# RECEIVED

## APR 1 4 2022



committee id number 21-07

COMMITTEE INFORMATION (required):

	Com	mittee Informat	ion: Committee Na	me:	JONES FOR MAYOR	-	
ADIDA.	TEIN	IFORMATION (	only if filing as a candidate	com	mittee):		
	Offic	e Sought:	☐ Statewide 0	Office:		☐ State Legislature:	
	Cum	ulativa Banart	☐ County Offi	ce:		City/Town Office: CHANDLER	
		<i>ulative Report</i> : heck here if this		e's fir	st, cumulative report for the election cycle.	Also select appropriate Reporting Period I	oelov
					sedes the start date for the Reporting Per		
ORTI	NG P	ERIOD (check					-
1		16			PERIOD	REPORT DUE	
1		2020 4 <sup>th</sup> Quar	ter Report: October 18, 20	20 to	December 31, 2020	January 1, 2021 to January 15, 2021	
/		2021 March F	re-Election Report (Local	Only):	January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 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 Ma	rch 3	1, 2021	April 1, 2021 to April 15, 2021	
		2021 May Pre	-Election Report (Local O	ıly): A	pril 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021	
		2021 May Pos	st-Election (Q2) Report (Lo	cal O	nly): 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 24, 2021	
		2021 August F	Post-Election (Q3) Report (L	ocal C	Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021	
		2021 Quarter	3 Report: July 1, 2021 to 8	Septer	nber 30, 2021	October 1, 2021 to October 15, 2021	
		2021 Novemb	per Pre-Election Report (Lo	al Or	ly): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021	
		2021 Novembe	r Post-Election (Q4) Report (L	ocal C	only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022	
		2021 Quarter	4 Report: October 1, 2021	to De	ecember 31, 2021	January 1, 2022 to January 15, 2022	
		2022 March F	re-Election Report (Local	Only):	January 1, 2022 to February 19, 2022	February 20, 2022 to February 26, 2022	
		2022 March P	ost-Election (Q1) Report (L	ocal C	only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022	
	~	2022 Quarter	1 Report: January 1, 2022	to M	arch 31, 2022	April 1, 2022 to April 15, 2022	
		2022 May Pre	-Election Report (Local O	ıly): A	pril 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022	
		2022 May Pos	st-Election (Q2) Report (Lo	cal O	nly): 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-Prin	nary Election Report: July	1, 202	22 to July 16, 2022	July 17, 2022 to July 23, 2022	
		2022 Post-Pri	mary (Q3) Report: July 17	2022	2 to September 30, 2022	October 1, 2022 to October 15, 2022	
\		2022 Pre-Ger	eral Election Report: Octo	oer 1,	2022 to October 22, 2022	October 23, 2022 to October 29, 2022	
		2022 Post-Ge	neral (Q4) Report: Octobe	r 23, 2	2022 to December 31, 2022	January 1, 2023 to January 17, 2023*	
1		Final Campaig	gn Finance Report Prior to	Com	mittee Termination	End of Previous Period through Today's	Date
, 3	/		*Reporting deadline extended to	next hi	Isiness day, A.R.S. 66 1-243(A) and 1-303.		

FINANCIAL SUMMARY (required):

	Activity	Cash Activity This Reporting Period	Election Cycle to Date
	Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	142.01	
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	2,169.70	2,627.40
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	2,200.78	2,516.47
(d)	= Balance at close of reporting period	110.93	



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.

GORDON JONES		4-14-2022
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

SUMMARY OF RECEIPTS (Schedule A):

		1	
/	Receipts	Cash	Equity
1. 1	Monetary Contributions Received		
(	a) Individuals - More than \$50	250.00	
(	b) Individuals - \$50 or Less (Aggregate)	280.00	
(	c) Candidate Committees		
(	d) Political Action Committees		
(	e) Political Parties		
(	f) Partnerships		
(	g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
(	h) Labor Organizations (PACs & Political Parties Only)		
(	i) Candidate's Personal Monies (Candidate Committees Only)		
(	j) Monetary Contributions Subtotal (add 1(a) through 1(i))	9	
(	(k) Refunds Given Back to Contributors		
(	(I) Net Monetary Contributions (subtract 1(k) from 1(j))		
757 TB	Loans		
	(a) Loans Received	1,650.00	
	(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))		
	Rebates and Refunds Received		
	Interest Accrued on Committee Monies		
	In-Kind Contributions Received		
	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
	(d) Political Action 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)		1
	(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		
	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
	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))		
	Joint Fundraising / Shared Expense Payments Received		
	Payments Received for Goods / Services		
9.01			
	Outstanding Accounts Receivable / Debts Owed to Committee		
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
	Miscellaneous Receipts	0.400.00	
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)	2,180.00	

#### SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	2,200.78	
2.	Contributions Made		
-	(a) Candidate Committees		
	(b) Political Action Committees		A ANTON OF THE PARTY
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
3.	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
J.	Loans (a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		and the latest of
	(a) Candidate Committees	AND THE RESERVE	
	(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)	water placement	
	(j) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		PICE MAKE
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	ATT THE TANK	
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)	2,200.78	



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

SCHEDULE A(1)(a)

	Individual Contr	ibutor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	JOANNA COLES  Date Contribution 2-9-202					
	2024 E TAURUS PLAC	CE		239.70	239.70	
1	CHANDLER	AZ	85249	255.70	200.70	
	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		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		-		
-	Enter total only if last page of schedule				239.70	
	(transfer the total received this period to "Summary of Receipts,		200.70			

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

Schedule A(1)(a), page \_\_\_1 of \_\_\_1

### 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	280.00	537.70
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	280.00	537.70

<sup>\*</sup>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	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 Contribution Receive	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u>I</u>	-		
	Committee Name					
	Street Address					
3	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receive	l ed	-		
	Committee Name	<u>.</u>				
	Street Address			-		
4	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receive	-			
	Committee Name	<b>-</b>				
	Street Address				II	
5	City	State	ZIP			-
	Committee ID Number	Date Contribution Receiv	ed			
	Enter total only if last page of schedule					1
_	(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 Commit	tee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Streel Address					
1	City	State	ZIP		6	
	Committee ID Number	Date Contribution Receive	ad			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	I ed			
	Enter total only if last page of schedule	L				
	(transfer 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 Con	tributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Co	ommittee Name					
	Str	reet Address					
1	Cit	ty	State	ZIP			
	Co	ommittee ID Number	Date Contribution Received	d			
	Co	ommittee Name					
	Str	reel Address					
2	Cit	ty	State	ZIP			r.
	Co	ommittee ID Number	Date Contribution Receive	d			
	Co	ommittee Name					
	Sta	reet Address					
3	Cit	ty	State	ZIP			
	Co	ommittee ID Number	Date Contribution Receive	ed			
F	Co	ommittee Name					
	Sti	reet Address		_			
4	Cit	ity	State	ZIP			
	Co	ommittee ID Number	Date Contribution Receive				
-	Co	ommittee Name					
	St	treet Address					
5	i Ci	ity	State	ZIP	_		
	Co	ommittee ID Number	Date Contribution Receive	ed	_		
	-						
		nter total only if last page of schedule ansfer the total received this period to "Summary of Receipts."	line 1(e))				

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

Partnership Contributor Information Amount Received Am	umulative Cumulative Amount this riting Period Election Cycle
Street Address  City State ZIP	
1 City State ZIP	
City State ZIF	
Corporation Commission File Number Date Contribution Received	
Partnership Name	
Street Address	
2 City State ZIP	
Corporation Commission File Number Date Contribution Received	
Partnership Name	
Street Address	
3 City State ZIP	
Corporation Commission File Number Date Contribution Received	
Partnership Name	
Street Address	
4 City State ZIP	
Corporation Commission File Number Date Contribution Received	
Partnership Name	
Street Address	
5 City State ZIP	
Corporation Commission File Number  Date Contribution Received	
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 C	ontributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
Γ		Corporation/LLC Name				, ,	2	
		Street Address						
	1	City	State	ZIP				
		Corporation Commission File Number	Date Contribution Receive	d				
-		Corporation/LLC Name						
		Street Address						
	2	City	State	ZIP	-			
		Corporation Commission File Number Date Contribution Received						
r		Corporation/LLC Name	1			1	1	
		Street Address						
	3	City	State	ZIP		-		
		Corporation Commission File Number		+	1			
r		Corporation/LLC Name					1	1
		Street Address						
4	4	City	State	ZIP				
		Corporation Commission File Number	Date Contribution Receive	-				
		Corporation/LLC Name	L					1
		Street Address	5	-		,		
	5	City	State	ZIP			1	
		Corporation Commission File Number	poration Commission File Number Date Contribution Received					
		Enter total only if last page of schedule	line 1(a))		e.			
\ _	_	manager and total resource and seriou to committed of Necelula.				•		- /

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

	Labor Organization	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 Contribution Receive	ed .			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Labor Organization Name					
	Street Address					
3	City	State	ZIP	_		
	Corporation Commission File Number	mmission File Number Date Contribution Received				
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	d			
	Enter total only if last page of schedule	<u> </u>				
(transfer the total control this period to "Summary of Receipts," line 1(h))						

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

	Cand	date Information	-	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name	*	Date Contribution Received			_
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer	+			
-	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 scheo					

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

Contributo  Hame  Street Address  Dity  Number (if applicable)	r Information	Date Contribution Refunded  ZIP  Date of Original Contribution	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Sity  Number (if applicable)	State	ZIP			
D Number (if applicable)	State				
Number (if applicable)	State		1		
	I	Date of Odeland Overliber			
lame		Date of Original Contribution	-		
		Date Contribution Refunded			
street Address			-		
sity	State	ZIP	-		
ID Number (if applicable)		Date of Original Contribution	_		
Name		Date Contribution Refunded			
Street Address			_		
iity	State	ZIP	-		
ID Number (if applicable)		Date of Original Contribution	-		
Name		Date Contribution Refunded			
Street Address			-		
iity	State	ZIP	-		
ID Number (if applicable)		Date of Original Contribution	-		
Name		Date Contribution Refunded			
Street Address					
ity	State	ZIP			
ID Number (if applicable)		Date of Original Contribution	_		
	Street Address  D Number (if applicable)  Jame  Street Address  Sity  D Number (if applicable)  Jame  Street Address  Sity  D Number (if applicable)  Sitreet Address  Sity  D Number (if applicable)	Street Address  Sity State  D Number (if applicable)  Jame  Sitreet Address  State  D Number (if applicable)  Jame  Sitreet Address  State  D Number (if applicable)	Jate Contribution Refunded  Street Address  State ZIP  Date of Original Contribution  Date Contribution Refunded  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date Contribution Refunded  Date Contribution Refunded  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution	Aame Date Contribution Refunded  Sitreet Address  Sity State ZIP  Diverse (if applicable) Date of Original Contribution  Date Contribution Refunded  Sitreet Address  Sity State ZIP  Date of Original Contribution  Date Contribution Refunded  Sitreet Address  Sity State ZIP  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Sitreet Address  Sity Date Original Contribution  Date of Original Contribution  Date of Original Contribution  Sitreet Address  Sity Date of Original Contribution  Date of Original Contribution	Idame Date Contribution Refunded  Sitred Address  State ZIP  Diate of Original Contribution  Date Contribution Refunded  Date Contribution Refunded  Date Contribution Refunded  Date Contribution Refunded  Date Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date Contribution Refunded  Date Contribution Refunded  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution

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



LOANS RECEIVED:

SCHEDULE A(2)(a)

/	L	ender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	RUTH JONES  Date Loan Received 2-4-2022					
L	2734 E BIRCHWOOD	PLACE		150.00	150.00	350.00
1	CHANDLER	AZ	85249		130.00	330.00
	Guarantor/Endorser Name RUTH JONES	Non-Electoral Purp	pose? (PACs and Political Parties Only)			
	RUTH JONES	Date Loan Received 2-28-20				
	Street Address 2734 E BIRCHWOOD	PLACE				4.000.00
2	CHANDLER	State AZ	85249	1,000.00	1,150.00	1,350.00
	Guarantor/Endorser Name RUTH JONES	Non-Electoral Pur	pose? (PACs and Political Parties Only)			
	Lender Name RUTH JONES		Date Loan Received 3-7-2022			
	Street Address 2734 E BIRCHWOOD PLACE					
3	city CHANDLER	State AZ	85249	500.00	1,650.00	1,850.00
	Guarantor/Endorser Name RUTH JONES	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Recei	Date Loan Received			
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Recei	ved			
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			,
	Enter total only if last page of sch	edule	<del>200 - 100 -</del>			
L	(transfer the total received this period to "Summary of	r Receipts," line 2(a))				

Schedule A(2)(a), page \_\_\_1 of \_\_\_1



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

_		Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
						1
	Streel Address					1
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
r	Lender Name		Date Forgiveness Received			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
L					l	
	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			T			
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	Lender Name				
	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."					

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

/				ı	1 1	
	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		Date Repayment Received			
	Street Address					
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name Date Repayment Received		Date Repayment Received			
	Street Address			-		
3	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	_	-		
	Borrower Name		Date Repayment Received			
	Streel Address			-		
4	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>	-		5
	Borrower Name		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.		,			

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

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/	Borrowei	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address			-		
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address			-		
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Interest Accrued			
	Street Address			-		
4	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding					
	Borrower Name		Date Interest Accrued			
5	Street Address					
	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(d))				

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



REBATES AND REFUNDS RECEIVED:

COMMITTEE ID NUMBER 21-07

SCHEDULE A(3)

	STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT
--	--

	Payor Information			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	1		
ľ						
	Original Purchase Amount	Reason for Refund/Rebat	e			
L						
	Payor Name		Date Rebate/Refund Received			
	Street Address			-		
2	City	State	ZIP	1		
L						
ı	Original Purchase Amount Reason for Refund/Rebate		e			
$\vdash$	Payor Name		Date Rebate/Refund Received			
ŀ						
ŀ	Street Address	Street Address				
3						
Ι,	City	State	ZIP			
1	Original Purchase Amount	Reason for Refund/Rebat	te	-		
	Payor Name	Date Rebate/Refund Received				
				4		
	Street Address					
4	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/Rebal	te			
$\vdash$			Date Rebate/Refund Received			
5	Payor Name	Payor Name Da				
	Street Address					
'	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	le	_		
	Original Purchase Amount	reason for Refund/Reba				
-	Enter total only if last page of sched	ıle				
	(transfer the total received this period to "Summary of Rec					

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 Contributor Information A				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name	Name Date In-Kind Contribution Rece		Date In-Kind Contribution Received			
Street Addre	iss				,	
City		State	ZIP			
Occupation		Employer				
Name			Date In-Kind Contribution Received			
Street Addre	ess					
City		State	ZIP			
Occupation		Employer				
Name			Date In-Kind Contribution Received			
Street Addre	Street Address					
City		State	ZIP			
Occupation Employer						
Name			Date In-Kind Contribution Received			
Street Addre	Street Address					
City		State	ZIP			
Occupation		Employer				
Name			Date In-Kind Contribution Received			
Street Addre	Street Address					
City		State	ZIP			
Occupation		Employer		-		
Enter to	tal only if last page of schedule					
	Street Addres  City  Occupation  Name  Street Addres  City  Occupation  Name	Name Street Address  City  Occupation  Name Street Address  City  Occupation  Name Street Address  City  Occupation  Name  Street Address  City  Occupation  Name  Street Address  City  Occupation  Name  Street Address  City  Occupation  Name  Street Address  City  Occupation  Name  Street Address  City  Occupation  Name  Street Address  City  Occupation  Name  Street Address  City  Occupation  Enter total only if last page of schedule	Street Address  City State  Occupation Employer  Name  Street Address  City State  Occupation Employer  Name  Street Address  City State  City State  Cocupation Employer  Name  Street Address  City State  Cocupation Employer  Name  Street Address  City State  City State  City State  City State  City State  Cocupation Employer  Name  Street Address  City State  Cocupation Employer  Name  Street Address  City State  Cocupation Employer  Name  Street Address  City State	Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received	Name Date In-Kind Contribution Received  Sited Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  State Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  State Address  City State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  State ZIP  Occupation Employer  Name Date In-Kind Contribution Received  Employer  Name Date In-Kind Contribution Received  Employer  Name Date In-Kind Contribution Received  Employer  Employer ZIP  Occupation Employer  Employer ZIP  Occupation Employer  Enter total only if last page of schedule	Name   Date In-Nind Contribution Received   State Reporting Period

\*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))		

<sup>\*</sup>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)

_	Candidate Committee	e Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	Address				
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
r	Committee Name	ı				
	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					
	Street Address					
4	City	State	ZIP			,
	Committee ID Number	miltee ID Number  Date In-Kind Contribution Received				1
	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					

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

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

	Political Action Committ	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name					
Street Address						
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
	Committee Name					
	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	П		
	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 Co	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 I	Received			
r	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					
	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	HISTORY AND				
	(transfer the total received this period to "Summary of Receipts.	line plen				

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			
f		Partnership Name					
		Street Address					
	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
F		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	I Received			
-		Enter total only if last page of schedule	line 5(f))				

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

	Corporation / LLC	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	I Received	-		
	Corporation/LLC Name					1
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Corporation/LLC Name					
	Street Address			-		
4	City	State	ZIP	-		
	Corporation Commission File Number  Date In-Kind Contribution Received			-		
	Corporation/LLC Name					
	Street Address			-		
5	City	State	ZIP	-		,
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		,
	Enter total only if last page of schedule					
\ L	(transfer the total received this period to "Summary of Receipts	line 5(a))				

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

	Labor Organiza	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Labor Organization Name					
	Sireel Address					
1	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Streel Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Received	-		
	Labor Organization Name					
	Street Address			-		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Received	-		
	Labor Organization Name					
	Street Address			_		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Enter total only if last page of sched	ule				
	(transfer the total received this period to "Summary of Re					

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



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

SCHEDULE A(5)(i)

Name  Street Address  1 City  Asset or Property Contributed  Name  Street Address  2 City  Asset or Property Contributed  Name  Street Address  3 City  Asset or Property Contributed  Name  Street Address  Street Address	didate Information  State	Date In-Kind Contribution Received  ZIP  Date In-Kind Contribution Received  ZIP  Date In-Kind Contribution Received		Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Street Address  1 City  Asset or Property Contributed  Name  Street Address  2 City  Asset or Property Contributed  Name  Street Address  3 City  Asset or Property Contributed  Name		ZIP  Date In-Kind Contribution Received  ZIP			
Asset or Property Contributed  Name Street Address  City Asset or Property Contributed  Name Street Address  City Asset or Property Contributed  Name Name Name Name Name Name Name Nam		Date In-Kind Contribution Received			
Asset or Property Contributed  Name  Street Address  City  Asset or Property Contributed  Name  Street Address  City  Asset or Property Contributed		Date In-Kind Contribution Received			
Name  Street Address  2  City  Asset or Property Contributed  Name  Street Address  3  City  Asset or Property Contributed	State	ZIP			
Street Address  2 City  Asset or Property Contributed  Name  Street Address  3 City  Asset or Property Contributed	State	ZIP			
City  Asset or Property Contributed  Name  Street Address  City  Asset or Property Contributed	State				
Asset or Property Contributed  Name  Street Address  Gity  Asset or Property Contributed  Name	State				
Name Street Address  City Asset or Property Contributed  Name		Date In-Kind Contribution Received			
Street Address  Gity  Asset or Property Contributed  Name		Date In-Kind Contribution Received			
3 City  Asset or Property Contributed  Name					
Asset or Property Contributed  Name	Street Address				
Name	State	ZIP			
	Asset or Property Contributed				
Street Address		Date In-Kind Contribution Received			1
	Street Address				
City	State	ZIP			
Asset or Property Contributed	Asset or Property Contributed				
Name		Date In-Kind Contribution Received			
Street Address	Street Address				
5 city	State	ZIP			
Asset or Property Contributed					
Enter total only if last page of sched	dule			* 1	

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



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

SCHEDULE A(6)

/		Source I	nformation		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 Rece						
		Street Address						
2	2	City	State	ZIP				
		Type of Item Donated						
		Name		Date In-Kind Donation Received				
		Street Address						
	3	City	State	ZIP				
		Type of Item Donated						
		Name		Date In-Kind Donation Received				
		Street Address						
	4	City	State	ZIP				
		Type of Item Donated						
		Name		Date In-Kind Donation Received				
		Street Address						
	5	City	State	ZIP				
		Type of Item Donated	1					
\		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 \_\_\_



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

/				ī		
Creditor Information			Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name	lame				
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit	_	,	
	Name					
	Street Address			-		
2	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit		-	
	Name					
3 -	Street Address			-		
	City	State	ZIP	_		
	Services or Goods Provided on Credit		Date of Extension of Credit	_		
	Name					1
4	Street Address					
4	City	State	ZIP		*	
	Services or Goods Provided on Credit Date of Extension of		Date of Extension of Credit			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Provided on Credit	1	Date of Extension of Credit			
_	Enter total only if last page of schedule					

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			
r		Name					
	Street Address						
1	2	City	State	ZIP			
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
H	-	Name					
		Street Address					
	3						
'		City	State	ZIP			
		Services or Goods Originally Provided on Credit  Date of Original Extension of Credit					
		Name					
	Street Address						
1	4	City	State	ZIP			
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
L							
		Name					
		Street Address					
	5	City	State	ZIP			
		Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
		Enter total only if last page of schedule		L	<b>.</b>		
L		(transfer the total received this period to "Summary of Receipts."					

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payment Amount Cumulative Amount this Reporting Period    Committee Name	Cumulative Amount this Election Cycle
Committee Name   Payment Date	
Tily State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date	
Date of Joint Fundraising Event (if applicable)  Committee Name  Payment Date  Street Address  City  State  ZIP  Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)  Type of Shared Expense (if applicable)  Type of Shared Expense (if applicable)  Committee Name  Payment Date	
Committee Name  Street Address  City  State  ZIP  Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)  Committee Name  Payment Date	
Street Address  City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date	
2 City State ZIP  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date	
Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)  Committee Name  Payment Date	,
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 schedule	

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			
		Name					
		Street Address					
	2	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
-	4	Name					
		Streel Address					
	3	City	State	ZIP			
		Services or Goods Purchased Payment Date		Payment Date			
r	1	Name					
		Street Address					
	4	City	State	ZIP			
			o in the second				
		Services or Goods Purchased Payment Da		Payment Date			
		Name					
		Street Address					
	5	City	State	ZIP			
		Services or Goods Purchased		Payment Date			
		Enter total only if last page of schedule					
L	- 1	(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)

Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	lame				
	Street Address				_	
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address			-		
2	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address					
3	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	$\dashv$		
	Name			ļ		
	Street Address	-				
4	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
_	Name					
	Street Address					
5	City	ZIP				
	Type of Account Receivable or Debt Owed	State	Date that Debt Accrued			
	Enter total only if last page of schedule					

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 Monles / 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)

				т	r	
	Source	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					-
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name	Name				
	Street Address					,
3	City	State	ZIP	-		
			Receipt Date .			
L						: .
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date		-	
	Name	1	•			
	Street Address	Street Address				
5	City	State	ZIP	-		
	Receipt Type		Receipt Date	-		
	Enter total only if last page of schedule				,	1.1
	(transfer the total received this period to "Summary of Receipts.	* line 12)				

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

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Recipien	t Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	BANK OF AMERICA	3-31-2022	2			
	GERMANN / GILBERT BRANCH					
1	CHALDER	AZ	85249	■ Cash	62.00	62.00
	Type of Operating Expense Paid BANK FEES	Non-Electoral Purpose	? (PACs and Political Parties Only)	☐ Credit		
	Name MICHELLE COOPER  Disbursement Date 3-23-2022					
	Street Address 2045 N CHESTNUT					
2	MESA	State AZ	<sup>ZIP</sup> 85213	■ Cook	250.00	500.00
	Type of Operating Expense Paid WEBSITE SUPPORT	Non-Electoral Purpose	? (PACs and Political Parties Only)			
	SCHUSTER PRINTING 2-28-2022					
	Street Address 517 S ROCKFORD DRIVE	<u> </u>			00.70	400.47
3	city TEMPE	State AZ	zip 85281	☐ Cash	63.78	129.47
	Type of Operating Expense Paid PRINTING	Non-Electoral Purpose	? (PACs and Political Parties Only)	☐ Credit		
	ASHTON BOWERS	Disbursement Date 3-7-2022				
	Street Address 2443 E PEACHTREE DRI	VE			4.500.00	4 500 00
4	CHANDLER	State AZ	85249	☐ Cash	1,500.00	1,500.00
	Type of Operating Expense Paid COLLECT SIGNATURES	Non-Electoral Purpose	? (PACs and Political Parties Only)	☐ Credit		
	Name ELIZABETH RUFUS	Disbursement Date 3-28-2022	<u> </u>			
	Street Address 43606 W WALLNER DRIV	Street Address				
5	MARICOPA	State AZ	zip 85138	☐ Cash ☐ Credit	300.00	300.00
	Type of Operating Expense Paid		? (PACs and Political Parties Only)			
_	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disburse	ements," line 1)				

Schedule B(1), page \_\_\_1 of \_\_\_1



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate Committee	e 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 Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			П
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number Date Contribution Made			□ Cash □ Credit		
	Committee Name					
	Street Address	Street Address				
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 schedule transfer the total disbursed this period to "Summary of Disbursements." line 2/a1)					
			edule B(2)(a), page			



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/	Political Ad	ction Committee Recipie	nt Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address	Street Address				
1	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
Ī	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution	Date Contribution Made			
	Committee Name					
	Street Address					
4		I <sub>n</sub>	ZIP			
	City	State		☐ Cash		
	Committee ID Number	Date Contribution	Made	☐ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution	Made	□ Credit		
_	Enter total only if last page o	of schedule				



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party Re	cipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Commi	nittee Name					
Street	Address					
1 City		State	ZIP	□ Cash		
Commi	nittee ID Number	Date Contribution Made		☐ Credit		
Commi	Committee Name					
Street	Address					
2 City		State	ZIP	□ Cash		
Commi	nittee ID Number	Date Contribution Made		☐ Credit		,
Commi	nittee Name					
Street	Address					
3 City		State	ZIP	□ Cash		
Comm	nittee ID Number	Date Contribution Made		□ Credit		
Comm	nittee Name					
Street	l Address					-4
4 City		State	ZIP	☐ Cash		
Comm	nittee ID Number	Date Contribution Made		☐ Cash		
Comm	nittee Name					
Street	Street Address					
5 City		State	ZIP	□ Cash		
Comm	nittee ID Number	Date Contribution Made	1	□ Cash □ Credit		
Ente	er total only if last page of schedule	l				



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnership	Recipient Information	on	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 Contribution Made		□ Cash □ Credit		
	Partnership Name					
	Street Address	Street Address .				
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	.1	□ Cash □ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	1	☐ Cash		
	Partnership Name					
	Street Address	Street Address				
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Cash		
	Enter total only if last page of sched	ule				



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	n / LLC Recipient Info	ormation	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 M	Made	☐ Credit		
	Corporation/LLC Name					
	Street Address	Street Address				
2	City	State	ZIP	□ Cash		-
	Corporation Commission File Number	Date Contribution I	Made	□ Credit		
	Corporation/LLC Name					
	Street Address	,				ı
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	□ Credit		
	Corporation/LLC Name					
	Street Address	<u></u>				
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	☐ Credit		
	Corporation/LLC Name	,				
	Street Address					
5	City	State	ZIP	□ Cash		1
	Corporation Commission File Number	Date Contribution	Made	☐ Credit		
_	Enter total only if last page of scl	nedule				

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organization	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		☐ Credit		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		☐ Cash	☐ Cash ☐ Credit	
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	ber Date Contribution Made		☐ Cash☐ Credit		
1	Labor Organization Name					
	Street Address					
4	City	State	ZIP	- Cont		
	Corporation Commission File Number	Date Contribution Made	l	☐ Cash☐ Credit		
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Enter total only if last page of schedule	errents ! line O/O				
_	nvanara wie total disoursed hijs defilot to "Summary Of Disours	omonis. Inic 2(1))				



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Contributo	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	-		
	Committee Name	Date Refund Received				
	Street Address	Street Address				
3	City	State	ZIP	_		'
	Committee ID Number	Date of Original Contribution	_			
	Committee Name	Committee Name				
	Street Address			-		
4	City	State	ZIP	-		
	Committee ID Number	Committee ID Number		-	ú.	
-	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	oments." line 3/h))				

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LOANS MADE: SCHEDULE B(3)(a)

_	Borrower Name	orrower Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street 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	1			
	Borrower Name	Borrower Name				
	Street Address	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	Street Address				
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Enter total only if last page of sch-					

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committee id number 21-07

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

		Guarantor Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					187
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name					
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name					
	Street Address					U
3	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name					
	Street Address		-			
4	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	Date Loan Guaranteed		_	
_	Guarantor Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	ed			
						Т

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
	Borrower Name		Date Forgiveness Made			
	Street Address	Street Address				
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address	ress				
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address	Streel Address				
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule		y			
	(transfer the total disbursed this period to "Summary of Disburse	ments." line 3(c1)				

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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		Date Repayment Made			
		Street Address		1			
	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				
		Lender Name		Date Repayment Made	-		
		Street Address		L			
	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				
		Enter total only if last page of schedule	ments." line 3(d))				

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committee id number 21-07

INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lende	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Lender Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Lender Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Lender Name	<u> </u>	Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
-	Lender Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

_	/	Rec	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1		Name of Original Payor		Date Rebate/Refund Made			
		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					
;	3	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					
1	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					7
	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		1			
		, and posses to desimilarly of					

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IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committee	e 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)

/	Political Action Commi	ttee Recipient Inf	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	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
r	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	n Made			
	Enter total only if last page of schedule (transfer the total disbursed this period to *Summary of Disburse	ements.* line 5/h)\		1		
_	production die total disbursed this belief to continuely of Disburse	ansato. Inc oton			/	

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

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/						
_		ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				¥
	Street Address					·
1	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Made			
	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(c))				

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

Destruction Desiries that		Amount	Cumulative Amount this	Cumulative Amount this
Partnership Recipient Inf	ormation	Contributed	Reporting Period	Election Cycle
Partnership Name				
Street Address				
State	ZIP			
Date In-Kind 0	Contribution Made			
Street Address				
State	ZIP			
Date In-Kind	Contribution Made			
Partnership Name				
Street Address				
State	ZIP			
Date In-Kind	Contribution Made			
L				
State	ZIP			
Date In-Kind	Contribution Made			
Street Address				
State	ZIP			
Date In-Kind	Contribution Made			
ge of schedule		ate In-Kind Contribution Made		

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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
Γ		Corporation/LLC Name					
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
ŀ		Corporation/LLC Name					
		Street Address					
	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
ſ		Corporation/LLC Name					
		Street Address					
	3	City	State	ZIP			
		Corporation Commission File Number  Date In-Kind Contribution Made					
		Corporation/LLC Name					
		Street Address					
1	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution Made				
		Corporation/LLC Name					
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
	- 1	Enter total only if last page of schedule					
\ _		(transfer the total disbursed this period to "Summary of Disburse	ments." line 5(e))				

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IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organization	n Recipient Inform	ation	Amount Contributed	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	I Made			
_	Labor Organization Name	1				
2	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name	L				
	Street Address			_		
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made		_	
	Labor Organization Name	1				1
	Street Address	1				
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name	*A				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	I Made			
	Enter total only if last page of schedule					
_	(transfer the total disbursed this period to "Summary of Disburs	ements," line 5(f))			L	

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INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/		Recipient Informat		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			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address		_			
3	City	State	ZIP			
	Candidate(s) Supported (including % supported)	te(s) Supported (including % supported)  Candidate(s) Opposed (including % supported)		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
-	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (inc	Liuding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Enter total only if last page of schedul					

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BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure F	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name h		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
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			
	Ballot Measure(s) Supported (including % supported)	ed (including % supported)  Ballot Measure(s) Opposed (including % opposed)		☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast		_ L Great			
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			]		
3	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	d (including % supported)  Bailot Measure(s) Opposed (including % opposed)		☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Recipient Name		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 □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Enter total only if last page of schedul (transfer the total disbursed this period to *Summary of Disb					



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 Rec	alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1	1	
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?  Candidate Sought to be Recall Order?		alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		1			
3	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reco	alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		I.	1		
4	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reco	<u>l</u> alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	First Publication, Display, Delivery, or Broadcast Office Held		_ □ Credit		
	Enter total only if last page of schedul	e				
	(transfer the total disbursed this period to "Summary of Disb	ursements," line 8)				

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



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	Bei	nefitted 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	Type of Benefit Provided				
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					*
2	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					,
3	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
4	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Enter total only if last page of sche					
	(transfer the total disbursed this period to "Summary of	Dispursements," line 9)				

Schedule B(9), page \_\_\_ of \_\_\_



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	/	Recipient Com	mittee Information	1	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name		Payment Date			
		Street Address					
1	1	City	State	ZIP			
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	I if applicable)	☐ Cash☐ Credit		
	1	Committee Name		Payment Date			
		Street Address					
2	2	City	State	ZIP	□ Cash		
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	I if applicable)	☐ Credit		
		Committee Name		Payment Date			
		Street Address					
3	3	City	State	ZIP	□ Cash		
		Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	I if applicable)	☐ Credit		
		Committee Name		Payment Date			
	١	Street Address					
4	1	City	State	ZIP	□ Cash		
	1	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	if applicable)	☐ Credit		
		Committee Name		Payment Date			
5		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 schedule					
_	_(	(transfer the total disbursed this period to *Summary of Disburse	ements," line 10)				

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



REIMBURSEMENTS MADE:

SCHEDULE B(11)

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



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt Ir	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
			Date that Debt Accided			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name		l.			
	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts,"	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 14)	-	



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipien	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					
	Street Address			E.		
1	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	□ Credit		
	Name					
	Street Address					
2	City		ZIP	□ Cook		
	Disbursement Type	<u> </u>	Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
4	City		ZIP			
	Disbursement Type	Туре		☐ Cash☐ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Disbursement Type Disbursement Date			□ Cash □ Credit		
	Enter total only if last page of schedule					