RECEIVED

APR 1 0 2022



committee id number c17-09

COMMITTEE INFORMATION (required):

		Com	Y OF CHANDLER mittee Information: Committee Name: Rick Heumann 20 Council	<u> Penda</u>	
CAN	DIDAT	ΓΕIN	FORMATION (only if filing as a candidate committee):		
				□ State Legislature: ■ City/Town Office: Chandler	
		□ Cł Cum	neck here if this is the candidate committee's first, cumulative report for the election cycle. ulative reporting period start date (which supersedes the start date for the Reporting Period		
REP	ORTIN	IG PI	ERIOD (check one): REPORTING PERIOD	REPORT DUE	
			2020 4 th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021	/
			2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to March 1, 2021*)
			2021 March Post-Election (Q1) Report (Local Only): February 21, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021	
			2021 Quarter 1: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021	
			2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 10, 2021*	
			2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021	
			2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021	
			2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 26, 2021*	
			2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021	
			2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021	
			2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 25, 2021*	
			2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 18, 2022*	
			2021 Quarter 4 Report: July 14, 2021 to December 31, 2021	January 1, 2022 to January 18, 2022*	
			2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2022 to February 28, 2022*	
			2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022	
		>	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022	
			2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 9, 2022*	
			2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022	
			2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022	
			2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 25, 2022*	
			2022 Post-Primary (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 17, 2022*	
			2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2022 to October 31, 2022*	

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

2022 Post-General (Q4) Report: October 23, 2022 to December 31, 2022

Final Campaign Finance Report Prior to Committee Termination

FINANCIAL SUMMARY (required):

AL OU	iviiwAtt (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)	6,379.64	
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	0.00	29,715.42
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	0.00	42,673.69
(d)	= Balance at close of reporting period	6,379.64	6,379.64
	Check here if <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must be co	mpleted, but only this cov	ver page need be filed.

January 1, 2023 to January 17, 2023*

End of Previous Period through Today's Date



COMMITTEE ID NUMBER c17-09

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

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

Rick Heumann	Kist of curem	4/10/2022
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

SUMMARY OF RECEIPTS (Schedule A):

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

committee id number

SUMMARY OF DISBURSEMENTS (Schedule B):

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



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

SCHEDULE A(1)(a)

/	/	Individual Contr	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
		Name		Date Contribution Received			
		Street Address					
	1	City	State	ZIP			
		Occupation	Employer			ı	
		Name		Date Contribution Received			
		Street Address				-	
	2	City	State	ZIP			
		Occupation	Employer				
ŀ		Name		Date Contribution Received			
		Street Address					
	3	City	State	ZIP			
		Occupation	Employer				
Ì		Name		Date Contribution Received			
		Street Address					
	4	City	State	ZIP			
		Occupation	Employer				
		Name		Date Contribution Received			
		Street Address					
	5	City	State	ZIP			
		Occupation	Employer				
-		Enter total only if last page of schedule					
L		(transfer the total received this period to "Summary of Receipts,"	line 1(a))				

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

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



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

SCHEDULE A(1)(b)

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

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

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

_	Candidate Committee	e 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 Contribution Receive	ed			
	Committee Name	-				
	Street Address					
2	City	State	ZIP	,		
	Committee ID Number	Date Contribution Receive	ed .			
	Committee Name					
	Street Address	-				
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	T City	State	ZIP	-		
	Committee ID Number	Committee ID Number Date Contribution Received				
	Committee Name					
	Street Address	-				
5	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receiv	<u>l</u> ed			
-	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts	." line 1(c))				

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

/	/	Political Action Committ	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name					
		Street Address					
	1	City	State	ZIP			
		Committee ID Number	Date Contribution Receive	ad .			
		Committee Name				ęs.	
		Street Address					
	2	City	State	ZIP			
		Committee ID Number	Date Contribution Receive	ed			
ŀ		Committee Name	<u> </u>				
		Street Address					
	3	City	State	ZIP			
		Committee ID Number	Date Contribution Receive	ed			
ŀ		Committee Name					
		Street Address					
	4	City	State	ZIP			
١							
		Committee ID Number	Date Contribution Receive	ed			
		Committee Name					
		Street Address					
	5	City	State	ZIP		*	
		Committee ID Number	Date Contribution Receive	d			
-		Enter total only if last page of schedule					
\ L	- 1	ftransfer the total received this period to "Summary of Receipts."	line 1(d))				

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

_	Political Party Co	ntributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Received	d			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	d	-		
	Committee Name					
	Street Address		-			
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u>d</u>	-		
	Committee Name					
	Street Address			-		
4	City	State	ZIP	_		
	Committee ID Number	-				
-	Committee Name					
	Street Address		-			
5	City	State	ZIP			>
	Committee ID Number	Date Contribution Receiv	ed			
-	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts	" line 1(e))				e.

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

_		tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number					
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 1(f))				

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

Corporation / LLC Contributor Information Amount Received Amount this Amount the								
Corporation C.C. Name State ZIP		Corporation /	LLC Contributor Info	ormation	Am	nount Received	Amount this	Cumulative Amount this Election Cycle
Coparation Commission File Number		Corporation/LLC Name						
Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received ZIP Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received ZIP Corporation Commission File Number Date Contribution Received ZIP Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received		Street Address						
Corporation/LLC Name Street Address 2 City State 2IP Corporation Commission File Number Date Contribution Received Street Address 3 City State 2IP Corporation Commission File Number Date Contribution Received	1	City	State	ZIP			_	
Street Address 2 City State ZIP Corporation Commission File Number Date Contribution Received 5 Corporation Commission File Number Date Contribution Received		Corporation Commission File Number	Date Contribution Re	ceived				
2 City State ZIP Corporation Commission File Number Date Contribution Received Street Address 3 City State ZIP Corporation Commission File Number Date Conditional Received Corporation Commission File Number Date Conditional Received Corporation LC Name Street Address 4 City State ZIP Corporation Commission File Number Date Conditional Received Corporation Commission File Number Date Conditional Received Street Address 5 City State ZIP Corporation Commission File Number Date Contribution Received	-	Corporation/LLC Name						
Corporation Commission File Number Date Confribution Received Corporation/LLC Name Street Address City State ZIP Corporation/LLC Name Date Confribution Received Corporation/LLC Name Street Address Corporation/LLC Name Street Address City State ZIP Corporation/LLC Name Street Address City State ZIP Corporation Commission File Number Date Confribution Received Corporation/LLC Name Street Address Corporation/LLC Name Street Address Corporation/LLC Name Street Address Street Address		Street Address						
Corporation/LLC Name Street Address Gity 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/LLC Name Street Address City State ZiP Corporation/LLC Name Street Address Street Address Street Address Street Address	2	City	State	ZIP				
Street Address City State ZIP Corporation Commission File Number Date Contribution Received Corporation/LLC Name Street Address 4 City State ZIP Corporation Commission File Number Date Contribution Received Street Address 5 City State ZIP		Corporation Commission File Number	Date Contribution Re	eceived				
State ZIP		Corporation/LLC Name						
Corporation/LLC Name Street Address 4 City State ZIP Corporation/LLC Name Date Contribution Received Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received Street Address 5 City State ZIP		Street Address						
Corporation/LLC Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received Corporation/LLC Name Street Address 5 City State ZIP	3	City	State	ZIP				
Street Address A City State ZIP Corporation Commission File Number Date Contribution Received Corporation/LLC Name Street Address 5 City State ZIP		Corporation Commission File Number Date Contribution Received						
4 City State ZIP Corporation Commission File Number Date Contribution Received Corporation/LLC Name Street Address City State ZIP	-	Corporation/LLC Name	1					_
Corporation Commission File Number Date Contribution Received Corporation/LLC Name Street Address City State ZIP		Street Address						
Corporation/LLC Name Street Address City State ZiP	4	City	State	ZIP				
Street Address 5 City State ZIP	1	Corporation Commission File Number	Corporation Commission File Number Date Contribution Received					
5 City State ZIP	-	Corporation/LLC Name						
City		Street Address						
Corporation Commission File Number Date Contribution Received	5	City	State	ZIP				
		Corporation Commission File Number	Date Contribution R	teceived				
Enter total only if last page of schedule	-	Enter total only if last page of scl	nedule					

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

	Labor Organiz	zation Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name	Labor Organization Name			. 5	
	Street Address			1		
1	City	State	ZIP			
	Corporation Commission File Number	ile Number Date Contribution Received				
	Labor Organization Name					
	Street Address					
2	City	State	State ZIP			
	Corporation Commission File Number					
	Labor Organization Name					
	Street Address					
3	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receiv	ved	-		
	Labor Organization Name					
	Street Address			-		
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Labor Organization Name					
	treel Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Enter total only if last page of sche	dule				
	(transfer the total received this period to "Summary of F	Receipts," line 1(h))				



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received		, repering resident	
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2			_			
_	City	State	ZIP	-		
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address			_		
4		T	L	_		
	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer		_		
	Enter total only if last page of schedule					

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

Contributo	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Date Contribution Refunded			
dress			_		
	State	ZIP			
(if applicable)		Date of Original Contribution			
		Date Contribution Refunded			
dress	·				
	State	ZIP			
r (if applicable)	L	Date of Original Contribution			
		Date Contribution Refunded			
iress					
	State	ZIP			
r (if applicable)	I	Date of Original Contribution			
		Date Contribution Refunded			
ress					
	State	ZIP			
(if applicable)		Date of Original Contribution			
		Date Contribution Refunded			
Street Address					
	State	ZIP			
r (if applicable)		Date of Original Contribution			
(if ap	only if last page of schedule	oplicable)	only if last page of schedule	Only if last page of schedule	Only if last page of schedule

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



LOANS RECEIVED:

SCHEDULE A(2)(a)

	Lender I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received				
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address		,			
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	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					
5	City	State	ZIP	-		
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	-		
	Enter total only if last page of schedule	line 2(a))				

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



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

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

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

		Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Borrower Name		Date Repayment Received			
		Street Address					
	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
		Borrower Name	l	Date Repayment Received			
		Street Address					,
	2	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	_	,		
		Borrower Name		Date Repayment Received			
		Street Address		_			
	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				'
		Borrower Name		Date Repayment Received			-
		Street Address		L		_	
	4	City	State	ZIP			ı
		Original Amount Borrowed	Amount Still Outstanding				
		Borrower Name	L	Date Repayment Received			
		Street Address					,
	5	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
		Enter total only if last page of schedule (transfer the total received this period to 'Summary of Receipts.)	line 2(c))		1		
1		puramento de total received una period to administr of Receibts.	mic Zicii				

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

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

Borrower Information Bettermen Name Date Information Date Infor							
Street Address Stre	/		Information		Amount of Interest Accrued	Amount this	Amount this
Today State 21P 21P		Borrower Name		Date Interest Accrued			
Cligheal Annount Borrowed Amount SHI Culstanding Date Interest Accoused Street Address City State City State Date Interest Accoused Date Interest Accoused Street Address City State City State City State City State Date Interest Accoused Date Interest Accoused Street Address City State City State Date Interest Accoused Date Interest Accoused Street Address City State City State Date Interest Accoused Date Interest Accoused Street Address City State City State City State Date Interest Accoused Date Interest Accoused Street Address City City State Date Interest Accoused Date Interest Accoused Street Address City City State ZiP Original Annount Borrowed Annount Still Culstanding Date Interest Accoused Street Address City State ZiP Original Annount Borrowed Annount Still Culstanding Date Interest Accoused		Street Address					
Borrower Name Date Interest Accrused Street Address City Bitate Date Interest Accrused	1	City	State	ZIP			
Stored Address State ZIP		Original Amount Borrowed	Amount Still Outstanding				
City State ZIP City State ZIP City Date Interest Accrused Borrower Name Date Interest Accrused Street Address City State ZIP City State ZIP City State ZIP City State ZIP City State ZIP City State ZIP City State ZIP City State ZIP		Воггоwer Name		Date Interest Accrued			
Original Amount Borrowed Borrower Name Street Address Amount SIII Outstanding Date Interest Accrued Street Address Amount Borrowerd Amount SIII Outstanding Date Interest Accrued Street Address City State City State City State City State Date Interest Accrued Date Interest Accrued Date Interest Accrued Date Interest Accrued Street Address City Original Amount Borrowed Amount SIII Outstanding Date Interest Accrued Enter total only if last page of schedule		Street Address					
Borrower Name Street Address City Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address Enter total only if last page of schedule	2	City	State	ZIP			
Situeel Address Gity State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address Gity State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address Gity State ZIP Original Amount Borrowed Amount Still Outstanding Street Address Gity State ZIP Original Amount Borrowed Amount Still Outstanding Enter total only if last page of schedule		Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
City State ZIP		Borrower Name	I	Date Interest Accrued			
City State ZIP Borrower Name Date Interest Accrued Street Address ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Enter total only if last page of schedule		Street Address	-				
Borrower Name Street Address City Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Date Interest Accrued City Street Address Date Interest Accrued Street Address Enter total only if last page of schedule	3	City	State	ZIP			
Street Address City State ZIP Original Amount Borrowed Amount SIIII Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Sili Outstanding Enter total only if last page of schedule		Original Amount Borrowed	Amount Still Outstanding				
4 City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Enter total only if last page of schedule		Borrower Name		Date Interest Accrued			
City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Enter total only if last page of schedule		Street Address					
Borrower Name Street Address City Original Amount Borrowed Enter total only if last page of schedule	4	City	State	ZIP			
Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Enter total only if last page of schedule		Original Amount Borrowed	Amount Still Outstanding				
5 City State ZIP Original Amount Borrowed Amount Still Outstanding Enter total only if last page of schedule	_	Borrower Name		Date Interest Accrued			
Original Amount Borrowed Amount Still Outstanding Enter total only if last page of schedule		Street Address					
Enter total only if last page of schedule	5	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				

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



REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

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

Schedule A(3), page ____ of

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

Schedule A(4), page ___ of ___



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

SCHEDULE A(5)(a)

_	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer		_		
	Name	1	Date In-Kind Contribution Received			
	Street Address			-		
4	City	State	ZIP	_		
	Occupation	Employer		_		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
5	City	State	ZIP	-		
	Occupation	Employer		-		
	Enter total only if last page of schedule (transfer the total received this period to 'Summary of Receipts					

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

Schedule A(5), page ____ of



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

SCHEDULE A(5)(b)

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

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

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

/		nmittee Contributor Info	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			_		
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name					
	Street Address					
2	City	State ZIP		1		
	Committee ID Number	Date In-Kind Contribution	n Received			
1	Committee Name					
	Street Address			1		
3	City	State	ZIP	1		
	Committee ID Number	Date In-Kind Contribution	on Received	-		
1	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	on Received			
	Committee Name					
	Street Address					-
5	City	State	ZIP			
- 1				_		

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

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

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	/							
		Political Party Cor	ntributor Informati	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	1
		Committee Name						
		Street Address						
	1	City	State	ZIP				
		Committee ID Number	Date In-Kind Contribution I	Received				
		Committee Name						
		Street Address						
	2	City	State	ZIP				
		Committee ID Number	Date In-Kind Contribution	Received				
		Committee Name						
		Street Address						
	3	City	State	ZIP	= _			
		Committee ID Number	Date In-Kind Contribution	Received				
		Committee Name						
	4	Street Address						
	4	City	State	ZIP				
		Committee ID Number	Date In-Kind Contribution	Received				
		Committee Name	-					
		Street Address					8	
	5	City	State	ZIP	-		,	
		Committee ID Number	Date In-Kind Contribution	Received	-			
		Enter total only if last page of schedule (transfer the total received this period to 'Summary of Receipts.'	line 5(e))					

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

/						
	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 5(f))				

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

	/	Corporation / LLC C	ontributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Corporation/LLC Name					
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution F	Received			
ŀ		Corporation/LLC Name					
		Street Address					
	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
		Corporation/LLC Name	L				
		Street Address					
1	3	City	State	ZIP			
		Corporation Commission File Number Date In-Kind Contribution Received					
		Corporation/LLC Name					
		Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
		Corporation/LLC Name					
		Street Address			-		
	5	City	State	ZIP	-		
		Corporation Commission File Number	Date In-Kind Contribution	I. Received			
		Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 5(a))	=	1		
\ L		puranates the total received this period to autilitiary of Receibts.	mid didii				

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

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

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



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

SCHEDULE A(5)(i)

,						
	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP	,		
	Asset or Property Contributed					
	Name	Date In-Kind Contribution Received				
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name	Date In-Kind Contribution Received				
	Street Address			-		
4	City	State	ZIP	_		
	Asset or Property Contributed			_		-
-	Name	-	Date In-Kind Contribution Received			
	Street Address			-		-
5	City	State	ZIP			
	Asset or Property Contributed			_		
	Enter total only if last page of schedule (transfer the total received this period to 'Summary of Receipts,'	' line 5(i))				

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



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

SCHEDULE A(6)

	Source	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donaled					
	Name	Date In-Kind Donation Received				
3	Street Address					
3	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated					
+	Enter total only if last page of schedule					

Schedule A(6), page _



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

	Credito	or Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address		*	-		
2	City	ZIP	-			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP	-		
	Services or Goods Provided on Credit		Date of Extension of Credit	_		
	Name		1			
	Street Address			-		
4	City	State	ZIP	-		
	Services or Goods Provided on Credit		Date of Extension of Credit	-		
	Name					
	Street Address			_		
5	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	-monarconstructural description of the contract of the contrac					

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 .						
		Street Address						
	2	City	State	ZIP				
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit				
ľ		Name						
		Street Address						
	3	City	State	ZIP	•			
		Services or Goods Originally Provided on Credit	I	Date of Original Extension of Credit				
		Name						
	Ì	Street Address						
	4	City	State	ZIP				
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit				
		Name						
		Street Address						
	5	City	State	ZIP				
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit				
	- 1	Enter total only if last page of schedule						
L		(transfer the total received this period to "Summary of Receipts."	line 7(b))					,

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Con	nmittee Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			-
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			
	Committee Name		Payment Date			
	Street Address		•			
3	City	State	ZIP			
	Date of Joint 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					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			
	Enter total only if last page of schedu					
	(transfer the total received this period to "Summary of Received	iots." line 8)				



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

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

Schedule A(9), page ___ of ___



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/						
	Infor	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address	treet Address				
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued		,	
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
			Date that best recited			
	Name					1
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address		***			
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP			
			Date that Debt Accrued			
	Type of Account Receivable or Debt Owed		25.5 (16) 2501 / (60) 450			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 10)				

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

Schedule A(11), page ____ of ____



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

/					Cumulative	Cumulative
	Source I	nformation		Amount	Amount this Reporting Period	Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type	. ,	Receipt Date			
	Name					
3	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
			receipt bale	_		'
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type Receipt Date					
	Name					
	Street Address					
5	City	State	ZIP	-		
	Receipt Type	1	Receipt Date	-		
_	Enter total only if last page of schedule					
_	(transfer the total received this period to "Summary of Receipts."	line 12)				

Schedule A(12), page ___ of ___



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Rec	pient Information	Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name	Disbursement Date	Disbursement Date		Tripering remark	
	Street Address					
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpos	e? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
2	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purposi	e? (PACs and Political Parties Only)	□ Cash □ Credit	│ □ Cash │ □ Credit	
	Name	Disbursement Date	Disbursement Date			
	Street Address					
3	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	e? (PACs and Political Parties Only)	☐ Credit		
	Name	Disbursement Date				
	Street Address	l				
5	City	State	ZIP	☐ Cash☐ Credit		
	Type of Operating Expense Paid	Non-Electoral Purpose	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Enter total only if last page of sched					

Schedule B(1), page ___ of ___



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidat	te Committee Recipient I	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	Street Address				
1	City	State	ZIP	□ Cash	>	
	Committee ID Number	Date Contribution I	Made	☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution	Date Contribution Made			1
	Committee Name	Committee Name				
	Street Address					
1	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 o	of schedule				



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/	Political Action Commi	ttee Recipient Inf	formation	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	1	☐ Cash☐ Credit		
_	Committee Name					
	Street Address		1			
2	City	State	ZIP			
	mittee ID Number Date Contribution Made		☐ Cash☐ Credit			
	Committee Name					
	Street Address			1		
3	City	State	ZIP	-		
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name	1				
	Street Address			1		
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name	l				
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number Date Contribution Made		□ Cash □ Credit			
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disburse	ements." line 2(b))				



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

Political Party R	Amount Contributed	Cumulative Amount this	Cumulative Amount this		
Committee Name			Reporting Period	Election Cycle	
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Made		□ Cash □ Credit		
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
Committee Name	d d				
Street Address					
City	State	ZIP	-		
Committee ID Number	Date Contribution Made		□ Cash □ Credit		
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Made		□ Cash □ Credit		
Enter total only if last page of schedule					
	Committee Name Street Address City Committee ID Number Committee ID Number Committee ID Number Committee Name Street Address City Committee ID Number Street Address City Committee ID Number	Committee Name Street Address City State Committee ID Number Date Contribution Made Street Address City State Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made Street Address City State Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made	Street Address City State ZIP Committee ID Number Date Contribution Made Street Address City State ZIP Committee ID Number Date Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made	Political Party Recipient Information Contributed Contributed Contributed Contributed Contributed Contributed Contributed Cash Credit	Political Party Recipient Information Committee Name Seest Address City State ZIP Cash Credit Committee Name Seest Address City State ZIP Cash Credit Committee Name Seest Address City State ZIP Cash Credit Committee ID Namber Cash Credit



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

/						
	Partnership Red	cipient Informatio	n	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	<u>I</u>	☐ Cash ☐ Credit		
	Partnership Name	-				
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name	Partnership Name				
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name					
	Street Address	Street Address				
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	,	☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburser	nents." line 2(d))				
1		Sche	edule B(2)(d), page of			



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

/	Corporation	/ LLC Recipient Informa	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Corporation/LLC Name	Corporation/LLC Name				
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	ı	□ Credit		
	Corporation/LLC Name					
3	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	1	□ Credit		
	Corporation/LLC Name	Corporation/LLC Name				
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	1	☐ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	***************************************	□ Credit		,
_	Enter total only if last page of sch	edule				



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organizatio	n Recipient Inform	nation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Labor Organization Name						
	Street Address					
1	City	State	ZIP	 □ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Cash		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Casii		
	Labor Organization Name					
3	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	mber Date Contribution Made		☐ Credit		
	Labor Organization Name					
	Street Address	Streel Address				
4	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Made		□ Credit		
	Labor Organization Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	•	☐ Credit		
_	Enter total only if last page of schedule		·			



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

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

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



LOANS MADE:

SCHEDULE B(3)(a)

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

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



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

_	Guarantor Information				Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Guarantor Name Street Address					
1	-	City					
		Borrower Name	Date Loan Guaranteed				
		Guarantor Name					
		Street Address					
2	2	City	State	ZIP			
		Borrower Name	Date Loan Guaranteed				
		Guarantor Name					e
3		Street Address		5			
		City	State	ZIP			
		Borrower Name Date Loan Guaranteed					
		Guarantor Name Street Address					
4	1	City	State	ZIP			
		Borrower Name	Date Loan Guaranteed				,
-		Guarantor Name					
		Street Address					
Ę	5	City	State	ZIP			
		Borrower Name	Date Loan Guaranteed				
		Enter total only if last page of schedule	line 3(b))				

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



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

_		Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name		Date Forgiveness Made			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	Į.			
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	r ·	Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule	ments." line 3(c))				

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

		Lender I	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Lender Name		Date Repayment Made			
		Street Address					
'	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding		-		
		Lender Name	1	Date Repayment Made			
	Ì	Street Address					
2	2	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	L			
\mid		Lender Name		Date Repayment Made			
		Street Address					
;	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding		, , , , , , , , , , , , , , , , , , ,		
		Lender Name		Date Repayment Made			
		Street Address			-		
	4	City	State	ZIP	-		
		Original Amount Borrowed	Amount Still Outstanding		-		
		Lender Name		Date Repayment Made			
		Street Address					
	5	City	State	ZIP	-		^
		Original Amount Borrowed	Amount Still Outstanding				
$\left \cdot \right $		Enter total only if last page of schedule					
1		(transfer the total disbursed this period to "Summary of Disburse	ments." line 3(d))				

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



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

			1		
Lender	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still 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			
Original Amount Borrowed	Amount Still Outstanding		_		
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP	-		
Original Amount Borrowed	Amount Still Outstanding		-		
Lender Name	1	Date Interest Accrued			
Street Address	Street Address				
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding		-		
	Street Address City Original Amount Borrowed Lender Name Street Address City Original Amount Borrowed	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 Lender Name Street Address City State	Street Address City State ZIP Definal Amount Borrowed Amount Still Outstanding Lander 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 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 Original Amount Borrowed Amount Still Outstanding	Lender Name Date Interest Accrued	Reporting Period Date Interest Accoused Sinest Address City State ZIP Original Amount Borrowed Amount Still Cubisanding Lander Name Date Interest Accoused Street Address City State ZIP Original Amount Borrowed Amount Still Cubisanding Lander Name Date Interest Accoused Street Address City State ZIP Original Amount Borrowed Amount Still Cubisanding Lander Name Date Interest Accoused Street Address City State ZIP Original Amount Borrowed Amount Still Cubisanding Lander Name Date Interest Accoused Lander Name Date Interest Accoused

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

_	Rec	sipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
1	City	State	ZIP			
1	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			1
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address		-			
3	City	State	ZIP	_		<i>2</i>
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	_		
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address		<u></u>	-		
4	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	-		
-	Name of Original Payor		Date Rebate/Refund Made			
	Street Address			_		
5	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Enter total only if last page of sche					

Schedule B(4), page ____ of



committee id number

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committee	ee Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule	ments " line 5(a))				

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

			1		, ,	
	Political Action Commit	tee Recipient Info	ormation	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 N	I Made			
-	Committee Name					
	Street Address					
2	City	State	ZIP	,		
	Committee ID Number	Date In-Kind Contribution	Made	-		
	Committee Name					
	Street Address	Street Address				-
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address				-	
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
	Committee Name					
	Street Address					,
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule					
_	(transfer the total disbursed this period to "Summary of Disburse	ments." line 5(b))				

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



committee id number

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/						
	Political Party R	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	Street Address				
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule					

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	,						
		Partnership Rec	ipient Information	1	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 In-Kind Contribution N	Made			
		Partnership Name					
	Street Address						
1 3	2	City	State	ZIP	Ą		
		Corporation Commission File Number	Date In-Kind Contribution	Made			
İ		Partnership Name					
		Street Address					
	3	City	State	ZIP			
		Corporation Commission File Number Date In-Kind Contribution Made					
		Partnership Name					I I
		Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Partnership Name					
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Enter total only if last page of schedule	ments * line 5(d))				
1		hinanaier nie toral diaponaed tilia nellog to gomiliars of Disporse					

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



committee id number

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	/	Corporation / LLC	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Corporation/LLC Name					,
		Street Address					
	1	City	State	ZIP	-		
		Corporation Commission File Number	Date In-Kind Contribution	Made			
r		Corporation/LLC Name	1				
		Street Address					
:	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
\vdash		Corporation/LLC Name					
	Street Address						
;	3	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
\vdash	+	Corporation/LLC Name					
		Street Address					
4	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Corporation/LLC Name					
		Street Address					
5	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Enter total only if last page of schedule					
\ <u></u>	(mansier the total dispursed this period to "Summary of Disburse	nents. line 5(e))				

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

Labor Organization	n Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
abor Organization Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution I	Made			
Labor Organization Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	Made			
Labor Organization Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	Made			
Labor Organization Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	Made			
Labor Organization Name					
Street Address					
City	State	ZIP	-		
Corporation Commission File Number	Date In-Kind Contribution	Made	-		
Enter total only if last page of schedule					
	Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number	Labor Organization Name Street Address City State Corporation Commission File Number Date In-Kind Contribution is state. Corporation Commission File Number Date In-Kind Contribution is state. City State Corporation Commission File Number Date In-Kind Contribution Date In-	Street Address City State ZiP Corporation Commission File Number Date In-Kind Contribution Made Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Made Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Made Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Made Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Made Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Made Labor Organization Name Street Address	Labor Organization Name Sized Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Made City Date In-Kind Contribution Made	Labor Organization Recipient Information Liner Organization Name Street Address City State 279 Corporation Commission File Namber Date In-York Contribution Made City State 279 Corporation Commission File Namber Date In-York Contribution Made City State 279 Corporation Commission File Namber Date In-York Contribution Made City State 279 Corporation Commission File Namber Date In-York Contribution Made City State 279 Corporation Commission File Namber Date In-York Contribution Made City State 279 Corporation Commission File Namber Date In-York Contribution Made City State 279 Corporation Commission File Namber Date In-York Contribution Made



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Recipient Informa		Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
nt Name	Mode of Advertising (TV, mail, etc)				
Address			_		
	State	ZIP	_		
ate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	_ □ Cash		
First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	- □ Credit		
nt Name		Mode of Advertising (TV, mail, etc)			
Address		-			
	State	ZIP	-		
ate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	☐ Cash		
First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
nt Name		Mode of Advertising (TV, mail, etc)			
ddress			1		
	State	ZIP			
ate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	□ Cash		
First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
nt Name	1	Mode of Advertising (TV, mail, etc)			
ddress					
	State	ZIP			
ate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)		☐ Cash		
First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ Li Creat		
First Pu	ibilication, Display, Delivery, or Broadcast		only if last page of schedule	□ Cash □ Credit Cash □ Credit Cash □ Credit Condit Credit Credit Condit Credit Cr	□ Cash □ Credit Indication, Display, Delivery, or Broadcast Election Month/Year Office Sought Indication Office Sought Office Sought Indication Office Sought Offi

Schedule B(6), page ____ of ___



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

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

Schedule B(7), page ___ of ___



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

	Expenditure	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reca	alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reca	l alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held				
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
	Enter total only if last page of schedule					
	provide the total discussed this period to Commissive of Discussion	isoments, line of				



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address					
1	City	State	ZIP			
	Type of Benefit Provided					
	Notes:		1		1	
	Candidate Name		Date Benefit Provided			
	Street Address			-		
2	City	State	ZIP	1		
2	Type of Benefit Provided			-		
	Notes:			-		
	Candidate Name Date Benefit Provided					
	Street Address					
		State	ZIP	1		
3	City	State	LIF			**
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			1
	Street Address					
4	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Enter total only if last page of schedul	e				
	(transfer the total disbursed this period to "Summary of Disb					

Schedule B(9), page ___ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient Committee Information			Payment Amount		Cumulative Amount this
	Committee Name	Payment Date		Reporting Period	Election Cycle	
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	expense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP	□ Cash		
	Date of Joint Fundralsing Event (if applicable) Type of Shared Expense (if		xpense (if applicable)	☐ Credit		
	Committee Name Pr		Payment Date			
1	Street Address					
5	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)		☐ Credit			
- 1	Enter total only if last page of schedu					



REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name		.1			
	Street Address					
2	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	Reimbursement Date	☐ Credit			
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	□ Credit		,
	Name					
	Street Address					
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 "Summary of Disbursements," line 11)						



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	1 City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address			-		
2	2 city	State	ZIP	1		
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
-	Name					
	Street Address			-		
3	3 city	State	ZIP	_		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
H	Name					
	Street Address			-		
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 sched	ıle		L		
	(transfer the total received this period to *Summary of Rec	eipts," line 12)				

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 Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 13)	,	1

Schedule B(13), page ___ of ___



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

,			ĺ		0.15
/ _	Recipient Informatio	n	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Name			
	Street Address				
	City	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit		
	Name				
	Street Address				
2	2 City	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit		
	Name				
	Street Address				
(City	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit		
	Name				
	Street Address	Street Address			
4	City	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit		
	Name				
	Street Address				
	5 City State	ZIP	II Ch		
	Disbursement Type	Disbursement Date	□ Cash □ Credit		
-	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 14)				
	Повтоле и не готан изовизем вто ретим (о Summary от Disoursements; Tife 14)				
		Schedule B(14), page	of		