribution Reselved  Labor Organization Name  Street Address  City Corporation Commission File Number  Date Contribution Reselved  Labor Organization Name  Street Address  City Corporation Commission File Number  Date Contribution Reselved  Date Contribution Reselved  Corporation Commission File Number  Date Contribution Reselved  Corporation Commission File Number  Oncorporation Commission File Number		Labor Organization Name	I				
Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received		Street Address		· · · · · · · · · · · · · · · · · · ·	-		
Labor Organization Name  Steet Address  Cary State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Steet Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Steet Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Steet Address  Steet Address  Steet Address  Date Contribution Received  Date Contribution Received	2	City	State	ZIP			
Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Corporation Commission File Number Date Contribution Received		Corporation Commission File Number	Date Contribution Receiv	ed			
City   State   ZIP		Labor Organization Name					
Corporation Commission File Number  Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  City State ZIP  Corporation Commission File Number Date Contribution Received		Street Address			-		
Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Street Address  Tity State ZIP  Corporation Commission File Number Date Contribution Received  Street Address  Toty State ZIP  Corporation Commission File Number Date Contribution Received	3	City	State	ZIP			
Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received		Corporation Commission File Number	Date Contribution Receive	ed			
City State ZIP  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received		Labor Organization Name		M44+	-		
City State ZIP  Corporation Commission File Number Date Contribution Received  Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received		Street Address					
Labor Organization Name  Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received	4	City	State	ZIP			
Street Address  City State ZIP  Corporation Commission File Number Date Contribution Received		Corporation Commission File Number	Date Contribution Receive	ed			
City State ZIP  Corporation Commission File Number Date Contribution Received		Labor Organization Name					
Corporation Commission File Number  Date Contribution Received		Street Address	www.maston				
	5	City	State	ZIP			
Enter total only if last page of schedule		Corporation Commission File Number	Date Contribution Receive	d			
	+	Enter total only if last page of schedu	ıle			0	0

Schedule A(1)(i), page\_\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

		Candidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
- 1	<sub>Name</sub> Cicely Rocha		Date Contribution Received 10/28/23	600.00 10.00	610.00	610.00
	street Address 310 West San Marcos Dr.					
- 1	city Chandler	state Arizona	<sup>ZIP</sup> 85225			
	Occupation	Employer				
1	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
***************************************	Name		Date Contribution Received			
	Street Address					
,	City	State	ZIP			
	Occupation	Employer				
1	Name		Date Contribution Received			
	Street Address					
.	City	State	ZIP			
	Occupation	Employer				
1	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
-	Occupation	Employer				
+	Enter total only if last page of s (transfer the total received this peri	chedule		<u> </u>		

Schedule A(1)(j), page\_\_\_\_ of \_\_\_\_

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	Contrib	outor Informati	on	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name			Date Contribution Refunded			,
Street Address			I			
1 City		State	ZIP			
ID Number (if appl	cable)		Date of Original Contribution			
Name	<del> </del>		Date Contribution Refunded			
Street Address	W					
2 City		State	ZIP			
ID Number (if app	icable)		Date of Original Contribution			
Name			Date Contribution Refunded		<del></del>	
Street Address						
3 City		State	ZIP			
ID Number (if appl	cable)		Date of Original Contribution			
Name			Date Contribution Refunded			
Street Address						
4 City		State	ZIP			
ID Number (if appli	cable)		Date of Original Contribution	_		
Name			Date Contribution Refunded			
Street Address						
5 City	AMENIA DE SANCIA MANTANZA DE SANCIA DE S	State	ZIP			
ID Number (if appli	cable)		Date of Original Contribution	_		
Enter total o	nly if last page of schedul otal received this period to "Si	e ummary of Rece	ipts." line 1(l))		0	0

Schedule A(1)(I), page\_\_\_\_ of\_\_\_



LOANS RECEIVED: SCHEDULE A(2)(a)

/	Lende	r Information		Amount Received	Cumulative Amount this	Cumulative Amount this
Ī	Lender Name	Date Loan Received			Reporting Period	Election Cycle
-	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
1	Lender Name	Date Loan Received				***************************************
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
+	Lender Name	Date Loan Received				***************************************
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
_	Lender Name	Date Loan Received				
	Street Address	. I				
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			

Schedule A(2)(a), page\_\_\_\_ of \_\_\_\_

FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

/	Lende	r Information		Amount Forgiven	Cumulative Amount this	Cumulative Amount this
_	Lender Name		Date Forgiveness Received	- Amedia Torgae	Reporting Period	
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	,	Date Forgiveness Received			
	Street Address			_		
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u> </u>			
	Lender Name		Date Forgiveness Received			
	Street Address		<b>1</b>	_		
3	City	State	ZIP	_		
Menther	Original Amount of Loan	Amount Still Outstanding		_		
_	Lender Name		Date Forgiveness Received			
	Street Address		1			
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	<u></u>	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sur				0	0

Schedule A(2)(b), page\_\_\_\_ of \_\_\_\_



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrowe	r Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
_	Воггоwer Name		Date Repayment Received			
	Street Address		<u> </u>			
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	)			
	Borrower Name		Date Repayment Received			***************************************
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
		Amount Sui Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	3			
	Borrower Name		Date Repayment Received			
	Street Address			_		
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	3		Acceptance of the Control of the Con	
	Borrower Name	1	Date Repayment Received			
	Street Address			_		
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Enter total only if last page of schedule					,

Schedule A(2)(c), page\_\_\_\_ of \_\_\_\_



INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/	Borro	wer Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Вогrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstandin	g			
	Borrower Name	<u> </u>	Date Interest Accrued			
	Street Address	***************************************				
2	City	State	ZIP		T STATE	
	Original Amount Borrowed	Amount Still Outstandin	g			
_	Borrower Name		Date Interest Accrued			······································
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandin	g			
	Borrower Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	3			
	Воггоwer Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
1	Enter total only if last page of schedul	e				
	Enter total only if last page of schedul (transfer the total received this period to "S	ummary of Receipts,"	line 2(d))		0	0

Schedule A(2)(d), page\_\_\_\_ of \_\_\_\_

C23-01



# STATE OF ARIZONA FRANCE REPORTATION

COMMITTEE ID NUMBER

		Payor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Street Address		<u> </u>	_		
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refun	1/Rebate			
_						
	Payor Name		Date Rebate/Refund Received			
	Street Address					
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refun	d/Rebate			
	Payor Name		Date Rebate/Refund Received			***************************************
	Street Address					
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refun	d/Rebate	_		
-	Payor Name		Date Rebate/Refund Received			
	Street Address				A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-	
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refun	d/Rebate			
_	Payor Name		Date Rebate/Refund Received			
	Street Address					
5			Т			
	City	State	ZIP			
	Original Purchase Amount	Reason for Refun	d/Rebate			
$\vdash$	Enter total only if last page of stransfer the total received this peri	chedule				



INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

Schedule A(4), page\_\_\_\_ of \_\_\_\_



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

SCHEDULE A(5)(a)

	Individual Conti	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address	treet Address				
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
-	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
		Employer				
	Name		Date In-Kind Contribution Received			
1	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
5	Street Address					
	City	State	ZIP			
	Occupation	Employer		1		

\*If in-kind contributions of \$100 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).



IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):\*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$100 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	0	

Schedule A(5)(b), page\_\_\_\_ of \_\_\_\_

<sup>\*</sup>If contributions of more than \$100 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

IN-KIND CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS:

SCHEDULE A(5)(c)

/	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 F	Received				
	Committee Name						
	Street Address						
2	City	State	ZIP				
	Committee ID Number	Date In-Kind Contribution I	Received				
	Committee Name						
	Street Address						
3	3 City	State	ZIP				
	Committee ID Number	Date In-Kind Contribution	Received				
	Committee Name						
4	Street Address						
	City	State	ZIP				
		Date In-Kind Contribution	Received				
	Committee Name	Committee Name					
	Street Address	· · · · · · · · · · · · · · · · · · ·					
	Uity	State	ZIP				
_		Date In-Kind Contribution					
L	Enter total only if last page of schedule (transfer the total received this period to "Summ	mary of Receipts," I	ine 5(d))				]
/		Sche	edule A(5)(c), page o	f			/



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

	Candidate Committe	e Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name						
Street Address	Street Address					
1 City		State	ZIP			
Committee ID Nun	per	Date In-Kind Contribution	Received			
Committee Name		<u> </u>				
Street Address						
2 City		State	ZIP			
Committee ID Num	Def	Date In-Kind Contribution	Received			
Committee Name	Committee Name					
Street Address						
3 City		State	ZIP			
Committee ID Num	per	Date In-Kind Contribution	Received			
Committee Name						
Street Address						
4 City		State	ZIP			
Committee ID Num	ег	Date In-Kind Contribution	Received			
Committee Name						
Street Address	Street Address					
5 City		State	ZIP			
Committee ID Numl	er	Date In-Kind Contribution	Received			
Enter total or	ly if last page of schedule al received this period to "Sum					
(transfer the to	al received this period to "Sum	mary of Receipts," li	ne 5(d))		<u>l</u>	

Schedule A(5)(d), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

	Political Acti	on Committee Contribu	tor Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received		_	
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number			MATURE (CONT. 1987) - CONT. 1987		
3 c	Committee Name Street Address					
	City	State	ZIP			
	Committee ID Number		tribution Received			
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Received			
	Committee Name					
5	Street Address					
,	City	State	ZIP			
_	Committee ID Number		tribution Received			
	Enter total only if last page o (transfer the total received this p	t schedule eriod to "Summary of Rece	ipts," line 5(e))			

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Politic	cal Party Contributor Info	rmation	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 Contri	bution Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
3	Committee Name					
	Street Address		Antonio (VI			
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received		4	
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contril	pution Received			

Schedule A(5)(f), page\_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersl	hip Contributor Inform	mation	Amount Receive	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
_	Partnership Name				Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contri	bution Received			
	Partnership Name					
	Street Address			remanded regard trace for this control of the contr		
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received	***************************************		
_	Partnership Name					
3 0	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP	ARA distribution of the second		
	Corporation Commission File Number	Date In-Kind Contr	ribution Received			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Received			
	Enter total only if last page of sci (transfer the total received this period	nedule				



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation	n / LLC Contributor Ir	formation	А	mount Received	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cycl
	Corporation/LLC Name				***************************************		
	Street Address				İ		
1	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contri	bution Received				
	Corporation/LLC Name				Maria		
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contri	bution Received				
3	Corporation/LLC Name						
	Street Address						
	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contri	oution Received		į		
_	Corporation/LLC Name			13.00.00	Married Construction		
	Street Address						
1	City	State	ZIP			1	
	Corporation Commission File Number	Date In-Kind Contrib	ution Received				
1	Corporation/LLC Name						
	Street Address						
;	City	State	ZIP				
-	Corporation Commission File Number	Date In-Kind Contrib	ution Received				
+	Enter total only if last page of sch transfer the total received this period t	edule					

Schedule A(5)(h), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organiza	ation Contributor Info	rmation	Amount Re	eceived /	Cumulative Amount this porting Period	Cumulative Amount this Election Cycle
T	Labor Organization Name						
-	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contributi	ion Received				
1	Labor Organization Name	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE					
	Street Address						
2	City	State	ZIP				
ŀ	Corporation Commission File Number	Date In-Kind Contribu	tion Received				
3 0	Labor Organization Name						
	Street Address				10.00		
	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribu	tion Received				-
	Labor Organization Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribu	ution Received				
	Labor Organization Name		www.commons.com				
	Street Address						
5	City	State	ZIP				
5							



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

SCHEDULE A(5)(j)

Name		Candida	Candidate Information				Cumulative Amount this Election Cycle
310 West San Marcos Dr.  1	Cic	ely Rocha-Miller	1	899.66	899.66	899.66	
Chandler AZ State of Property Contributed Supplies for Campaign  Name  Date In-Kind Contribution Received  Street Address  City State  Date In-Kind Contribution Received  Date In-Kind Contribution Received  State of Property Contributed  Name  Date In-Kind Contribution Received  Date In-Kind Contribution Received  State of Property Contributed  Name  Date In-Kind Contribution Received  State  Date In-Kind Contribution Received	310 West San Marcos Dr.						
Supplies for Campaign  Name Date In-Kind Contribution Received  Street Address  ZiP  Asset or Property Contributed  Date In-Kind Contribution Received  Street Address  ZiP  Asset or Property Contributed  Date In-Kind Contribution Received  Street Address  ZiP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  ZiP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  Jip  Date In-Kind Contribution Received  Street Address  Jip  Date In-Kind Contribution Received   1	andler	1					
Street Address  Zip  Asset or Property Contributed  Date In-Kind Contribution Received  Street Address  Zip  Asset or Property Contributed  Date In-Kind Contribution Received  Street Address  Zip  Asset or Property Contributed  Name  Date In-Kind Contribution Received  Size In-Kind Contribution Received  Date In-Kind Contribution Received							
2 City Slate ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  3 City Slate ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  4 City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  4 City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address	Name	ne	***************************************	Date In-Kind Contribution Received			
Asset or Property Contributed    Name	Stree	et Address		and an arrangement of the second			
Name Date In-Kind Contribution Received  Street Address  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address	City		State	ZIP	_		
Street Address  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Asset or Property Contributed  Date In-Kind Contribution Received  Street Address  State ZIP  Asset or Property Contributed  Date In-Kind Contribution Received	Asset	et or Property Contributed			-		
City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address	Name	e		Date In-Kind Contribution Received			
Asset or Property Contributed  Name  Date In-Kind Contribution Received  Street Address  City  State  ZIP  Asset or Property Contributed  Name  Date In-Kind Contribution Received  Street Address  Street Address  Street Address	Street	et Address					
Name Date In-Kind Contribution Received  Street Address  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address	City		State	ZIP	_		
Street Address  City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address	Asset	t or Property Contributed					
City State ZIP  Asset or Property Contributed  Name Date In-Kind Contribution Received  Street Address	Name	Date In-Kind Contribution Received					
Asset or Property Contributed  Name  Date In-Kind Contribution Received  Street Address	Street	t Address			-		
Name Date In-Kind Contribution Received  Street Address	City		State	ZIP			
Name Date In-Kind Contribution Received  Street Address	Asset	or Property Contributed					
Street Address							
City State ZIP		Address	and the second s				
			State	ZIP			
Asset or Property Contributed	Asset (	or Property Contributed					



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

SCHEDULE A(6)

	Sou	rce Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Ī	Name		Date In-Kind Donation Received			
-	Street Address					
	City	State	ZIP			
	Type of Item Donated	<u> </u>				
	Name	Date In-Kind Donation Received				
	Street Address					
2	City	State	ZIP			
	Type of Item Donated					
	Name	Date In-Kind Donation Received				
3 0	Street Address	reet Address				
	City	State	ZIP			
	Type of Item Donated					
-	Name	Date In-Kind Donation Received				
	Street Address					
1	City	State	ZIP			
	Type of Item Denated					
-	Name	Date In-Kind Donation Received				
	Street Address					
5	City	State	ZIP			
	Type of Item Donated					
_	Enter total only if last page of scheo (transfer the total received this period to	lule "Summary of Rece	ipts," line 6)			

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

	/	Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
Γ		Name						1
		Street Address						
	1	City	State	ZIP	-		:	]
		Services or Goods Provided on Credit		Date of Extension of Credit				
		Name						
		Street Address						
1	2	City	State	ZIP				
		Services or Goods Provided on Credit	Date of Extension of Credit	:				
H	-	Name	· · · · · · · · · · · · · · · · · · ·					
		Street Address						
	3	Guerra radices	1					
	٦	City	State	ZIP				:
	İ	Services or Goods Provided on Credit Date of Extension of Credit						i
F		Name		<u></u>				
	ŀ	Street Address						
4	4	City	State	ZIP				
		Services or Goods Provided on Credit		Date of Extension of Credit				
_		Genylees of Guods Frownied on Occur				l		
	ŀ	Name						
		Street Address						
!	5	City	State	ZIP				
		Services ar Goods Provided on Credit		Date of Extension of Credit				
-	+	Enter total only if last page of schedule (transfer the total received this period to "Sumi						
\ L		(transfer the total received this period to "Sumi	mary of Receipts," I				/	

Schedule A(7)(a), page\_\_\_\_ of \_\_\_\_



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
	Name Street Address					
				-		
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
_	Name			- AND BROAD SANCE		
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
Ì	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Orlginally Provided on Credit		Date of Original Extension of Credit	_		
1	Name	Maria de la compania				
	Street Address					
5	City	State	ZIP	_		
	Services or Goods Originally Provided on Credit  Date of Original Extension of Credit				i i pipinini	
	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receip	ots," line 7(b))		<u> </u>	

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Co	mmittee Informatior	1	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising 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	<u> </u>				
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			
	Enter total only if last page of schedul (transfer the total received this period to "S					

Schedule A(8), page\_\_\_\_ of \_\_\_\_



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor Ir	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle
	Name .					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
1	Name		I.			
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased		Payment Date	Personal Control of the Control of t		
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
_	Enter total only if last page of schedule (transfer the total received this period to "Sum					

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	1	nformation		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	ZĮP			ŧ
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_	Name		AND THE TOTAL PROPERTY OF THE TOTAL PROPERTY			
	Street Address	A John Market				
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_	Name					
	Street Address		and the second s			
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedu (transfer the total received this period to "					

Schedule A(10), page\_\_\_\_ of \_\_\_\_



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

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

Schedule A(11), page\_\_\_\_ of \_\_\_\_



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	S	ource Information		Amount	Cumulative Amount this Reporting Period	Cumulative ` Amount this Election Cycle
	Name					
	Street Address	AAAAMAAAAAAAAAAA				
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
_	Name					
	Street Address	<u></u>				
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
1	Name					
	Street Address					
5	City	State	ZIP			l
	Receipt Type		Receipt Date			
1	Enter total only if last page of sche (transfer the total received this period to	edule o "Summary of Recei		1		



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

_	ı	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursement Date		3.25	13.85	13.85
	Stripe.com         10/28/23           Street Address					
	Sureet Address					
1	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Pur	pose? (PACs and Political Parties Only)	☐ Cash		
	Name	Disbursement Da	ate			
	Street Address					
2	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Pur	pose? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Cash □ Credit		
	Name	Disbursement Da	ale			PO(2000)
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purp	pose? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name					Commence of the Commence of th
	yanic	Disbursement Da	ne			
	Street Address					
5	City	State	ZIP	☐ Cash☐ Credit		
	Type of Operating Expense Paid	Non-Electoral Purp	pose? (PACs and Political Parties Only)			
	Enter total only if last page of so (transfer the total disbursed this peri		ursements." line 1)			
			,			

COMMITTEE	ID	NUMBER

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candid	ate Committee Recipient Info	rmation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made	<u></u>	□ Cash □ Credit		ı
	Committee Name	L				
	Street Address	treet Address				
2	2 City State ZIP		MANAMATICA MANAMATICA			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
3	Street Address					
	City	State	ZIP			
	Committee ID Number Date Contribution Made			☐ Cash ☐ Credit		
	Committee Name					***************************************
	Street Address					į
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
_	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Enter total only if last page of	of schedule period to "Summary of Disburser	nents " line 2(a\)			
۷	Transfer the total dispulsed this	ponde to cummary of Disbulser	none, mez(d))			

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

mittee Name  at Address  mittee ID Number  mittee Name  at Address  mittee IO Number	State  Date Contribution Made  State  Date Contribution Made	ZIP ZIP	☐ Cash☐ Credit		
mittee ID Number  mittee Name  at Address  mittee ID Number	Date Contribution Made				
mittee Name at Address mittee IO Number	Date Contribution Made				
mittee Name at Address mittee IO Number	State	ZIP			
st Address unittee IO Number		ZIP			
mittee IO Number		ZIP			
		ZIP			
	Date Contribution Made				
ımittee Name			□ Cash □ Credit		
	Committee Name				
Street Address					
	State	ZIP			
Committee ID Number Date Contribution Made		☐ Cash☐ Credit			
mittee Name					
et Address					
	State	ZIP			
nniltee ID Number	Date Contribution Made	<u></u>	□ Cash □ Credit		
nmittee Name	L	. + <del> </del>			
Street Address					
City Slate ZIP		ZIP			
Committee ID Number Date Contribution Made		L	□ Cash □ Credit		
nmittee ID Number	1		1		
m	ittee Name Address	Date Contribution Made    Date Contribution Made	Date Contribution Made    Date Contribution Made	Cash   Credit	Cash   Credit   Cre



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name					
	Street Address	ess				
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Ma	de	☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Ma	ode	□ Cash □ Credit		
_	Committee Name					
2	Street Address					
	City	State	ZIP		7	i
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					L MAC HIMMAN W. T.
	Street Address	Street Address				
4	City	State	ZIP			. !
	Committee ID Number	Date Contribution Ma	de	□ Cash □ Credit		
1	Committee Name		, , , , , , , , , , , , , , , , , , ,			Max
	Street Address					
5	City	State ZIP				
	Committee ID Number	Date Contribution Mad	de	□ Cash □ Credit		
+	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 2(c))					



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnership F	Recipient Informati	ion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	:	□ Cash □ Credit		
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	e	□ Cash □ Credit		
_	Partnership Name					
3	Street Address					
	City	State	ZIP	Metadologia and and and and and and and and and an		
	Corporation Commission File Number	Date Contribution Made	е	☐ Cash☐ Credit	1	
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	e	☐ Cash☐ Credit		
_	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	e	☐ Cash ☐ Credit		
_	Enter total only if last page of schedul (transfer the total disbursed this period to "S	 e				

COMMITTEE	ID	NUMBER	

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	n / 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	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	☐ Cash		
-	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number Date Contribution Made		☐ Credit			
_	Corporation/LLC Name					
2	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number  Date Contribution Made		☐ Credit			
	Corporation/LLC Name	1				
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	☐ Credit		
$\frac{1}{2}$	Corporation/LLC Name					
	Street Address					
	City	State	ZIP	- Cash		
	Corporation Commission File Number	Date Contribution Ma	I	□ Cash □ Credit		
$\dagger$	Enter total only if last page of sch (transfer the total disbursed this period	nedule	sements " line 2(e))			



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	ization Recipient Inf	formation	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 M	iade	□ Cash □ Credit		
	Labor Organization Name	1000M900-100M900000000000000000000000000				
	Street Address			***************************************		
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution N	Made	□ Cash □ Credit	☐ Cash☐ Credit	
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit		
	Labor Organization Name					
	Street Address	Street Address				
4	City	State	ZIP	7000 A A MARIA A A A A A A A A A A A A A A A A A A		
	Corporation Commission File Number	Date Contribution M	l dade	□ Cash □ Credit		
	Labor Organization Name	THE THE PARTY OF T				***************************************
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	□ Cash □ Credit		
	Enter total only if last page of sch (transfer the total disbursed this period	edule to "Summary of Disbu	rsements," line 2(f)\			
	(transier the total disbursed this period	to Summary of Disbu	rsements, line 2(1))	Anticological and a Second Interconcerning and the Assessment of t		***************************************



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contribute	or Information		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					
2	City	State	ZIP			
	Committee ID Number	Date of Original Contribution		Trans.		
-	Committee Name		Date Refund Received			
	Street Address					
3	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name	Committee Name				***************************************
-	Street Address	1				
4	City	State	ZIP		i i	
	Committee ID Number		Date of Original Contribution		in the state of th	
	Committee Name		Date Refund Received			
ŀ	Street Address					
5	City	State	ZIP		7	
1	Committee ID Number		Date of Original Contribution			
E	Enter total only if last page of schedule transfer the total disbursed this period to "Sum	mary of Disbursen	nents." line 2(h))			



LOANS MADE: SCHEDULE B(3)(a)

	Borrowe	r Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	1			
-	Вогrower Name					***************************************
	Street Address					
2	City	State	ZIP		:	
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	1			
	Вопоwer Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	***************************************			
	Borrower Name					
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name Date Loan Made					
	Enter total only if last page of schedule (transfer the total received this period to "Su	mmary of Receipts,"	line 3(a))			



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

_		Guarantor Information	1,000		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name						
	Street Address						
1	City	State	ZIP				
	Borrower Name	Date Loan Guarante	ed				
	Guarantor Name						
	Street Address	· · · · · · · · · · · · · · · · · · ·					
2	City	State	ZIP				
	Borrower Name	Date Loan Guaranti	eed				
H	Guarantor Name	Guarantor Name					
	Street Address						
3	City	State	ZIP				
	Borrower Name	Date Loan Guarante	eed				
	Guarantor Name	- Parkers	Address of the second				
	Street Address						
4	City	State	ZIP				
	Borrower Name	Date Loan Guaranti	eed .				
	Guarantor Name						
	Street Address						
5	City	State	ZIP				
	Borrower Name	Date Loan Guarante	eed				
	Enter total only if last page of (transfer the total received this per	schedule iod to "Summary of Receip	ts," line 3(b))				

Schedule B(3)(b), page\_\_\_\_ of \_\_\_\_

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/		Borrower Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstandir	ng			
	Borrower Name		Date Forgiveness Made			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstandir	ng			
_	Borrower Name		Date Forgiveness Made			- VALOUMAN AND AND AND AND AND AND AND AND AND A
	Street Address					
3	S City	City State				
			ZIP			
	Original Amount of Loan	Amount Still Outstandin	g			
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstandin	g			
	Borrower Name		Date Forgiveness Made			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	9	_	The state of the s	
	Enter total only if last page of so (transfer the total disbursed this peri	chedule				
	(transfer the total disbursed this peri	od to "Summary of Disburse	ements," line 3(c))			

Schedule B(3)(c), page\_\_\_\_ of \_\_\_\_



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP			
	Original Amount Βοιτοwed	Amount Still Outstanding	]			
	Lender Name		Date Repayment Made			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	]			
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	3			
	Lender Name		Date Repayment Made			
	Street Address	Annandra Anna				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	3			
	Lender Name		Date Repayment Made			
	Street Address					
5	Сіту	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Su					

Schedule B(3)(d), page\_\_\_\_ of \_\_\_\_

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

			1	1 1	
	ler Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Date Interest Accrued			
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Lender Name	and a second development of the second secon	Date Interest Accrued			a second and a second a second and a second
Street Address			-		
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding		-	4.4	
Lender Name		Date Interest Accrued			
Street Address		-			
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding				
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Lender Name		Date Interest Accrued			
Street Address			-		
City	State	ZIP		į	
Original Amount Borrowed	Amount Still Outstanding				
 Enter total only if last page of schedu	le				
	Lender Name  Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Original Amount Borrowed  Lender Name	Lender Name  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding	Date Interest Accrued	ACCTUED  Lender Name  Dale Interest Accrued  Street Address  City  State  Zip  Original Amount Barrowed  Amount Still Outstanding  Lender Name  Date Interest Accrued  Amount Still Outstanding  Lender Name  Date Interest Accrued  City  State Zip  Original Amount Barrowed  Amount Still Outstanding  Lender Name  Date Interest Accrued  Amount Still Outstanding  Lender Name  Date Interest Accrued  City  State Zip  Original Amount Barrowed  Amount Still Outstanding  Lender Name  Date Interest Accrued  Date Interest Accrued  City  State Zip  Original Amount Barrowed  Amount Still Outstanding  Lender Name  Date Interest Accrued   Lender Name Date Interest Accrued  Breet Ankieses  City State City	

Schedule B(3)(e), page\_\_\_\_ of \_\_\_\_



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	Re	cipient Information		Amount Rebated / Refunded	Amount this	Cumulativ Amount
	Name of Original Payor		Date Rebate/Refund Made	Trolando	Reporting Period	Election Cy
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address			_		
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
_	Name of Original Payor		Date Rebate/Refund Made			
	Street Address		***************************************			
,		In.				
	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor	I	Date Rebate/Refund Made			
	Street Address					
ŀ	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
+	Enter total only if last page of sche	dulo.				

Schedule B(4), page\_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	ommittee Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribu	ition Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contrib	ution Made			
Committee Name	Committee Name				
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contrib	ution Made			
Committee Name				and the second s	
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contrib	ution Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contrib	ution Made			
	Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee Name  Street Address  City  Committee Name  Street Address  City  Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Committee Name  Street Address  City  Committee Name  Street Address  City  Committee ID Number	Committee Name  Street Address  City State  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Street Address  City State  City State  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  Committee ID Number Date I	Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made   Contributed  Campittee Name  Street Address  City State 21P  Convolites ID Number Date In-Kind Centribution Made  Convolites ID Number Date In-Kind Centribution Made  Convolites ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State 21P  Committee Name  Street Address  City State 21P  Committee Name  Street Address  City State 21P  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State 21P  Committee Name  Street Address  Committee Name  Street Address  Street Address	Candidate Committee Recipient Information  Cannottice Name  Street Address  City State Conveiltee ID Number  Conveiltee ID Number	

Schedule B(5)(a), page\_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/		tion Committee Recipient Ir	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Made	_		
_	Committee Name					
	Street Address			_		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	on Made			
_	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Made			
	Committee Name					
	Street Address		<del></del>			
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Made	,		
	Committee Name					
	Street Address			_		
5	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contributio	n Made			
	Enter total only if last page of (transfer the total disbursed this p	schedule				
_	(transfer the total disbursed this p	eriod to "Summary of Disburse	ments," line 5(b))			

Schedule B(5)(b), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Doll	itiaal Darty Doginiant Infor	mation	Amount	Cumulative	Cumulative
	Poli	itical Party Recipient Infor	mation	Contributed	Amount this Reporting Period	Amount this Election Cycle
	Committee Name					1
	Street Address					1
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Made			
indata.	Committee Name					
	Street Address			mer And Park Annual of Manager Stranger		
2	City	State	ZIP			1
	Committee ID Number	Date In-Kind Contr	ribution Made			1
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ribution Made			
	Committee Name					
	Street Address		·			
4	City	State	ZIP	······		
	Committee ID Number	Date In-Kind Contr	ribution Made			
	Committee Name					
	Street Address					i e
5	City	State	ZIP			1
	Committee ID Number	Date In-Kind Contr	ribution Made			l
	Enter total only if last page	of schedule s period to "Summary of Disbu				

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partner	ship Recipient Inform	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Street Address	Street Address				
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Partnership Name					
	Street Address					l
2	City	State	ZIP			i
	Corporation Commission File Number	Date In-Kind Contrib	oution Made			
	Partnership Name					
	Street Address .	27447-27-27-27-27-27-27-27-27-27-27-27-27-27				
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made		77/01/01	
	Partnership Name	,			account of the second	
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Partnership Name	J				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ution Made			
-	Enter total only if last page of sch (transfer the total disbursed this period	edule				

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	/ LLC Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
	City State ZIP					
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
Corporation/LLC Name			***************************************			
Street Address						
	City	State	ZiP			
Corporation Commission File Number Date In-Kind Contribution Made						
l	Corporation/LLC Name					
	Street Address		**************************************			
-	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made	Months of the manufacture of		
+	Corporation/LLC Name			***************************************		
-	Street Address					
-	City	State	ZIP			
	Corporation Commission File Number	Commission File Number Date In-Kind Contribution Made				
ł	Enter total only if last page of sch (transfer the total disbursed this perio	edule	ursements " line 5(e))			



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Orga	nization Recipient I	nformation		Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name			reporting r enou	Liection Cycle		
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Cont	ribution Made				
	Labor Organization Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Con	tribution Made			7	
-	Labor Organization Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Cont	ribution Made				
	Labor Organization Name						v
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Conti	íbution Made				
	Labor Organization Name						·
	Street Address						
	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contr					
1							
	Enter total only if last page of sch transfer the total disbursed this period	edule to "Summary of Disbu	ursements," line 5(f))				

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

District Address		Expenditure F	Recipient Informatio	Mode of Advertising (TV, mail, etc)	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Candidate(s) Supported (including % supported)   Candidate(s) Opposed (including % spossed)   Cash   Credit			MANUEL MA				
Candidate(s) Supported (including % supported)  Candidate(s) Caposed (including % supported)  Candidate(s) Caposed (including % supported)  Candidate(s) Caposed (including % supported)  Recipient Name  Made of Advertising (TV, mail, etc)  State  ZIP  Condidate(s) Supported (including % supported)  Candidate(s) Caposed (including (TV, mail, etc))  Candidate(s) Supported (including % supported)  Candidate(s) Caposed (including (TV, mail, etc))  Candidate(s) Supported (including % supported)  Candidate(s) Caposed (including (TV, mail, etc))  Candidate(s) Supported (including % supported)  Candidate(s) Caposed (including (TV, mail, etc))  Candidate(s) Supported (including % supported)  Candidate(s) Caposed (including (TV, mail, etc))  Candidate(s) Supported (including % supported)  Candidate(s) Caposed (including (TV, mail, etc))	1	City	State	ZIP			
Date of First Publication, Display, Delivery, or Broadcast  Recipient Name  Mode of Advertising (TV, mail, etc)  Steet Address  City  Candidate(s) Supported (inskinding % supported)  Candidate(s) Supported (inskinding % supported)  Cate of First Publication, Display, Delivery, or Broadcast  Blaction Month/Year  Mede of Advertising (TV, mail, etc)  Seet Address  Cay  Seet Address  Cay  State  ZiP  Candidate(s) Supported (inskinding % supported)  Cashidate(s) Capposed (inskinding % supported)  Cashidate(s) Supported (inskinding % supported)  Cashidate(s) Capposed (inskinding % supported)  Cashidate(s) Capposed (inskinding ITV, mail, etc)  Recipient Name  Mode of Advertising (TV, mail, etc)  Cash  Credit		Candidate(s) Supported (including % supported)	Candidate(s) Opposed (inclu	ding % apposed)	_ □ Cash		
Sizest Address   Sizest Address   ZiP		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- □ Credit		
City   State   ZIP   Candidate(s) Supported (including % supported)   Candidate(s) Opposed (including % opposed)   Cash   Credit    Recipient Name   Mode of Advertising (TV, mail, etc)    Street Address   City   State   ZIP    Candidate(s) Supported (including % supported)   Candidate(s) Opposed (including % opposed)   Cash   Credit    Recipient Name   Mode of Advertising (TV, mail, etc)    Date of First Publication, Display, Delivery, or Broadcast   Election Manib/Year   Candidate(s) Supported (including % supported)   Candidate(s) Credit    Recipient Name   Mode of Advertising (TV, mail, etc)    Street Address   City   State   ZIP    Candidate(s) Supported (including % supported)   Candidate(s) Opposed (including % opposed)   Cash   Credit    Candidate(s) Supported (including % supported)   Candidate(s) Opposed (including % opposed)   Cash   Credit    Candidate(s) Supported (including % supported)   Candidate(s) Opposed (including % opposed)   Cash   Credit				Mode of Advertising (TV, mail, etc)			
Candidate(a) Supported (Including % supported)  Candidate(a) Supported (Including % supported)				T-10	_		
Date of First Publication, Display, Delivery, or Broadcast Election Month/Year    Recipient Name	2				_		<u> </u>
Street Address  City State ZIP  Candidate(s) Supported (including % supported) Candidate(s) Opposed (including % opposed)  Cash  Credit  Recipient Name Mode of Advertising (TV, mail, etc)  Street Address  City State ZIP  Candidate(s) Supported (including % supported) Candidate(s) Opposed (including % opposed)  Cash  Credit  Cash  Credit  Cash  Credit		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
City  City  Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % opposed)  Cash  Credit  Cash  Credit  Recipient Name  Mode of Advertising (TV, mail, etc)  Street Address  City  Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % opposed)  Cash  Credit  Cash  Credit  Cash  Credit		Recipient Name		Mode of Advertising (TV, mail, etc)			
Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % opposed)  Cash  Date of First Publication, Display, Delivery, or Broadcast  Election Month/Year  Mode of Advertising (TV, mail, etc)  Street Address  City  State  ZIP  Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % opposed)  Candidate(s) Opposed (including % opposed)  Candidate(s) Cash  Credit		Street Address			]		
Date of First Publication, Display, Delivery, or Broadcast Election Month/Year    Cash   Credit	3	l .	State	ZIP	-		
Recipient Name  Mode of Advertising (TV, mail, etc)  Street Address  City  Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % opposed)  Cash  Credit		Candidate(s) Supported (including % supported)	Candidate(s) Opposed (inclu	.l. iding % opposed)			
Street Address  City State ZIP  Candidate(s) Supported (including % supported) Candidate(s) Opposed (including % opposed)			Election Month/Year				
City State ZIP  Candidate(s) Supported (including % supported) Candidate(s) Opposed (including % opposed)  Candidate(s) Ca				Mode of Advertising (TV, mail, etc)	_		
Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % opposed)  Cash  Credit		City	State	ZIP	-		
Credit	4	Ac 100 March 100	Candidate(s) Opposed (inclu	Iding % opposed)	□ Cash		
		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought			



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			_		
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- ☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		~
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP	•		
	Ballot Measure(s) Supported (including % supported)  Ballot Measure(s) Opposed (including % supported)		(including % opposed)	☐ Cash		
į	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year		□ Credit			
	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address			-		
4	City	State	ZIP	-		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "S	E Summary of Disburser	ments," line 7)	V (m) (m) (m) (m) (m) (m) (m) (m) (m) (m)		

RECALL EXPENDITURES MADE: SCHEDULE B(8)

	Recipient Name	Recipient Inform	Mode of Advertising (TV, mail, etc)	Expenditure Amount	Amount this Reporting Period	Amount this Election Cycle
	Street Address	***************************************		-		
1	City	State	ZIP			:
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to b	oe Recalled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		: :
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	O de del como con con con con con con con con con co				
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to b	re Recalled	_ ☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held	777777	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			Marine Control of the
	Street Address					
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to b	e Recalled	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	, , , , , , , , , , , , , , , , , , ,				
	City	State	ZIP			
4						
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		, Li Creall		
	Enter total only if last page of schedul (transfer the total disbursed this period to "S	e Summary of Disbu	rsements," line 8)	I.		Access of the second se

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

_		fitted Candidate		Amount	Amount this Reporting Period	Amount this Election Cycle
	Candidate Name	Date Benefit Provided				
Street Address						
i	City	State	ZIP	·		
	Type of Benefit Provided					
	Notes:	19.				
1	Candidate Name		Date Benefit Provided			
	Street Address	5 0 4 1 M C 1 5 M C 1 M				
-	City	State	ZIP			
Type of Benefit Provided						
-	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address			_		
-	City	State	ZIP			
	Type of Benefit Provided			_		
	Voles:					
	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
_	lotes:					
E	Enter total only if last page of schedu transfer the total disbursed this period to '	le Summary of Disburs	sements," line 9)			· · · · · · · · · · · · · · · · · · ·

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient	Committee Infor	Payment Date	Payment Amount	Amount this Reporting Period	Amount this Election Cycle
			Раупен Бате			
1	Street Address					
•	City	State	ZIP	□ Cash		
	Date of Joint Fundralsing Event (if applicable)	Type of Shared I	Expense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared I	Expense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					 
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense		Expense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address			Ì		
4	City	State	ZIP	The associate correct		
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense		Expense (if applicable)	☐ Cash☐ Credit		
-	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	☐ Cash☐ Credit		
	Enter total only if last page of scheo (transfer the total disbursed this period t	dule o "Summary of Dis ————	bursements," line 10)			

REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Information	1	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle
	Name					
	Street Address	W. W	Annual Control of the			
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name		- agrammation			
3	Street Address					
	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	J	Reimbursement Date	□ Credit		
	Name	wasaan waa				
	Street Address					
4	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address			AMA .		
5	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		,
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disb	oursements," line 11)			



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Deb	t Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name			4.1.5.000.000.000.000.000.000.000.000.000		
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed	MANAGE AND AND AND AND AND AND AND AND AND AND	Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					<b>************</b>
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued		-	
	Name					
	Street Address		The state of the s		4	
4						
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
_	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
_	Enter total only if last page of schedul (transfer the total received this period to "Si	e				

Schedule B(12), page\_\_\_ of \_\_\_\_



## 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 Deht		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 13)		

Schedule A(13), page\_\_\_\_ of \_\_\_\_



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipient	Information		Amount	Cumulative Amount this	Cumulative Amount this
	Name		Reporting Period	Election Cycle		
	Street Address					
	City		ZIP			
	Disbursement Type	****	Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address	1-10-1-10-1-10-1-1-10-1-1-1-1-1-1-1-1-1	and the control of th			
	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
3	City		ZIP	☐ Cash		
	Disbursement Type Disbursement Da			☐ Credit		
	Name					
	Street Address					
1	City		ZIP	□ Cash		
	Oisbursement Type		Disbursement Date	☐ Credit		
	Name					
5	Street Address					
		State	ZIP	☐ Cash☐ Credit		
	Disbursement Type Disbursement Date			LI Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	nmary of Disbursen	nents," line 14)			

AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative of Disbursements - \$250 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 15)		

Schedule B(15), page\_\_\_\_ of