

COMMITTEE INFORMATION (required)	COMMITTEE	<b>INFORMATION</b>	(required)
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Committee Information:

Committee Name:

□ County Office:

□ City/Town Office:

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

Office	Sought:

Special District Office:School Board District:

Cumulative Report:

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

REPORTING PERIOD (check one):

REPORTING PERIOD	REPORT DUE
2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023	February 26, 2023 to March 4, 2023
2023 March Post-Election (Q1) Report (Local Only): February 26 to March 31, 2023	April 1, 2023 to April 15, 2023
2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 15, 2023
2023 Quarter 2 Report: April 1, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
2023 Quarter 3 Report: July 1, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
2023 Quarter 4 Report: October 1, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024	February 25, 2024 to March 2, 2024
2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
2024 Quarter 1 Report: January 1, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024	May 5, 2024 to May 11, 2024
2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
2024 Quarter 2 Report: April 1, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
2024 Pre-Primary Election Report: July 1, 2024 to July 20, 2024	July 21, 2024 to July 27, 2024
2024 Post-Primary Election (Q3) Report: July 21, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
2024 Pre-General Election Report: October 1, 2024 to October 19, 2024	October 20, 2024 to October 26, 2024
2024 Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024	January 1, 2025 to January 15, 2025
Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period ( <i>i.e.</i> ending balance from the previous reporting period)		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)		
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)		
(d) = Balance at close of reporting period		
Check here if filing <u>no</u> financial activity during the reporting period. Lines (a)-(d) still mu following page need to be filed.	ust be completed, but only th	his cover page and the

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity.



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.

Printed Name of Committee Treasurer

Signature of Committee Treasurer

Date



SUMMARY OF RECEIPTS (Schedule A):

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



SUMMARY OF DISBURSEMENTS (Schedule B):

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



/	Ind	dividual Contributor Inforr	nation	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			
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	News					
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer		_		
	Name		Date Contribution Received			
	Street Address					
5						
5	City	State	ZIP			
	Occupation	Employer	1			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(a))					



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

SCHEDULE A(1)(b)

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

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

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



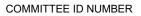


#### MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

	/ Individual Cont	ributor Informatic	on 	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Na	ame		Date Contribution Received			
St	treet Address					
1 <sub>Ci</sub>	ity	State	ZIP	-		
00	ccupation	Employer		_		
Na	ame		Date Contribution Received			
St	treet Address			_		
2 <sub>Ci</sub>	ity	State	ZIP	_		
00	ccupation	Employer		_		
Na	ame		Date Contribution Received			
St	treet Address			_		
3 <sub>Ci</sub>	ity	State	ZIP	_		
	ccupation	Employer		_		
Na	ame		Date Contribution Received			
St	treet Address					
4 <sub>Ci</sub>	ity	State	ZIP			
00	ccupation	Employer	I	-		
Na	ame		Date Contribution Received			
St	treet Address		I	-		
5 <sub>Ci</sub>	ity	State	ZIP	_		
00	ccupation	Employer		-		
Ei (tr	nter total only if last page of schedule ransfer the total received this period to "Sum	mary of Receipts "	line 1(c))			
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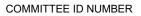


MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/	Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
2		1	Γ			
2	City	State	ZIP			
	Committee ID Number					
	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	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Receipts " !	ine 1(d))			

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





MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/	1	n Committee Contributor	Information	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 Red	ceived			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
•	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Re	Ceived			
	Enter total only if last page of s (transfer the total received this per	schedule				

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



## MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

	Politic	cal Party Contributor Infor	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution R	leceived			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			
_	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			
	Enter total only if last page c (transfer the total received this p	f schedule eriod to "Summary of Receip	ots," line 1(f))			



## MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partners	nip Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name			1 3		
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
-	Corporation Commission File Number	poration 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					
1	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 sch (transfer the total received this period	Inedule to "Summary of Recei	nts." line 1(a))	I		



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	/						
	/	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 Corporation Commission File Number	State Date Contribution Receive	ZIP			
_		Corporation/LLC Name		-			
2	,	Street Address City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive				
		Corporation/LLC Name Street Address			-		
3	3 -	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	d			
4		Street Address					
		City Corporation Commission File Number	State Date Contribution Receive	ZIP			
		Corporation/LLC Name			-		
5		Street Address City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ad			
		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(h))			
			Sche	edule A(1)(h), page of	·		





MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

COMMITTEE ID NUMBER

	Labor Organiza	ation Contributor Infor	mation	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 Receiv	ved	_		
	Labor Organization Name					
	Street Address			_		
2	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Recei	ved	_		
	Labor Organization Name					
	Street Address		_			
3	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Recei	ved	_		
	Labor Organization Name					
	Street Address			_		
4	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Recei	ved	_		
	Labor Organization Name					
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Recei	ved	-		
_	Enter total only if last page of scher (transfer the total received this period to	dule "Summary of Receipts,"	line 1(i))			
					·	



#### MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

	Candid	ate 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	reet 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 schedul (transfer the total received this period to "S	e ummary of Receipts	s," line 1(j))	1		

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REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	C	Contributor Informatio	n	Amount Refunded	Cumulative Amount this	Cumulative Amount th
T	Name		Date Contribution Refunded		Reporting Period	Election Cyc
_						
	Street Address					
	City	State	ZIP			
ļ	ID Number (if applicable)		Date of Original Contribution	_		
	Name		Date Contribution Refunded			
-	Street Address			_		
	City	State	ZIP	_		
-	ID Number (if applicable)		Date of Original Contribution	-		
-	Name		Date Contribution Refunded			
-	Street Address			_		
;	City	State	ZIP	-		
-	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address			_		
	City	State	ZIP	_		
-	ID Number (if applicable)		Date of Original Contribution	_		
	Name		Date Contribution Refunded			
	Street Address		I	-		
-	City	State	ZIP	-		
	ID Number (if applicable)		Date of Original Contribution	-		
	Enter total only if last page of s					

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



LOANS RECEIVED:

/	/ 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? (I	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? (I	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (I	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
5	City	State	ZIP	-		
	Guarantor/Endorser Name	Non-Electoral Purpose? (I	PACs and Political Parties Only)	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sum		ine 2(a))	1		
		,, ,, , , , , , , , , , , , ,	(//			

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

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SCHEDULE A(2)(a)



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A	(2)	(b)

/		r Information		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		Data Faraiyanaaa Raasiyad			
			Date Forgiveness Received			
	Street Address					
2	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		_		
	Lender Name		Date Forgiveness Received			
	Street Address		_			
3			1	_		
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding		_		
	Lender Name		Date Forgiveness Received			
	Street Address			_		
	Sileer Address					
4	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstanding		_		
	Lender Name		Date Forgiveness Received			
			Date i orgiveness neceived			
	Street Address					
5	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		4		
		, anount our outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Su	)		·		

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



COMMITTEE ID NUMBER

## REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrowe	r Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address			_		
	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address			_		
;	<u></u>	Shake	ZIP	_		
	City	State		_		
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Borrower Name	_	Date Repayment Received			
	Street Address		1			
	City	State	ZIP	-		
.,	Original Amount Borrowed	Amount Still Outstanding		-		

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INTEREST ACCRUED ON LOANS MADE:

# STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

# SCHEDULE A(2)(d)

	1	er Information	_	Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumu Amour Electior
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	3			
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	9			
	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	9			
	Borrower Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	9			
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	9			
	Enter total only if last page of schedule					

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



COMMITTEE ID NUMBER	

# STATE OF ARIZONA

	Pa	or 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	-		
	Original Purchase Amount	Reason for Refund/Rebat	le			
	Payor Name Date Rebate/Refund Received					
	Street Address					
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebai	le			
	Payor Name		Date Rebate/Refund Received			
	Street Address		1	-		
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	le			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	le			
	Payor Name	1	Date Rebate/Refund Received			
	Street Address		l			
5	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/Reba	le			
	Enter total only if last page of sched (transfer the total received this period to	ule Summary of Receipts,"	line 3)	1		



# 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 \_\_\_\_





CLE:*
CL

SCHEDULE A(5)(a)

/	/ Individual Con	tributor Informa	ition	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		Date In-Kind Contribution Received			
	Street Address		<b>I</b>	-		
1	City	State	ZIP	-		
	Occupation	Employer	<b>I</b>	-		
	Name		Date In-Kind Contribution Received			
	Street Address		I	1		
5	City	State	ZIP	-		
	Occupation	Employer	I	-		
		I nmary of Receipt		1		

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



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

SCHEDULE A(5)(b)

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

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

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





IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

Candidate Committee Contributor Information Amount Received Amount this Amount							
Steel. Address       1     Gyr     Sate       2     Committee ID Number     Date In Kind Contribution Received       2     Committee ID Number     Date In Kind Contribution Received       2     Gyr     Sate       3     Committee ID Number     Date In Kind Contribution Received       3     Committee ID Number     Date In Kind Contribution Received       3     Committee ID Number     Date In Kind Contribution Received       4     Committee ID Number     Date In Kind Contribution Received       5     Committee ID Number     Date In Kind Contribution Received       4     Committee ID Number     Date In Kind Contribution Received       6     Granuttee Rame     Granuttee Rame       5     Granuttee Rame     Granuttee Rame       6     Granuttee Rame     Granuttee Rame       6     Granuttee Rame     Granuttee Rame       7     Granuttee Rame     Granuttee Rame       8     Grame     Granuttee Rame       1	/		ee Contributor Info	rmation	Amount Received	Amount this	Cumulative Amount this Election Cycle
1     City     State     ZP       Committee ID Number     Date In Kind Contribution Received     Image: Contribution Received       2     Committee Name     State     ZP       3     State     ZP       Committee ID Number     Date In Kind Contribution Received     Image: Contribution Received       4     Committee ID Number     Date In Kind Contribution Received       5     Committee ID Number     Date In Kind Contribution Received       6     Committee ID Number     Date In Kind Contribution Received       6     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee ID Number     Date In Kind Contribution Received       7     Committee Name     Committee Name <td></td> <td>Committee Name</td> <td></td> <td></td> <td></td> <td></td> <td></td>		Committee Name					
$ \begin{array}{ c c c c c } \hline \begin{tabular}{ c c } \hline \$		Street Address					
Image: Committee Name     Image: Committee Name       2     Committee Name       3     Committee Name       4     Committee Name       4     Committee Name       5     Committee Name       5     Committee Name	1	City	State	ZIP			
2     Steet Address       Oty     State       Ormittee ID Number     Date In-Kind Contribution Received       3     Committee Name       3     Steet Address       City     State       Committee Name     Date In-Kind Contribution Received       4     Committee Name       2     Committee Name       5     Committee Name       2     Date In-Kind Contribution Received		Committee ID Number	Date In-Kind Contribution	Received			
2     City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received     Image: Committee Name       3     Committee Name     Image: Committee Name       3     City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received     Image: Committee Name       3     Committee Name     Image: Committee Name       4     Committee Name     Image: Committee Name       5     Teter Address     Image: Committee Name       6     Committee Name     Image: Committee Name       5     Committee Name     Image: Committee Name       5     Committee Name     Image: Committee Name       5     Committee Name     Image: Committee Name		Committee Name					
April International Contribution Received     Committee ID Number     Date In-Kind Contribution Received       Committee Name     State     ZIP       City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Quartitiee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Image: Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Image: Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Image: Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Image: Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Image: Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Image: Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       Image: Committee Name     State     ZIP       Image: Committee Name     Image: Committee ID Number     Image: Committee ID Number       Image: Committee Name     Image: Committee ID Number     Image: Committee ID Number       Image: Committee Name     Image: Committee ID Number     Image: Committee ID Number       Image: Committee ID Number     Image: Committee ID Number     Image: Committee ID Number    <		Street Address			-		
Image: Committee Name     Street Address       Committee Name     State       Committee ID Number     Date In-Kind Contribution Received       Committee Name     Street Address       Committee ID Number     Date In-Kind Contribution Received       Committee ID Number     Date In-Kind Contribution Received       Committee ID Number     Date In-Kind Contribution Received       Committee Name     Street Address       City     State       Committee ID Number     Date In-Kind Contribution Received       Committee ID Number     Date In-Kind Contribution Received	2	City	State	ZIP	-		
3     Stret Address       4     City     State       2     City     State       2     Committee ID Number     Date In-Kind Contribution Received       4     Committee Name       5     State       4     City       6     State       2     City       6     State       2     Committee ID Number       0     Date In-Kind Contribution Received		Committee ID Number	Date In-Kind Contribution	Received			
3     City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received     Image: Committee Name       4     Committee Name     Street Address       4     City     State     ZIP       City     State     ZIP       City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received     Image: Committee ID Number       6     Committee ID Number     Date In-Kind Contribution Received       5     Committee Name     State       5     Street Address     State		Committee Name					
3     City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received     Image: Committee Name       4     Committee Name     State     ZIP       City     State     ZIP       City     State     ZIP       City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received     Image: Committee Name       5     Committee Name     State							
Sty State   Committee ID Number Date In-Kind Contribution Received     Committee Name   Street Address   City   State   ZIP   Committee ID Number   Date In-Kind Contribution Received     City   State   ZIP   Committee ID Number     Date In-Kind Contribution Received     State   ZIP   Committee ID Number     Date In-Kind Contribution Received     State		Street Address					
Committee Name     Street Address       City     State       Committee ID Number     Date In-Kind Contribution Received       Street Address       Street Address	3	City	State	ZIP			
A     Street Address       City     State       Committee ID Number     Date In-Kind Contribution Received       Committee Name       Street Address		Committee ID Number	Date In-Kind Contribution	Received			
4     City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received       Committee Name       Street Address		Committee Name					
City     State     ZIP       Committee ID Number     Date In-Kind Contribution Received       Committee Name       Street Address		Street Address					
Committee Name       Street Address	4	City	State	ZIP			
Street Address		Committee ID Number	Date In-Kind Contribution	Received	-		
5		Committee Name					
5 City State ZIP		Street Address					
	5	City	State	ZIP			
Committee ID Number Date In-Kind Contribution Received		Committee ID Number	Date In-Kind Contribution	Received			

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





IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/	Political Actior	n Committee Contributor	Information	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	on Received				
	Committee Name						
-	Street Address						
2	City	State	ZIP				
ŀ	Committee ID Number	Date In-Kind Contributi	on Received				
_	Committee Name						
-	Street Address						
3	City	State	ZIP				
-	Committee ID Number	Date In-Kind Contributi	on Received				
	Committee Name						
-	Street Address						
4	City	State	ZIP				
-	Committee ID Number	Date In-Kind Contributi	on Received		-		
	Committee Name						
ŀ	Street Address						
5	City	State	ZIP				
ŀ	Committee ID Number	Date In-Kind Contributi	on Received				
- 1							

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



#### IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Politi	cal Party Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	bution Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
	Enter total only if last page of (transfer the total received this p	of schedule period to "Summary of Receij	ots," line 5(f))	I		



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersł	nip Contributor Inforr	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Partnership Name					
l	Street Address					
-	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Partnership Name					
	Street Address					
-	City	State	ZIP			
	Corporation Commission File Number	oration Commission File Number Date In-Kind Contribution Received				
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution 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 sch (transfer the total received this period	l nedule to "Summary of Pocoir	ots " line 5(a))	I		





IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

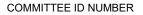
/	/	Corporation / LLC C	Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Corporation/LLC Name					
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
		Corporation/LLC Name					
		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	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 (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(h))			
			201	hedule A(5)(h), page	of		
			00		<u></u>		



## IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organi	zation Contributor I	nformation	Amount Receive	ed 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 Contr	ibution Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Received			
	Enter total only if last page of sch (transfer the total received this period	l edule to "Summary of Recei	pts," line 5(i))			





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

SCHEDULE A(5)(j)

	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					
1	Name	Date In-Kind Contribution Received				
	Street Address					
5	City	State	ZIP	]		
	Asset or Property Contributed	1				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	menu of Dessints "		1		





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

SCHEDULE A(6)

/	Source	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Donation Received		1 0	,	
-	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 Donated	1	1	-		
	Name	Date In-Kind Donation Received				
-	Street Address					
3	City	State	ZIP			
-	Type of Item Donated	1				
	Name	Date In-Kind Donation Received				
•	Street Address					
4	City	State	ZIP			
	Type of Item Donated					
	Name	Date In-Kind Donation Received				
	Street Address	1				
5	City	State	ZIP			
	Type of Item Donated					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	1			
			edule A(6), page of			



#### EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

	Creditor 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	I	Date of Extension of Credit	_		
	Name					
	Street Address					
2	City	State	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	I	Date of Extension of Credit	_		
	Name					
	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	1	Date of Extension of Credit			
	Enter total only if last page of sch (transfer the total received this period					



## 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	-		
	Name	Name				
	Street Address	-				
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
	Name					
	Street Address		-			
4	City	State	ZIP	-		
	Services or Goods 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	-		
	Enter total only if last page of schedule (transfer the total received this period to "Su					



## JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

/ Payor Committee Information			ation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address		I			
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	ixpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
_	Enter total only if last page of sche	dule				

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



COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

/	Payor	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name Street Address		_			
4						
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased	Payment Date	-			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date	-		
	Name					
	Street Address		-			
4	City	State	ZIP			
	Services or Goods Purchased	Payment Date				
	Name					
	Street Address		-			
5	City	State	ZIP	-		
	Services or Goods Purchased		Payment Date	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sur			]		





OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/	/	Infor	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
		Name					
		Street Address					
1	1	City	State	ZIP			
		Type of Account Receivable or Debt Owed	Date that Debt Accrued				
		Name					
		Street Address					
2	2	City	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
		Name					
		Street Address					
3	3	City	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
		Name					
		Street Address					
4	4	City	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
		Name					
		Street Address					
5	5	City	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 10)			
			So	chedule A(10), page o	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)

		Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type	1	Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP	_		
	Receipt Type		Receipt Date			
	Name					
	Street Address			_		
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address	street Address				
1	City	State	ZIP			
	Receipt Type		Receipt Date	_		
_	Name					
		_				
5	Street Address	Т	1	_		
-	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Sur					

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



### DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

		ent Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cycl
	Name	Disbursement Date				
Ī	Street Address	_				
1	City	State	ZIP	_		
ľ	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
ľ	Street Address					
2	City	State	ZIP			
-	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address	Street Address				
3	City	State	ZIP			
-	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
-	Street Address			_		
4	City	State	ZIP	_		
ŀ	Type of Operating Expense Paid		(PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address			-		
5	City	State	ZIP	 □ Cash		
ŀ	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	□ Credit		

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





MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committ	ee Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address		_			
1	City	State	ZIP	_ _ □ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
	Committee Name					
	Street Address			_		
2	City State ZIP		ZIP	_		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	mmittee ID Number Date Contribution Made			□ Cash □ Credit		
	Committee Name					
	Street Address			-		
4	City	State	ZIP	_		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	Committee Name				
	Street Address			_		
5	City	State	ZIP	-		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		

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





MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/		ction Committee Recipient	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			□ Credit		
	Committee Name					
	Street Address					
2	City	State ZIP		□ Cash		
	Committee ID Number Date Contribution Made					
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number	mmittee ID Number Date Contribution Made				
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution M	lade			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution M	lade	☐ Cash ☐ Credit		
-	Enter total only if last page of schedule					

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



### MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Politic	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl		
	Committee Name					
-	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution M	lade			
	Committee Name					
	Street Address					
2	City	State	ZIP			
-	Committee ID Number	Date Contribution M	fade	□ Cash □ Credit		
	Committee Name					
-	Street Address					
3	City	State	ZIP			
-	Committee ID Number	Date Contribution N	lade	□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
-	Committee ID Number	Date Contribution M	flade	□ Cash □ Credit		
	Committee Name					
ŀ	Street Address					
5	City	State	ZIP			
ŀ	Committee ID Number	Date Contribution N	lade	□ Cash □ Credit	□ Cash □ Credit	
	Enter total only if last page of (transfer the total disbursed this p	schedule eriod to "Summary of Disbu	rsements," line 2(c))			



#### MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	hip Recipient Informa	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl		
	Partnership Name				Election by o		
	Street Address						
1	City State ZIP			□ Cash			
	Corporation Commission File Number	Date Contribution Ma	de				
	Partnership Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit	□ Cash □ Credit		
	Partnership Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit			
	Partnership Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit			
	Partnership Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Ma	l ade	□ Cash □ Credit			





MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/ LLC Recipient Info	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 Contribution M	ade	□ Cash □ Credit		
	Corporation/LLC Name					
Street Address						
2	City State ZIP					
	Corporation Commission File Number	Date Contribution N	Date Contribution Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution N	lade	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution N	lade	□ Cash □ Credit		
	1					



### MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

		ation Recipient Inforr	Amount Contributor	Amount this Reporting Period	Amount this Election Cycle	
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
ŀ	Corporation Commission File Number	□ Cash □ Credit				
	Labor Organization Name					
F	Street Address					
2	City	State	ZIP			
ŀ	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Labor Organization Name					
-	Street Address					
3	City	State	ZIP			
-	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Labor Organization Name					
F	Street Address					
4	City	State	ZIP			
ŀ	Corporation Commission File Number	Date Contribution Made		□ 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 sched (transfer the total disbursed this period to	ule	ments." line 2(f))			



#### CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/		Contributor Informatic	n	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount thi 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	City State		_		
	Committee ID Number	Committee ID Number		-		
	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 (transfer the total disbursed this					

Schedule B(2)(h), page\_\_\_\_ of \_\_\_\_



LOANS MADE:

/				1	Cumulative	Cumulative
	Borrower	Information		Amount Loaned	Amount this Reporting Period	Amount this Election Cycle
	Borrower Name					
	Street Address	ddress				
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	ttor/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 "Sum					

Schedule B(3)(a), page\_\_\_\_of

SCHEDULE B(3)(a)



#### LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

	Guar	Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc		
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
_	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	1			
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	1	—		
_	Enter total only if last page of scheo (transfer the total received this period to	lulo				

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



#### FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/	Borrower			1	Cumulative	
		Information	Γ	Amount Forgiven	Amount this Reporting Period	Cumulative Amount this Election Cycle
E	Borrower Name	Date Forgiveness Made				
s	Street Address		I			
1	City	State	ZIP	-		
(	Original Amount of Loan	Amount Still Outstanding		-		
E	Borrower Name		Date Forgiveness Made			
ę	Street Address			-		
2	City	State	ZIP	-		
(	Original Amount of Loan Amount Still Outstand			-		
	Borrower Name		Date Forgiveness Made			
				-		
	Street Address					
3	City	State	ZIP			
C	Original Amount of Loan	Amount Still Outstanding	I			
E	Borrower Name		Date Forgiveness Made			
ç	Street Address		-			
4	City	State	ZIP	-		
(	Original Amount of Loan	Amount Still Outstanding		-		
F	Borrower Name		Date Forgiveness Made			
٤						
5 0	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		4		
	Enter total only if last page of schedule transfer the total disbursed this period to "Sur					

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



REPAYMENT ON LOANS RECEIVED:

Original Amount Borrowed

1 <sub>City</sub>

2 City

3 City

4 City

5 City

Lender I	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Lender Name		Date Repayment Made				
Street Address						
City	State	ZIP				
Original Amount Borrowed	Amount Still Outstanding					
Lender Name	L	Date Repayment Made				
Street Address						
City	State	ZIP				
Original Amount Borrowed	Amount Still Outstanding					
Lender Name		Date Repayment Made				
Street Address						
City	State	ZIP				
Original Amount Borrowed	Amount Still Outstanding					
Lender Name		Date Repayment Made				
Street Address						
City	State	ZIP				
Original Amount Borrowed	Amount Still Outstanding					
Lender Name		Date Repayment Made				
Street Address						

Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 3(d))

State

Amount Still Outstanding

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

-

ZIP

SCHEDULE B(3)(d)



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

						$\sim$
/	Lender Information			Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Lender Name		Date Interest Accrued			
	Street Address		-			
	City	State	ZIP	-		
-	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Interest Accrued			
-	Street Address			-		
2	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			
	irreet Address			-		
-	City	State	ZIP	-		
-	Original Amount Borrowed	Amount Still Outstanding		-		
	Enter total only if last page of schedule					

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



### REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

Red	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name of Original Payor		Date Rebate/Refund Made			
Street Address					
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			_		
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					
City	State	ZIP	_		
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	_		
Name of Original Payor		Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	_		
Name of Original Payor		Date Rebate/Refund Made			
Street Address			_		
City	State	ZIP	-		
	Name of Original Payor         Street Address         City         Corporation Commission File Number (if applicable)         Name of Original Payor         Street Address         City         Corporation Commission File Number (if applicable)         Name of Original Payor         Street Address         City         Corporation Commission File Number (if applicable)         Name of Original Payor         Street Address         City         Corporation Commission File Number (if applicable)         Name of Original Payor         Street Address         City         Corporation Commission File Number (if applicable)         Name of Original Payor         Street Address         City         Street Address         City         Street Address         City         Name of Original Payor         Name of Original Payor         Name of Original Payor	Street Address         City       State         Corporation Commission File Number (if applicable)       Original Payment Amount         Name of Original Payor       Street Address         City       State         Corporation Commission File Number (if applicable)       Original Payment Amount         Name of Original Payor       Original Payment Amount         Name of Original Payor       Original Payment Amount         Street Address       City         Street Address       City         Street Address       Original Payment Amount         Name of Original Payor       State         Corporation Commission File Number (if applicable)       Original Payment Amount         Name of Original Payor       State         City       State         City       State         Street Address       City         Street Address       City         Street Address       State         City       State         Name of Original Payor       Original Payment Amount         Name of Original Payor       Original Payment Amount         Name of Original Payor       Original Payment Amount	Name of Original Payor     Date Rebate/Refund Made       Street Address     ZIP       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       City     State     ZIP       Corporation Commission File Number (if applicable)     Original Payment Amount     Date Rebate/Refund Made       Street Address     ZIP     Corporation Commission File Number (if applicable)     Original Payment Amount     Date of Original Payment       Name of Original Payor     Date Rebate/Refund Made     ZIP     Street Address     ZIP       City     State     ZIP     ZIP     Street Address     ZIP       City     State     ZIP     ZIP     Street Address     ZIP       Corporation Commission File Number (if applicable)     Original Payment Amount     Name of Original Payor     Date Rebate/Refund Made       Street Address     ZIP     Corporation Commission File Number (if applicable)     Original Payment Amount     Name of Original Payor       Name of Original Payor     Date Rebate/Refund Made     ZIP     Corporation Commission File Number (if applicable)     Original Payment Amount     Name of Original Payor       Name of Original Payor     Date Rebate/Refund Made     ZIP	Refunded     Refunded       Name of Original Payor     Date Rebate/Refund Made       Street Address     ZIP       City     State     ZIP       Corporation Commission File Number (if applicable)     Original Payment Amount     Date Rebate/Refund Made       Name of Original Payor     Date Rebate/Refund Made     Street Address       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       City     State     ZIP       Street Address     Date relonginal Payor     Date Rebate/Refund Made       Street Address     City     State     ZIP       City     State     ZIP       Street Address     City     State     ZIP       City     State     ZIP       City <td>Recipient Information         Amount resided / Reporting Period           Name of Drighal Payer         Date RetaileReturd Made         Amount resided / Reporting Period           Direct Adtress         22P         Interim Compared Payer         Date of Original Payment           Direct Adtress         Date of Original Payment         Date of Original Payment         Date of Original Payment           Corporation Commission File Number (If applicable)         Original Payment Amount         Date of Original Payment         Environment Payer           Direct Address         ZIP         Date of Original Payment         Environment Payer         Environment Payer           Direct Address         ZIP         Date of Original Payment         Environment Payer         Environment Payer           Corporation Commission File Number (If applicable)         Original Payment Amount         Date of Original Payment         Environment Payer           Name of Original Payer         Date of Original Payment         Date of Original Payment         Environment Payer           City         State         ZIP         Environment Payer         Environment Payer           City         Bate         ZIP         Environment Payer         Environment Payer           City         State         ZIP         Environment Payer         Envinter Payer           City</td>	Recipient Information         Amount resided / Reporting Period           Name of Drighal Payer         Date RetaileReturd Made         Amount resided / Reporting Period           Direct Adtress         22P         Interim Compared Payer         Date of Original Payment           Direct Adtress         Date of Original Payment         Date of Original Payment         Date of Original Payment           Corporation Commission File Number (If applicable)         Original Payment Amount         Date of Original Payment         Environment Payer           Direct Address         ZIP         Date of Original Payment         Environment Payer         Environment Payer           Direct Address         ZIP         Date of Original Payment         Environment Payer         Environment Payer           Corporation Commission File Number (If applicable)         Original Payment Amount         Date of Original Payment         Environment Payer           Name of Original Payer         Date of Original Payment         Date of Original Payment         Environment Payer           City         State         ZIP         Environment Payer         Environment Payer           City         Bate         ZIP         Environment Payer         Environment Payer           City         State         ZIP         Environment Payer         Envinter Payer           City

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

COMMITTEE ID NUMBER



# STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Γ	e Committee Recipient In	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 In-Kind Contribu	ition Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Made			
	Committee Name					
s	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Made			
	Committee Name					
	Street Address					
4	City					
		State	ZIP			
_	Committee ID Number	Date In-Kind Contrib				
	Committee Name	Committee Name				
_	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Made			
-	Enter total only if last page or (transfer the total disbursed this p	f schedule	$\alpha$	I		

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





IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/	Political Ac	ction Committee Recipient	Information	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 Contrib	ution Made				
	Committee Name						
	Street Address						
2	City	State	ZIP				
	Committee ID Number	Date In-Kind Contril	oution Made		-		
	Committee Name						
	Street Address						
3	City	State	ZIP				
	Committee ID Number	Date In-Kind Contrit	oution Made				
	Committee Name						
	Street Address						
4	City	State	ZIP				
	Committee ID Number	Date In-Kind Contril	oution Made				
	Committee Name						
	Street Address						
5	City	State	ZIP				
	Committee ID Number	Date In-Kind Contrit	oution Made				
-	Enter total only if last page o	of schedule	rsements," line 5(b))				

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



#### IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Polit	ical Party Recipient Infor	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl		
	Committee Name						
	Street Address						
1	City	State	ZIP				
	Committee ID Number	Date In-Kind Contr	ibution Made				
	Committee Name						
	Street Address						
2	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	ribution Made		-		
	Committee Name						
	Street Address						
3	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	ribution Made				
	Committee Name						
	Street Address						
4	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	ribution Made				
	Committee Name						
	Street Address						
5	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	ribution Made				
	Enter total only if last page c (transfer the total disbursed this	of schedule period to "Summary of Disb	ursements," line 5(c))				



COMMITTEE ID NUMBER

### IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/						
	Partnership I	Recipient Informatic	on	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	Made			
	Partnership Name	I				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Partnership Name					
	Street Address			-		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Partnership Name					
	Street Address			-		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Partnership Name	I				
	Street Address					
5	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	1		
	Enter total only if last page of schedul (transfer the total disbursed this period to "	l e Summary of Disburser	ments," line 5(d))	I		
		Sch	edule B(5)(d), page	of		



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation / L	_C 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	-		
	Corporation/LLC Name					
	Street Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Corporation/LLC Name					
	Street Address		-			
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Corporation/LLC Name					
	Street Address		-			
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	I Made			
	Enter total only if last page of schedu (transfer the total disbursed this period to	le Summary of Disbursen	nents." line 5(e))	1		

Arizona Secretary of State Revision 7/31/21 (fillable format)



### IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organ	nization Recipient Ir	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc	
	Labor Organization Name			1 5		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
_	Labor Organization Name					
	Street Address					
(	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
┨	Labor Organization Name					
ļ	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Enter total only if last page of sch (transfer the total disbursed this perio	nedule				
	(transfer the total dispursed this perio	d to "Summary of Dist	oursements," line 5(f))			

Arizona Secretary of State Revision 7/31/21 (fillable format)



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/	Expenditure	Recipient Informa	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name	Mode of Advertising (TV, mail, etc)		1 5	- 7	
	Street Address		I	_		
1	City	State	ZIP	_		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		– □ Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (ir	icluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
3	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (ir	Icluding % opposed)	□ Cash □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address			1		
4	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (ir	I Icluding % opposed)	□ Cash		
		Election Month/Year	Office Sought	Credit		

Schedule B(6), page\_\_\_\_ of \_\_\_\_



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

Zerenditure I	Recipient Inform	ation	Expenditure	Cumulative	Cumulative
			Amount	Amount this Reporting Period	Amount this Election Cycle
Recipient Name	Mode of Advertising (TV, mail, etc)				
Street Address			-		
City	State	ZIP			
Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppo	osed (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					
City	State	ZIP			
Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppo	used (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					
City	State	ZIP			
Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppo	osed (including % opposed)	□ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
Street Address			1		
City	State	ZIP	1		
Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppo	l osed (including % opposed)	□ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Ballot Measure(s) Supported (including % supported)         Date of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City         Ballot Measure(s) Supported (including % supported)         Date of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City         City Content of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City	City     State       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opported (including % supported)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       Recipient Name     State       City     State       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opported (including % supported)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       Recipient Name     Election Month/Year       Street Address     Election Month/Year       Recipient Name     State       Street Address     Election Month/Year       Recipient Name     Election Month/Year       Street Address     Election Month/Year       City     State       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opported (including % supported)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       City     State       Street Address     Election Month/Year       City     State       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opported (including % supported)	City     State     ZIP       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opposed (including % opposed)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       Recipient Name     Mode of Advertising (TV, mail, etc)       Street Address     ZIP       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opposed (including % opposed)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       Recipient Name     ZIP       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opposed (including % opposed)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       Recipient Name     Mode of Advertising (TV, mail, etc)       Street Address     ZIP       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opposed (including % opposed)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       Recipient Name     State     ZIP       Ballot Measure(s) Supported (including % supported)     Ballot Measure(s) Opposed (including % opposed)       Date of First Publication, Display, Delivery, or Broadcast     Election Month/Year       Recipient Name     Mode of Advertising (TV, mail, etc)       Street Address     Street Address       City     State     ZIP   <	City       State       ZIP         Ballot Measure(s) Supported (including % supported)       Ballot Measure(s) Opposed (including % opposed)       Cash         City       Election Month/Year       Mode of Advertising (TV, mail, etc.)         Street Address       ZIP         Ballot Measure(s) Supported (including % supported)       Ballot Measure(s) Opposed (including % opposed)       Cash         City       State       ZIP         Ballot Measure(s) Supported (including % supported)       Ballot Measure(s) Opposed (including % opposed)       Credit         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Credit         Recipient Name       Mode of Advertising (TV, mail, etc.)       Credit         Street Address       ZIP       Election Month/Year       Credit         Ballot Measure(s) Supported (including % supported)       Ballot Measure(s) Opposed (including % opposed)       Credit         Street Address       ZIP       Election Month/Year       Credit       Cash         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Cash       Credit         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Cash       Credit         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year	City       State       ZP         Ballet Measure(s) Supported (including % supported)       Baltet Measure(s) Opposed (including % opposed)       Cash         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Including % opposed)       Credit         Street Address       State       ZP       Cash       Credit       Credit         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Including % opposed)       Including % opposed         Street Address       State       ZP       Cash       Credit       Cash         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Cash       Credit         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Cash       Credit         Date of First Publication, Display, Delivery, or Broadcast       Election Month/Year       Including % opposed)       Credit         Street Address       Election Month/Year       Mode of Advertising (TV, mail, etc.)       Credit       Credit         Street Address       Election Month/Year       Mode of Advertising (TV, mail, etc.)       Credit       Credit         Street Address       Election Month/Year       Mode of Advertising (TV, mail, etc.)       Credit       Cash       Credit

Schedule B(7), page\_\_\_\_ of \_\_\_\_



#### RECALL EXPENDITURES MADE:

SCHEDULE B(8)

Expenditure	Recipient Informatic	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address			-		
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			-		
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			-		
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			-		
City	State	ZIP	-		
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	□ Cash		
	1		Credit		
	Recipient Name         Street Address         City         Supporting or Opposing Issuance of Recall Order?         Date of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City         Supporting or Opposing Issuance of Recall Order?         Date of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City         Street Address         City         Supporting or Opposing Issuance of Recall Order?         Date of First Publication, Display, Delivery, or Broadcast         City         Supporting or Opposing Issuance of Recall Order?         Date of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City         Date of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City         Date of First Publication, Display, Delivery, or Broadcast         Recipient Name         Street Address         City	Recipient Name         Street Address         City       State         Supporting or Opposing Issuance of Recall Order?       Candidate Sought to be Rec         Date of First Publication, Display, Delivery, or Broadcast       Office Held         Recipient Name       Street Address         City       State         Supporting or Opposing Issuance of Recall Order?       Candidate Sought to be Rec         Date of First Publication, Display, Delivery, or Broadcast       Office Held         Supporting or Opposing Issuance of Recall Order?       Candidate Sought to be Rec         Date of First Publication, Display, Delivery, or Broadcast       Office Held         Recipient Name       Street Address         City       State         Supporting or Opposing Issuance of Recall Order?       Candidate Sought to be Rec         Date of First Publication, Display, Delivery, or Broadcast       Office Held         Supporting or Opposing Issuance of Recall Order?       Candidate Sought to be Rec         Date of First Publication, Display, Delivery, or Broadcast       Office Held         Recipient Name       Street Address         City       State	Street Address     ZIP       City     State     ZIP       Supporting or Opposing Issuance of Recall Order?     Candidate Sought to be Recalled       Date of First Publication, Display, Delivery, or Broadcast     Office Held       Recipient Name     Mode of Advertising (TV, mail, etc)       Street Address     City       City     State       ZIP     Supporting or Opposing Issuance of Recall Order?       City     State       Supporting or Opposing Issuance of Recall Order?     Candidate Sought to be Recalled       Date of First Publication, Display, Delivery, or Broadcast     Office Held       Recipient Name     Mode of Advertising (TV, mail, etc)       Street Address     City       Supporting or Opposing Issuance of Recall Order?     Candidate Sought to be Recalled       Date of First Publication, Display, Delivery, or Broadcast     Office Held       Supporting or Opposing Issuance of Recall Order?     Candidate Sought to be Recalled       Supporting or Opposing Issuance of Recall Order?     Candidate Sought to be Recalled       Date of First Publication, Display, Delivery, or Broadcast     Office Held       Recipient Name     Mode of Advertising (TV, mail, etc)       Street Address     City       Street Address     City       City     State       ZIP     State	Recipient Name       Mode of Advertising (TV, mail, etc)         Street Address	Expenditure Recipient Information     Expenditure Amount this Reporting Period       Recipient Name     Mode of Advertising (TV, mai, etc)     Amount this Reporting Period       Street Address     Image: Cash

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### SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	Bend	efitted 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:			1		
	Enter total only if last page of scheo (transfer the total disbursed this period to	ule Summary of Disburser	nents " line 9)	1		

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient Cor	nmittee Informatio	n	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	(if applicable)	□ Cash □ Credit			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Enter total only if last page of schedule	<u> </u>		I		
	(transfer the total disbursed this period to "S	ummary of Disbursen	nents," line 10)			

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



#### REIMBURSEMENTS MADE:

SCHEDULE B(11)

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

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





SCHEDULE B(12)

	De	bt Information		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				
	Name					
	Street Address			_		
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	I	Date that Debt Accrued			
	Enter total only if last page of sched		to " line 12)			
	(transfer the total received this period to	Summary of Receip	ts," 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)		

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



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipient	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					l
1	City		ZIP	□ Cash		l
	Disbursement Type		Disbursement Date	Credit		l
	Name					
	Street Address					l
2	City		ZIP	□ Cash		l
	Disbursement Type		Disbursement Date	□ Credit		1
	Name					
3 City	Street Address					l
	City		ZIP	□ Cash		l
	Disbursement Type		Disbursement Date	□ Credit		1
	Name					
	Street Address					l
4	City		ZIP	□ Cash		l
	Disbursement Type		Disbursement Date			l
	Name		1			
	Street Address			l		
5	City	State	ZIP	□ Cash		l
	Disbursement Type		Disbursement Date			l
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disburse	ments," line 14)	I		



### AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

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

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