

STATE OF ARIZONA COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)
2021-02

COMMITTEE TYPE (choose one):

Candidate	JUAN Oleda City Council 2022
<i>Committee Name</i> (required): first or last name & office)	JUAN OPEN CITT Councert 2022
Candidate Information:	Candidate's Name (required): Juan Oleda
	Candidate's mailing address (required): 15380 ~ Filmerest Apt 1057 Good Year
	Candidate's email address (required): TACONEADA2 (9 MAIL. CON
	Candidate's phone number (required): 623-349-9316
	Candidate's website (if any):
Office Sought (choose one):	Governor Secretary of State Attorney General State Treasurer Superintendent of Public Instruction State Mine Inspector Corporation Commissione
	State Senate State House of Representatives
	County Office: District (if applicable):
	City/Town Officer City Council E District (if continuous)
	City/Town Office: C:ty Council Good Vent abt (vear the election will take place) (required): 2022 (An
Election Cycle for Office Sou	ght (year the election will take place) (required):
Party Affiliation:	Democrat Green Libertarian Republican Other:
required for partisan offices)	
Political Action Comr	mittee (PAC)
	- HAA CHERALITY (OUACI) 2022 (A
Committee Name (required): if sponsored, must include	JUHA OJEDA Lity COUNCIL 2022 (20
Committee Name (required): (if sponsored, must include sponsor's name)	
<i>Committee Name</i> (required): if sponsored, must include sponsor's name) Political Function (optional):	Contributions Candidate-Related Independent Expenditures
<i>Committee Name</i> (required): (if sponsored, must include	
<i>Committee Name</i> (required): if sponsored, must include sponsor's name) Political Function (optional):	Contributions Candidate-Related Independent Expenditures
Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply)	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures
Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Candidate-Related Independent Expenditures Recall Expenditures Sponsor's name or nickname (required):
Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Consor's name or nickname (required): Sponsor's mailing address (required):
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Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable) Special Status	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Candidate-Related Independent Expenditures Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any): Sponsor's website (if any): Sponsor's website (if any): Candidate-Related Independent Expenditures Candidate-Related Independent Expenditur
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Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable)	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any):
Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable) Special Status if applicable)	Contributions Candidate-Related Independent Expenditures Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any): Sponsor's website (if any): Action Separate Segregated Fund of a Corporation, LLC, Partnership, or Union Standing Committee (must also complete separate standing committee registration) Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)
Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable) Special Status if applicable) Political Party Committee Name (required):	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Candidate-Related Independent Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any): Sponsor's website (if any): Separate Segregated Fund of a Corporation, LLC, Partnership, or Union Standing Committee (must also complete separate standing committee registration) Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)
Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable) Special Status if applicable) Political Party Committee Name (required): must include party affiliation	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Candidate-Related Independent Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any): Sponsor's website (if any): Separate Segregated Fund of a Corporation, LLC, Partnership, or Union Standing Committee (must also complete separate standing committee registration) Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)
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Committee Name (required): if sponsored, must include ponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable) Special Status if applicable) Political Party Committee Name (required): must include party affiliation	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures Sponsor's name or nickname (required):
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Committee Name (required): f sponsored, must include ponsor's name) Political Function (optional): select any that apply) Sponsorship Information: f applicable) Special Status f applicable) Political Party Committee Name (required): must include party affiliation Jurisdiction:	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures Sponsor's name or nickname (required):
Committee Name (required): f sponsored, must include ponsor's name) Political Function (optional): select any that apply) Sponsorship Information: f applicable) Special Status f applicable) Political Party Committee Name (required): must include party affiliation	Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures Sponsor's name or nickname (required):



STATE OF ARIZONA COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE INFORMATION:

/	Contact Information:	Committee's mailing address (required): 15390 W Fill MOLC St Apt 1057 Good And 85338
/		Committee's email address (required): JUANOJEDA COMM, HEECHAI (2022 @ 9mai-1, (0)m
		Committee's phone number (if any): $CO3^349-9316$
		Committee's website (if any):
	Chairperson's Information:	Chairperson's name (required): JUAN OJECA
		Chairperson's physical address (required): 153800 Fillmorest Aption GoodYers 85338
		Chairperson's mailing address (if different):
		Chairperson's email address (required): Tacobe Ad AZ(c) g m A, l, c o M
		Chairperson's phone number (required):
		Chairperson's employer (required): TACO HEAd LLC
		Chairperson's occupation (required): Owner - Operator
	Treasurer's Information:	Treasurer's name (required): NORMA TELERA
		Treasurer's physical address (required): 15380 W- Fillmore St Apt 1057 Treasurer's mailing address (if different): 600 dyear, #285338
		Treasurer's mailing address (if different):
		Treasurer's email address (required): Noematelean @ yahoo. com
		Treasurer's phone number (required): 623 326 6602
		Treasurer's employer (required): Reim valley Golf CIUL
		Treasurer's occupation (required):
	Bank or Financial Institution:	Bank name (required BASKSFAMELICA WELLS FAS90
	(do not list acct numbers)	Additional bank name (if applicable):
1		Additional bank name (if applicable):

DECLARATION AND SIGNATURES:

1	
	I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named heren, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all rotifications and legal service of process for campaign finance purposes via the email address(es) provided herein.
	Chairperson's signature: Date: 8-18-21 Treasurer's signature: Date: 8118/2021
	Candidate's signature (if applicable):



County Office:

STATE OF ARIZONA COMMITTEE CAMPAIGN **FINANCE REPORT**

22

COMMITTEE INFORMATION (required):

MSS:11 SS0270-NAU

		1.100	Deado	nº ty	Council	2-
Committee Information:	Committee Name:	JUHI	Jean		Council	~ 0

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

Office	Sought:

City/Town Office: Good year

□ Special District Office: C School Board District:

Cumulative Report:

Check here if this is the candidate committees 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): 5-19-2 REPORTING PERIOD (check one):

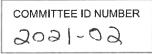
/	REPORTING PERIOD	REPORT DUE
	2020 4 th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 202
	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
J	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 2022
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
	2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination
	*Reporting deadline extended to next business day. A.R.S. §§ 1-243(A) and 1-303.	/

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (<i>i.e.</i> ending balance from the previous reporting period)	0.00	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$836.67	
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	k	
(d) = Balance at close of reporting period	836.67	
Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must following page need to be filed.	be completed, but only this	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.





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)		





SUMMARY OF RECEIPTS (Schedule A):

/	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100	\$651.67	
	(b) In-State Individuals - \$100 or Less (Aggregate)	185'00	
	(c) Out-of-State Individuals	111	
	(d) Candidate Committees		
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
			10000
	(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		and start Electronic
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		CONTRACTOR CONTRACTOR
3.	Rebates and Refunds Received		
4.	Interest Accrued on Committee Monies		Constant and the
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		
11.	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)		



COMMITTEE ID NUMBER 2021-02

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.

vema Telean

Printed Name of Committee Treasurer

Signature of Committee Treasurer

 $\frac{1/6/22}{\text{Date}}$





MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

18

SCHEDULE A(1)(i)

	Candida	ate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name JUAN OJECA Street Address		Date Contribution Received 10 - 1 - 21	151.67		
Name JUAN DJedA Street Address 15380 W Fillmace 1 City Good Yapp		2 ST	4051		ĥ	
	Good Y-AT	AZ-	² 85338			
	Business Own(Employer AC	olfrad LLC			
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer		_		
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP	-		
	Occupation	Employer	1			
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			-		
5	City	State	ZIP			
	Occupation	Employer				
				- U		U

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



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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
2021-02

SCHEDULE A(1)(a)

/	Individual Con	tributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulativ Amount th Election Cy
	Soft D. Schwar	+2	Date Contribution Received	50000		
	Street Address 8235 N (Gand P)					
1	Street Address 8235 N (62nd P) City Paradise Valley Occupation philan throgist	State PrZ	85253			
	occupation philasthrogist	Employer Self &	employed			
	Juan Ojeda		Date Contribution Received $ 0-1-2 $	151 (7)		
		15380 V Fillmore St Apt1057		151.67		
2		State AZ	^{ZIP} 85338			
	Business Owner	Employer 1 A-C V	Head LLC	-		
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name	1	Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer	- K			
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,	' line 1(a))	1		
_	*If in-state individual contribution	s of \$100 or less	are listed on Schedule A(1)(b), do not include t	hem on Schedule A	A(1)(a).



COMMITTEE ID NUMBER
2021-02

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 Individua	s - \$100 or Less	#185.00
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 ____



COMMITTEE ID NUMBER

CITY OF GOODYEAR RECEIVED BY CITY CLERK'S OFFICE 2022 APR 15 2:46 P.M.

COMMITTEE INFORMATION (required)

Committee Information	Committee Name	Juan Ojeda City Cou	ncıl 2022	
ATE INFORMATION (only	of filing as a candidate com	nmittee)		
Office Sought	County Office		Special District Office	
	City/Town Office	Goodyear	School Board District	

Cumulative Report

Check here if this is the candidate committees first, cumulative report for the election cycle Also select appropriate Reporting Penod 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
	2020 4 th Quarter Report October 18, 2020 to December 31, 2020	January 1 2021 to January 15 2021
	2021 March Pre-Election Report (Local Only) January 1, 2021 to February 20, 2021	February 21, 2021 to February 27 202
	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report January 1 2021 to March 31, 2021	April 1 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only) April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only) May 2, 2021 to June 30, 2021	July 1 2021 to July 15, 2021
	2021 Quarter 2 Report April 1, 2021 to June 30, 2021	July 1 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only) July 1, 2021 to July 17, 2021	July 18, 2021 to July 24 2021
	2021 August Post-Election (Q3) Report (Local Only) July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
-	2021 Quarter 3 Report July 1, 2021 to September 30, 2021	October 1 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only) October 1, 2021 to October 16, 2021	October 17 2021 to October 23, 2021
-	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
-	2021 Quarter 4 Report October 1, 2021 to December 31, 2021	January 1 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only). January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 2023
	2022 March Post-Election (Q1) Report (Local Only) February 20, 2022 to March 31, 2022	April 1, 2022 to April 15 2022
	2022 Quarter 1 Report January 1, 2022 to March 31, 2022	April 1, 2022 to April 15 2022
1	2022 May Pre-Election Report (Local Only) April 1, 2022 to April 30, 2022	May 1, 2022 to May 7 2022
	2022 May Post-Election (Q2) Report (Local Only) May 1, 2022 to June 30 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report April 1 2022 to June 30, 2022	July 1, 2022 to July 15 2022
-	2022 Pre-Primary Election Report July 1, 2022 to July 16 2022	July 17 2022 to July 23 2022
-	2022 Post-Primary Election (Q3) Report July 17, 2022 to September 30, 2022	October 1 2022 to October 15 2022
-	2022 Pre-General Election Report October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
-	2022 Post-General Election (Q4) Report October 23, 2022 to December 31, 2022	January 1, 2023 to January 17 2023°
-	Final Campaign Finance Report Prior to Committee Termination End of Previous Period through Today s Date	Same Date of Termination
j	"Reporting deadline extended to next business day A R S §§ 1-243(A) and 1-303	

FINANCIAL SUMMARY (required)

183667	
\$ 0.00	
\$ 0.00	
\$ 836.67	
	\$ 0.00

Committees with financial activity must file the cover page summary of receipts, summary of disbursements, and any schedules that contain financia jact y by Anzona Secretary of State Revision 7/31/21 (fillable format)



COMMITTEE ID NUMBER 2021-02

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.

Noema Telean

Printed Name of Committee Treasurer

Signature of Committee Treasurer

04/15/2022

Date

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



CORMETT	LEE INT I	DEMATE	Pi Ineco	airmd)

2021-02

Committee Information	Committee Name	Juan	Ojeda	City	Council	2022	

City/Town Office Goodyear

E) County Office

CANDIDATE INFORMATION (only if filing as a candidate committee)

C Special District Office D School Board District

Completive Report.

Office Sought

Et. Check tiere if this is the candidate committees first, cumulative report for the election cycle. Also select appropriate Reporting Pariod 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
States and States and States and States	January 1, 2021 to January 15, 2021
and the second	February 21, 2021 to Fabruary 27, 202
	April 1, 2021 to April 15, 2021
to go an a suger a suger and a subscript the	April 1, 2021 to April 15, 2021
	May 2, 2021 to May 8, 2021*
	July 1, 2021 to July 15, 2021
	July 1, 2021 to July 15, 2021
	July 18, 2021 to July 24, 2021
	October 1, 2021 to October 15, 2021
	October 1, 2021 to October 15, 2021
	October 17, 2021 to October 23, 2021
	January 1, 2022 to January 15, 2022
and the second se	January 1, 2022 to January 15, 2022
	February 20, 2021 to February 26, 202
	April 1, 2022 to April 15, 2022
	April 1, 2022 to April 15, 2022
	May 1, 2022 to May 7, 2022
	July 1, 2022 to July 15, 2022
	July 1, 2022 to July 15, 2022
	July 17, 2022 to July 23, 2022
	October 1, 2022 to October 15, 2022
	October 23, 2021 to October 29, 2022
	January 1, 2023 to January 17, 2023*
2022 Post-General Election (U4) Report October 23, 2022 to December 01, 2022 Final Campaign Finance Report Prior to Committee Termination End of Previous Period through Today's Date	Same Date of Termination
	 2020 4* Quarter Report October 18 2020 to December 31, 2020 2021 March Pre-Election Report (Local Only) January 1, 2021 to February 20, 2021 2021 March Post-Election (Q1) Report (Local Only) February 21 to March 31, 2021 2021 May Pre-Election Report (Local Only) April 1, 2021 to March 31, 2021 2021 May Pre-Election Report (Local Only) April 1, 2021 to May 1, 2021 2021 May Pre-Election (Q2) Report (Local Only) May 2, 2021 to June 30, 2021 2021 Quarter 2 Report April 1, 2021 to June 30, 2021 2021 August Pre-Election Report (Local Only) July 1, 2021 to July 17, 2021 2021 August Pre-Election Report (Local Only) July 18, 2021 to September 30, 2021 2021 Quarter 3 Report July 1, 2021 to September 30, 2021 2021 Quarter 3 Report July 1, 2021 to September 30, 2021 2021 November Pre-Election Report (Local Only) October 1, 2021 to October 16, 2021 2021 November Pre-Election Report (Local Only) October 17, 2021 to December 31, 2021 2021 Quarter 4 Report October 1, 2021 to December 31, 2021 2022 March Pre-Election Report (Local Only) Enuary 1, 2022 to February 19, 2022 2022 March Pre-Election Report (Local Only) February 20, 2022 to March 31, 2022 2022 March Post-Election (Q1) Report (Local Only) February 20, 2022 to March 31, 2022 2022 March Post-Election Report (Local Only) April 1, 2022 to April 30, 2022 2022 May Pre-Election Report (Local Only) April 1, 2022 to June 30, 2022 2022 May Pre-Election Report (Local Only) April 1, 2022 to June 30, 2022 2022 May Pre-Election Report (Local Only) April 1, 2022 to June 30, 2022 2022 May Pre-Election Report (Local Only) April 1, 2022 to June 30, 2022 2022 May Pre-Election Report July 1, 2022 to June 30, 2022 2022 May Pre-Election Report July 1, 2022 to June 30, 2022 2022 May Pre-Election Report July 1, 2022 to June 30, 2022 2022 Pre-Primary Election Re

FINANCIAL SUMMARY (required)

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending belance from the previous reporting penal)	\$ 836.67	
(b) * Total receipts (non-tsummary of Receipts," Inte 13 (cash column) for the reporting period)		
(c) - Total disbursements (from "Summary of Disbursements " line 16 (cash column) for this reporting period)	\$ 700.00	
(d) = Balance at close of reporting period	\$ 136.67	
Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must	be completed but only this	cover page and the

following page need to be filed

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity Anzona Secretary of State Revision 12/29/21 (fillable format)



COMMITTEE ID NUMBER 2021-02

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.

Noema Telean

Printed Name of Committee Treasurer

Signature of Committee Treasurer

07/13/2022

Date

Animone Secretary of State Revenues 12/29/21 (fillable format)



2021-02



	Receipta	Cash	EQUEY
	Monetary Contributions Received		
	(A); In State Individuals - More than \$100		
	(E) In State Individuals - \$100 of Less (Agengain)		
	(c) Out of-State Individualit		
	(d) Candidata Committees		
	(e) Polscal Action Committees		
	(f) Political Parties		
	(g) Padrienshipi		
	(h) Corporations & Limited Liability Companies (PAGe & Policel Parties Only)		
	(I) Labor Organizations (NACa & Political Parties Only)	and the production of the operation of the second state of the sec	
	(j) Candidata's Personal Monies (Cantioale Committees Only)		
	(k) Monetary Contributions Subtotal (edd 1(k) llysugh 16)		
	Refunds Given Back to Contributors		
	(i) Net Monetary Contributions (wareau 1/) from (63)		
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	[d] Interest Accrued on Loans Made	and a second	
	(e): Loans Subtotal (cere and 2(s) 2(c) \$ 2(d))		
	Rebates and Refunds Received		
	Interest Accrued on Committee Manuel		
5	In-Kind Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Appropriate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committeet		
	(iii) Political Action Committees	Burgaturana Para	
-	(f) Polycal Parties		
	(g) Partnerships		}
	(h) Corporations & Limited Liability Companies (PACa's Pullical Parties Only)		
	(i) Labor Organizations (PACs & Pelvice Partiel Only)		
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal severy ser last trough fills		
(a)	(iii) In-Kind Donations Received (him-Control ons) (Pollical Parties DRV)		
7	Extensions of Credit		
,	(a) Extensions of Credit Received	are ti	
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit putered (b) fee 7(a)		
	Joint Fundrawing / Shared Expense Paymenta Received		
6.	Payments' Received for Goods / Services		
2	Outstanding Accounts Receivable Debts Owed to Committee		
~	The second		
_1	Minicellane Gus Receipts (see seet every wark on splicates) Total Receipts (set set too); 2(c) 34 8-8 (111); early and 2(c) 501 8-7(c) 10 12);	0.00	

Anzona Secretary of State Revision 12/29/21 (fittable format)

1



COMMITTEE ID NUMBER 2021-02

SUMMARY OF DISBURSEMENTS (Schedule B)

	Disbursements	Cash	Equidy
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 & Portical 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	and the second of a second of the second of	ananany of addition and the addition and any
	(c) Forgiveness on Loans Made	······································	And a second
	(d) Repayment of Loans Received		ang animising distance securitaria. Angena
	(e) Accrued Interest on Loans Received		· · · · · · · · · · · · · · · · · · ·
phip #// vila	(f) Total Loans (vast) and 3(a) 3(d) & 3(e), equity and 2(b) & 2(c))		
4	Rebates and Refunds Made (Non-Contributions)	an 'an an a	
5	Value of In-Kind Contributions Provided		a distinguistic and a second
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Polical Parise Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Contributions Subtotal (and 5(a) through 5(7))		
6	Independent Expenditures Made		
7	Ballot Measure Expenditures Made		
8	Recall Expenditures Made		
9	Support Provided to Party Nominees (Polisce/Parties Only)		
10	Joint Fundraising / Shared Expense Payments Made		alanga shirin analalalalan sura anayan sura a
11	Reimbursements Made		المراجعة المحافظة المحافظة
12	Outstanding Accounts Payable / Debts Owed by Committee		and the graph and the second state of the seco
13	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		augulation de s
14	Miscellaneous Disbursements (use sesh end/or equity as applicable)	700.00	-several designed and the first several designed as
15	Aggregate of Disbursements - \$250 or Less (use cash and/or equity as applicable)	and a second	
16	Total Disbursements were add 1 2(1) 3(1) 6-11 & 13-15, equity add 3(1) 5(g) & 12 15)	700.00	

Arizona Secretary of State Revision 12/29/21 (fillable format)



COMMITTEE	ID NUMBER
20.11	. 52

COMMITTEE INFORMATION (required)

Committee Information Committee Name

CANDIDATE INFORMATION (only if filing as a candidate committee)

Office Sought

D City/Town Office

El County Office

Special District Office
 School Board District

Jum Oyeda City Council 2022

Cumulative Report

Check here if this is the candidate committees 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
2020 4" Quarter Report October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
2021 March Pre-Election Report (Local Only) January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 202
2021 March Post-Election (Q1) Report (Local Only) February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
2021 Quarter 1 Report January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
2021 May Post-Election (Q2) Report (Local Only) May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
2021 Quarter 2 Report April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
2021 August Pre-Election Report (Local Only) July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
2021 Quarter 3 Report July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
2021 November Pre-Election Report (Local Only). October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
2021 November Post-Election (04) Report (Local Only) October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
2021 Quarter 4 Report October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
2022 March Pre-Election Report (Local Only) January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 202
2022 March Post-Election (Q1) Report (Local Only) February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
2022 Quarter 1 Report January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
2022 May Post-Election (Q2) Report (Local Only) May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
- and a second	July 1, 2022 to July 15, 2022
2022 Pre-Primary Election Report July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
2022 Post-Primary Election (Q3) Report July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
2022 Pre-General Election Report. October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	January 1, 2023 to January 17, 2023*
	Same Date of Termination
	 2020 4 ^{II} Quarter Report October 18: 2020 to December 31, 2020 2021 March Pre-Election Report (Local Only) January 1, 2021 to February 20, 2021 2021 March Post-Election (Q1) Report (Local Only) February 21 to March 31, 2021 2021 Quarter 1 Report January 1: 2021 to March 31, 2021 2021 May Pre-Election Report (Local Only) April 1, 2021 to May 1, 2021 2021 May Post-Election (Q2) Report (Local Only) May 2, 2021 to June 30, 2021 2021 Quarter 2 Report April 1, 2021 to June 30, 2021 2021 August Pre-Election Report (Local Only) July 1, 2021 to July 17, 2021 2021 August Pre-Election (Q3) Report (Local Only) July 18, 2021 to September 30, 2021 2021 Quarter 3 Report July 1, 2021 to September 30, 2021 2021 November Pre-Election Report (Local Only) October 1, 2021 to October 16, 2021 2021 Quarter 4 Report October 1, 2021 to December 31, 2021 2022 March Pre-Election Report (Local Only) January 1, 2022 to February 19, 2022 2022 March Pre-Election Report (Local Only) January 1, 2022 to February 19, 2022 2022 March Pre-Election Report (Local Only) January 1, 2022 to March 31, 2022 2022 Quarter 1 Report January 1, 2022 to March 31, 2022 2022 Quarter 1 Report January 1, 2022 to March 31, 2022 2022 May Pre-Election Report (Local Only) April 1, 2022 to April 30, 2022 2022 May Pre-Election Report (Local Only) April 1, 2022 to June 30, 2022 2022 May Pre-Election Report (Local Only) May 1, 2022 to June 30, 2022 2022 Pre-Primary Election Report July 1, 2022 to June 30, 2022 2022 Pre-Primary Election Report July 1, 2022 to July 16, 2022 2022 Pre-Primary Election Report July 1, 2022 to October 22, 2022 2022 Pre-General Election Report October 1, 2022 to October 22, 2022 2022 Post-General Election Report October 1, 2022 to October 23, 2022 2022 Post-General Election Report October 1, 2022 to December 31, 20

FINANCIAL SUMMARY (required)

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting penad)	\$ 136-67	
(b) + Total receipts (from "Summary of Receipts" fire 13 (ceeh column) for the reporting periods	0	
(c) - Total disbursements (from "Summery of Osbursements" are 16 (cash column) for this reporting period))	
d) = Balance at close of reporting period	1 15657	

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

activity Anzona Secretary of State Revision 12/29/21 (fillable formal)



COMMITTEE ID NUMBER Jobl 32

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

RCUD 10:15-22 8:21pm Vià email



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT



COMMITTEE INFORMATION (required):

Committee Information:	Committee Name:	Juan Ojeda City Council 2022	
Committee mormation.	Committee Name.		
NDIDATE INFORMATION (only if f	ilina eo e condidato com		

Office Sought:	County Office:	Special District Office:
	City/Town Office: Goodyear	School Board District:

Cumulative Report:

Check here if this is the candidate committees 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):

1	REPORTING PERIOD	REPORT DUE
	2020 4th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 202
	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 2022
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
1	2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	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)	136.67	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 0.00	
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 0.00	
(d) = Balance at close of reporting period	\$ 136.67	

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

activity. Arizona Secretary of State Revision 12/29/21 (fillable format)



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.

10/15/2022

Noema Telean

Printed Name of Committee Treasurer

Signature of Committee Treasurer

Date



SUMMARY OF RECEIPTS (Schedule A):

e 	Receipts	Cash	Equity
5	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)		Contraction of the second
	(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(I) from 1(k))		
	Loans		
	(a) Loans Received (b) Forgiveness on Loans Received		A CONTRACTOR OF A CONTRACTOR O
_	(c) Repayment on Loans Made		
_	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
	Rebates and Refunds Received		
	Interest Accrued on Committee Monies		
	In-Kind Contributions Received		
-	(a) 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))		
	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received	and the second second	
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))	And the second second	
	Joint Fundraising / Shared Expense Payments Received		
	Payments Received for Goods / Services		
0.	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		4
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(f) Labor Organizations (PACs & 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		1. 1. 1. A. 3.
	(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 (PACs & Political Parties Only)		
	(f) Labor Organizations (PACs & Political Parties Only)		
	(g) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		The second states
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		
1 1 .	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 (use cash and/or equity as applicable)		
15.	Aggregate of Disbursements - \$250 or Less (use cash and/or equity as applicable)		
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)		



/	Indivio	dual Contributor Inform	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 Rec		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	Date Contribution Received				
	Street Address					
4	City	State	ZIP	_		
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address	Street Address				
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of s (transfer the total received this peri	schedule	pts." 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 on Schedule A(1)(b).

Schedule A(1)(b), page____ of ____



MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

	Individual Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Name	Date Contribution Received				
4	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name Date Contribution Received					
	Streel Address					
2	City	State	ZIP	_		
3	Occupation	Employer	:mployer			
	Name		Date Contribution Received			
	Street Address					
3	City State		ZIP			
	Occupation	Employer		-		
	Name Date Contribution Received					
	Street Address					
4	City	State	ZIP			
i I	Occupation	Employer				
	Name Date Contribution Received					
	Street Address					
5	City State		ZIP			
	Occupation	Employer		1		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(c))	1		



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/	Candidate Committ	ee Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			-		
1	City	State	ZIP			
	Committee ID Number	Committee ID Number Date Contribution Received				
-	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved	1		
	Committee Name					
	Street Address			1		
3	City	State	ZIP			
	Committee ID Number					
	Committee Name					
	Street Address			1		
4	City	State	ZIP	1		
	Committee ID Number	Date Contribution Receiv	ved			
	Committee Name					
	Street Address					
5	City	State	ZIP	1		
	Committee ID Number	Date Contribution Receiv	ved			
	Enter total only if last page of schedul (transfer the total received this period to "Su	e ummary of Receipts,"	line 1(d))	1		
		Cab	edule A(1)(d), page			



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

	Political Action Committee Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
-	Street Address		1			
1	City	State	ZIP			
	Committee ID Number Date Contribution Received					
	Committee Name					
	Street Address	Street Address				
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
2	Street Address		1			
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
4	Ireet Address					
	City Committee ID Number	State Date Contribution Receiv	ZIP	_		
_	Committee Name			_		
	Street Address					
5	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receiv	ed			
_	Enter total only if last page of schedu (transfer the total received this period to "\$	Ile	line 1(e))			
_		tanimary or receipid, 1				



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

					t Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name						
9	Street Address						
1	City	State	ZIP				
10	Committee ID Number	Date Contribution F	Received				
	Committee Name						
THE NEW	Street Address		,				
2	City	State	ZIP				
	Committee ID Number	Date Contribution	Received				
-0	Committee Name						
2	Street Address						
3	City	State	ZIP				
	Committee ID Number	Date Contribution	Received				
	Committee Name						
22	Street Address						
4	City	State	ZIP				
1	Committee ID Number	Date Contribution	Received				
	Committee Name						
100	Street Address						
5	City	State	ZIP				
	Committee ID Number	Date Contribution	Received				
	Enter total only if last page of so (transfer the total received this period	hedule to "Summary of Receir	ots," line 1(f))				
	·		Schedule A(1)(f), pag	in of			



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

_	Partnerst	nip Contributor Infor	mation	Amount Receive	d Amount this Reporting Period	Cumulative Amount thi Election Cyc
	Partnership Name					
	StreetAddress					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address	Street Address				
2	City State		ZIP			
	orporation Commission File Number Date Contribution Received					
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	n 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	n Received			
-	Enter total only if last page of sch (transfer the total received this period	iedule to "Summary of Rece	ipts," line 1(g))			



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Corporation/LLC Name					
Ì	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution R	eceived			
	Corporation/LLC Name					
	Street Address					
2	City	City State ZIP				
	Corporation Commission File Number	ommission File Number Date Contribution Received				
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	orporation Commission File Number Date Contribution Received					
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution R	Received			
	Corporation/LLC Name	I				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution R	Received			
1	Enter total only if last page of sch (transfer the total received this period	edule to "Summary of Receip	ts," line 1(h))			



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organizati	on Contributor Inforr	nation	Amount Received	Amount this Reporting Period	Amount this Election Cycl
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
Ì	Corporation Commission File Number	Date Contribution Receive	ed	_		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP	-		
1	orporation Commission File Number Date Contribution Received			-		
	Labor Organization Name					
	Street Address					
3	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	ved	_		
	Labor Organization Name					
	Street Address	-				
4	City	Slate	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved			
	Labor Organization Name					
	Street Address			1		
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	Jved			
	Enter total only if last page of schedu (transfer the total received this period to "	Ile Summary of Receipts,"	line 1(i))	1		

Arizona Secretary of State Revision 12/29/21 (fillable format)



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

/				Ĩ	Cumulative	Cumulative
- 11	Candidate		Amount Received	Amount this Reporting Period	Amount this Election Cycle	
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP	-		
	Occupation	Employer		-		
1	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP	-		
	Occupation	Employer	1	1		
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP	-		
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			-		
4	City	State	ZIP	-		
	Occupation	Employer		-		
	Name	1	Date Contribution Received			
	Street Address		1	1		
5	City	State	ZIP	1		
	Occupation	Employer	1	1		
-	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(j))			

Arizona Secretary of State Revision 12/29/21 (fillable format)



COMMITTEE ID NUMBER

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

Address	State State	Date Contribution Refunded ZIP Date of Original Contribution Date Contribution Refunded ZIP Date of Original Contribution Date of Original Contribution Date of Original Contribution Date of Original Contribution Date Contribution Refunded ZIP ZIP			
ber (if applicable) Address ber (if applicable)	State	Date of Original Contribution Date Contribution Refunded ZIP Date of Original Contribution Date Contribution Refunded			
\ddress ber (if applicable) \ddress	State	Date of Original Contribution Date Contribution Refunded ZIP Date of Original Contribution Date Contribution Refunded			
\ddress ber (if applicable) \ddress		Date Contribution Refunded ZIP Date of Original Contribution Date Contribution Refunded			
ber (if applicable) \ddress		ZIP Date of Original Contribution Date Contribution Refunded			
ber (if applicable) \ddress		Date of Original Contribution Date Contribution Refunded			
Address		Date of Original Contribution Date Contribution Refunded			
Address	State	Date Contribution Refunded			
	State		_		
	State	ZIP			1
har fifannlicable)	State	ZIP			
her (if applicable)					
		Date of Original Contribution			
lame		Date Contribution Refunded			
Address					
	State	ZIP	_		
ber (if applicable)		Date of Original Contribution	_		
		Date Contribution Refunded			
Address					
	State	ZIP	-		
ber (if applicable)	1	Date of Original Contribution	-		
	mary of Receipts "	line 1(l))			
h	idress er (if applicable)	idress State er (if applicable)	Idress Idress State ZIP er (if applicable) Date of Original Contribution	Idress State ZIP	Idress Date Contribution Refunded Idress State State ZIP er (if applicable) Date of Original Contribution



COMMITTEE ID NUMBER

LOANS RECEIVED:

	Lender Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received	Date Loan Received			
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	I Street Address			_		
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
	Lender Name	Date Loan Received	Date Loan Received			
	Street Address			_		
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)	_		
+	Lender Name	Date Loan Received				
	Street Address			-		
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Enter total only if last page of schedule (transfer the total received this period to "Su	e mmary of Receipts,"	line 2(a))			



FORGIVENESS ON LOANS RECEIVED:

/	с ^{ан} а.	Lender 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 Outs	landing			
	Lender Name		Date Forgiveness Received			
	Street Address			-		
2	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outs	anding	-		
	Lender Name		Date Forgiveness Received			
	Street Address			-		
3	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outs	anding	_		
-	Lender Name		Date Forgiveness Received			
	Street Address			-		
4	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outs	anding	-		
	Lender Name		Date Forgiveness Received			
	Street Address			-		
5	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outs	anding	-		
	Enter total only if last page of (transfer the total received this page)	schedule eriod to "Summary of Rece	ipts," line 2(b))			
-						

SCHEDULE A(2)(b)



COMMITTEE ID NUMBER

SCHEDULE A(2)(c)

REPAYMENT ON LOANS MADE:

	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Borrower Name		Date Repayment Received		Reporting Feriod	Liection Cyc
	Street Address			_		
1	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding			-		
	Borrower Name		Date Repayment Received			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1,			
	Borrower Name		Date Repayment Received			
	Street Address	4				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address		1			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 2(c))	1		



INTEREST ACCRUED ON LOANS MADE:

1

2

3

4

5

Borrower Information			Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Borrower Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Borrower Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Borrower Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Borrower Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed Amount Still Outstanding					
Borrower Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Enter total only if last page of schedule (transfer the total received this period to "Sum					
	Sche	dule A(2)(d), page of			

SCHEDULE A(2)(d)



COMMITTEE ID NUMBER 2021-02

SCHEDULE A(3)

REBATES AND REFUNDS RECEIVED:

	Payor Ir	nformation	Date Rebate/Refund Received	Amount Rebated or Refunded	Cumulative Amount this Reporting Period 136.67	Cumulative Amount this Election Cyc
	Payor Name Street Address		Date Redate/Relation Received	_	130.07	
	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
	Payor Name		Date Rebate/Refund Received			
	Street Address					
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	2			
	Payor Name		Date Rebate/Refund Received			
	Streel Address					
3	City	State	ZIP			
	Original Purchase Amount Reason for Refund/Rebate		2			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
F	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	3			
	Payor Name		Date Rebate/Refund Received			
1	Street Address					
	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	3			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts." I	ine 3)			



COMMITTEE ID NUMBER

SCHEDULE A(4)

INTEREST ACCRUED ON COMMITTEE MONIES:

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

Schedule A(4), page____ of ____



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

SCHEDULE A(5)(a)

	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Name	Date In-Kind Contribution Received	-			
1	Street Address			_		
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
0	Occupation Employer					
	Name		Date In-Kind Contribution Received			
	Street Address	Street Address				
3	City	State	ZIP	-		
	Occupation	Employer	1			
	Vame		Date In-Kind Contribution Received			
1)	Street Address			-		
4	City	State	ZIP			
	Occupation	Employer		1		
	Name		Date In-Kind Contribution Received			
	Street Address	Street Address				
5	City	State	ZIP			
	Occupation	Employer	J	1		
	Enter total only if last page of schedule (transfer the total received this period to "Surr	I mary of Receipts,"	line 5(a))			

Schedule A(5)(a), page____ of ____



COMMITTEE ID NUMBER

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
0	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 5(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 RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(5)(c)

		ributor Informatio		Amount Received	Cumulative Arnount 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		1	-		
-	Name		Date In-Kind Contribution Received			
	Street Address			-		
3	City	State	ZIP	-		
	Occupation	Employer				
	Name	Date In-Kind Contribution Received				
	Street Address		1			
4	City	State	ZIP			
	Occupation	Employer				
	Name	1	Date In-Kind Contribution Received			
	Street Address		I			
5	City	State	ZIP			
	Occupation	Employer	1	1		
-	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(c))	1		



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

/	Candidate Committe	ee Contributor Infor	mation	Amount Received	Cumulative Amount this	Cumulative Amount this
	Committee Name			Reporting Period	Election Cycle	
	Street Address		2			
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name		-			
3	Street Address	1	1.	-		
		State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Keceivea			
	Committee Name Street Address			-		
4	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution		_		
	Committee Name					
	Street Address			-		
5	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received	-		
	Enter total only if last page of schedule (transfer the total received this period to "Su	9				
	(transfer the total received this period to "Su	immary of Receipts," I	ine 5(d))			



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

						\sim
/	Political Action Committ	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	A				
	Street Address			-		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received	-		
	Committee Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address	-				
4	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(e))	đ u		
5		Sche	dule A(5)(e), pageo	f		1



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Politica	al Party Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	ion Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	tion Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Committee Name					I
	Street Address					
5	City	Stale	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Enter total only if last page of (transfer the total received this pe	schedule	" line 5(f))			
	Transier no total received tills pe		hedule A(5)(f), page			



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partners	hip Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP		1	
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
6	Partnership Name	1,				
j.	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number					
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	ntribution Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	ntribution Received			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	ntribution Received			
-	Enter total only if last page of sch (transfer the total received this period	nedule	sinte " line E(a))	l.		



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation	/ LLC Contributor I	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl	
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	tribution Received			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Co	ntribution Received			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Co	ntribution Received			
	Corporation/LLC Name	,I				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Co	ntribution Received			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Co	ntribution Received			
-	Enter total only if last page of sch (transfer the total received this period	edule to "Summary of Rece	eipts,* line 5(h))	1		



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organizatio	n Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address			-		
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
1	Labor Organization Name					
	Street Address					
	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Received			
+	Enter total only if last page of schedul (transfer the total received this period to "Si	e ummary of Receipts,"	line 5(i))			
-						



COMMITTEE ID NUMBER

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 Cycl
	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			
	ssel or Property Contributed					
_	Name	Date In-Kind Contribution Received				
	Street Address	treet Address				
3	City	State	ZIP	-		
			50-11	-		
	Asset or Property Contributed					
	Name					
	Street Address					
4	City	State	ZIP	-		
	Asset or Property Contributed	Isset or Property Contributed				
_	Name	Name Dat				
	Street Address			-		
5				-		
	City	State	ZIP			
	Asset or Property Contributed					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Receipts '	(line 5(i))			



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

SCHEDULE A(6)

	Source	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
Ĩ	Name	Date In-Kind Donation Received		Reporting Ferrou	Liection Cyc	
3	itreet Address					
1	Sity State		ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
3	Street Address			-		
2	City State		ZIP	-		
	Type of Item Donated			-		
-	Name		Date In-Kind Donation Received			
8	Street Address			_		
3	City	State	ZIP	-		
19	Type of Item Donated					
-	Name		Date In-Kind Donation Received			
10.00	Street Address					
4	City	State	ZIP			
8	Type of Item Donated					
	Name		Date In-Kind Donation Received			
1000	Street Address		91			
5	City	State	ZIP			
	Type of Item Donated					
-	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,	' line 6)	1		

Arizona Secretary of State Revision 12/29/21 (fillable format)



COMMITTEE ID NUMBER

SCHEDULE A(7)(a)

EXTENSIONS OF CREDIT RECEIVED:

1				ř i	Cumulative	Cumulativa
	Creditor	Amount of Credit Extended	Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					
	Street Address					
1	City	State	ZIP			
- 1122	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
2	Street Address			-		
3	City	State	ZIP			
2	Services or Goods Provided on Credit		Date of Extension of Credit	1		
	Name					
	Street Address			-		
1	City	State	ZIP	1		
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address			1		
5	City	State	ZIP	1		
	Services or Goods Provided on Credit	Date of Extension of Credit	1			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	line 7(a))			
	(transfer the total received this period to Sum		hedule A(7)(a), page	~f		



COMMITTEE ID NUMBER

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

Payment Amount Cumulative Cumulative Amount this **Creditor Information** on Credit Amount this Extended Reporting Period Election Cycle Name Street Address 1 City ZIP State Services or Goods Originally Provided on Credit Date of Original Extension of Credit Name Street Address 2 City ZIP State Services or Goods Originally Provided on Credit Date of Original Extension of Credit Name Street Address 3 City State ΖIΡ Services or Goods Originally Provided on Credit Date of Original Extension of Credit Name Street Address 4 City ZIP State Date of Original Extension of Credit Services or Goods Originally Provided on 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 "Summary of Receipts," line 7(b))

SCHEDULE A(7)(b)

Schedule A(7)(b), page____ of ____



COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Co	tion	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl	
	Committee Name	Payment Date				
1	Street Address					
F	City	State	ZIP			
1	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Daté			
	Street Address					
3	City	State	ZIP			
100	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
ł	City	State	ZIP			
110	Date of Joint Fundraising Event (if applicable) Type of Shared Expense		cpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Enter total only if last page of schec (transfer the total received this period to	lule *Summary of Recei	pts," line 8)	.1		



COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor Ir	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City State		ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Streel Address					
3	City .	State	ZIP	_		
	Services or Goods Purchased	I	Payment Date			
	Name					
	Street Address					
4	City	State	ZIP	-		
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address	Street Address				
5	City	State	ZIP	_		
	Services or Goods Purchased	Payment Date	-			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	l			



COMMITTEE ID NUMBER

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Infor	mation		Amount	Amount this Reporting Period	Amount thi Election Cyc
	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address		_			
	City	State	ZIP	-		
	Type of Account Receivable or Debl Owed		Date that Debt Accrued	-	1	
	Name					
	Street Address					
	City	State	ZIP			
	ype of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
ŀ	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)	1		

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COMMITTEE ID NUMBER

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		
iource of Surplus Monies / Recipient of Transferred Debt		
ource of Surplus Monies / Recipient of Transferred Debt		
ource of Surplus Monies / Recipient of Transferred Debt		
Fotal transfer the total received this period to "Summary of Receipts," line 11)		

Schedule A(11), page____ of ____



SCHEDULE A(12)

MISCELLANEOUS RECEIPTS:

Str		nonnation		Amount	Amount this	Amount this
Str		Source Information				
Cit						
	reet Address					
Red	ty	State	ZIP			
1	сеірі Туре		Receipt Date			
Na	ame					
Str	reet Address					
Cit	ty	State	ZIP			
Red	Receipt Type		Receipt Date			
Na	ame		1			
Str	reet Address					
Cit	ty	State	ZIP	_		
Rec	свірт Туре		Receipt Date			
Na	ame					
Str	reet Address			_		
Cit	ty	State	ZIP			
Red	ceipt Type		Receipt Date			
Na	ime					
Str	reet Address	-				
Cit	ty	State	ZIP	-		
Rec	ceipt Type		Receipt Date			
En (tra	nter total only if last page of schedule ransfer the total received this period to "Sumr	mary of Receipts," I	l	1		



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Recipien	Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	me Disbursement Date				
	Street Address		_			
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	Credit	□ Cash □ Credit	
	Name	Disbursement Date				
	Street Address					
2	City	State ZIP		□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid		(PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address			-		
5	City	State	ZIP	 □ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmany of Disburse	ments " line 1)			
_	ונייםווסופו נוופ נטנמו טוסטטוספט נוווס אפווטט נט סט					



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committe	e Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
1	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	Credit				
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP	🗆 🗆 Cash		
	Committee ID Number	iommittee ID Number Date Contribution Made		□ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburser	ments," line 2(a))			
			edule B(2)(a), page			



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Comm	nittee Recipient Inf	ormation	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 Made		Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	1	Credit		
	Committee Name	1				
	Street Address					
3	City	State	ZIP	 □ Cash		
	Committee ID Number Date Contribution Made			Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
ĺ	Committee ID Number	Date Contribution Made	1	Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP	□ Cash		
ľ	Committee ID Number	Committee ID Number Date Contribution Made		□ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	ummary of Disburser	nents," line 2(b))			
		0.1	edule B(2)(b), page			



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party	Recipient Inform	ation	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 Mar	de			
	Committee Name					
	Street Address					
2	City State ZIP					
	Committee ID Number	Date Contribution Ma	de	□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number Date Contribution Made			□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Ma	de	□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number Date Contribution Made		□ Cash □ Credit			
	Enter total only if last page of schedu (transfer the total disbursed this period to '	le Summary of Disburs	sements," line 2(c))			
_			chedule B(2)(c), pag	le of		



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	hip Recipient Inforr	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	Credit		
	Partnership Name					
	Street Address					
2	City State ZIP		ZIP	□ Cash		
l	Corporation Commission File Number Date Contribution Made					
	Partnership Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	n Made	Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	n Made	Credit		
	Partnership Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	n Made	Credit		
Ì	Enter total only if last page of sch (transfer the total disbursed this perio	nedule d to "Summary of Dist	oursements," line 2(d))			



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

/					
Corporation /	LLC Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date Contribution Made		Credit		
Corporation/LLC Name					
Street Address					
City	State	ZIP	-		
Corporation Commission File Number	Date Contribution Made		Credit		
Corporation/LLC Name					
Street Address					
City	State	ZIP	Cash		
Corporation Commission File Number	Date Contribution Made		Credit		
Corporation/LLC Name					
Street Address					
City	State	ZIP	□ Cash		
Corporation Commission File Number	Date Contribution Made		Credit		
Corporation/LLC Name					
Street Address					
Cily	State	ZIP	□ Cash		
Corporation Commission File Number			Credit		
Enter total only if last page of scheo (transfer the total disbursed this period to	dule o "Summary of Disburse	ments," line 2(e))			
	So	chedule B(2)(e), page	_ of		
	Corporation/LLC Name Street Address City Corporation/LLC Name Street Address Corporation/LLC Name Street Address City Corporation/LLC Name Street Address City Corporation Commission File Number Corporation/LLC Name Street Address City Corporation Commission File Number Corporation/LLC Name Street Address City Corporation/LLC Name City Corporation/LLC Name Street Address City Corporation Commission File Number	Corporation/LLC Name Street Address City State Corporation Commission File Number Date Contribution Made Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address Corporation Commission File Number Date Contribution Made Corporation/LLC Name Street Address City State Corporation/LLC Name St	Street Address City State ZIP Coporation/LLC Name Street Address City State ZIP Coporation/LLC N	Corporation / LLC Recipient Information Contributed Corporation / LLC Reme Street Address	Corporation / LLC Recipient Information Amount this Contributed Amount this Reporting Period Corporation / LD Name Image: State Image: State Image: State City State Image: State Image: State Corporation / LD Name Date Contribution Made Image: State Image: State Corporation / LD Name Image: State Image: State Image: State Corporation / LD Name Image: State Image: State Image: State Corporation / LD Name Image: State Image: State Image: State Corporation / LD Name Image: State Image: State Image: State Corporation Cormitation File Number Date Contribution Made Image: State Image: State Corporation Commission File Number Date Contribution Made Image: State Image: State Corporation Commission File Number Date Contribution Made Image: State Image: State Corporation Commission File Number Date Contribution Made Image: State Image: State Corporation Commission File Number Date Contribution Made Image: State Image: State Corporation Commission File Number Date Contribution Made Image: State Image: State Corporation Commission File Number Date Contribution Made Image: St



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Ļabor Orgar	nization Recipient I	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl	
	Labor Organization Name					
	Street Address					
	City State ZIP					
	Corporation Commission File Number Date Contribution Made		□ Cash □ Credit			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Date Contribution Made		X	
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	n Made	□ Cash □ Credit		
	Labor Organization Name	Labor Organization Name				
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	n Made			
	Labor Organization Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	n Made			
	Enter total only if last page of sch (transfer the total disbursed this period	edule to "Summary of Dist	oursements," line 2(f))	I		



COMMITTEE ID NUMBER

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contributo		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name		Date Refund Received			
	Street Address					
1	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address			1		
2	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address			_		
3	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	_		
	Committee Name		Date Refund Received			
	Street Address	Street Address				
4	City	State	ZIP	-		
2	Committee ID Number		Date of Original Contribution	_		
	Committee Name		Date Refund Received			
	Street Address					
5	City	State	ZIP	-		
	Committee ID Number		Date of Original Contribution	-		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburse	ements " line 2(h))			
_		mary or Diabarac	smenta, nne z(n))			



COMMITTEE ID NUMBER

SCHEDULE B(3)(a)

LOANS MADE:

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



SCHEDULE B(3)(b)

LOAN GUARANTEES MADE:

	Guarantor Name	Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
1	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guarar	I			
	Guarantor Name					
100	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guarar	nteed			
	Guarantor Name			14	1	
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaran	nteed			
	Guarantor Name					
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guarar	nteed			
	Enter total only if last page of so (transfer the total received this perio	hedule	sements," line 3(b))			
	<u>к</u>		, , , , , , , , , , , , , , , , , , , ,			



SCHEDULE B(3)(c)

FORGIVENESS ON LOANS MADE:

/	Borro	wer Information	Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Borrower Name	Date Forgiveness Made				
4	reet Address					
1	Cily	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
1	Street Address	reet Address				
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	Date Forgiveness Made				
	Street Address		1			
4	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstanding		_		
	Borrower Name	1	Date Forgiveness Made			
	Street Address					
5	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstanding	<u>.</u>	-		
	Enter total only if last page of sched (transfer the total disbursed this period to	ule "Summary of Disburser	ments," line 3(c))			
	1		edule B(3)(c), page			



COMMITTEE ID NUMBER

SCHEDULE B(3)(d)

REPAYMENT ON LOANS RECEIVED:

	Lender	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Repayment Made				
	Street Address					
1	City	State	ZIP			
	Original Amount Βοποwed	Amount Still Outstanding	1/			
	Lender Name		Date Repayment Made			
	Street Address		1			
2	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name	1	Date Repayment Made			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
Ì	Lender Name		Date Repayment Made			
	Street Address		1	_		
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	I mmary of Disburser	ments," line 3(d))			



COMMITTEE ID NUMBER

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/				Amount of Interest	Cumulative	Cumulative
	Lender	Information		Accrued	Amount this Reporting Period	Amount this Election Cycle
	Lender Name		Date Interest Accrued			
Ī	Street Address					
1	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					
3	City	State	ZIP			
3	Original Amount Волоwed	Amount Still Outstanding		_		
	Lender Name		Date Interest Accrued	· ·		
	Street Address	irreet Address				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
-	Lender Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		_		
	Enter total only if last page of schedule	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 3(e))				



COMMITTEE ID NUMBER

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

· · ·	Rec	Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name of Original Payor		Date Rebate/Refund Made			
1	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					
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
1	Name of Original Payor		Date Rebate/Refund Made			
1	Street Address					
3	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					
4	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor	1	Date Rebate/Refund Made			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Enter total only if last page of sche (transfer the total disbursed this period	dule to "Summary of Disburs	ements," line 4)			



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committe	e Recipient Inforr	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	-				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disbursen	nents," line 5(a))			
6.		Sche	dule B(5)(a), page of			~~



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/	Political Action Commit	ttee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
3	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
4	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
5	Street Address					
ÿ	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disbursen	nents," line 5(b))			
	<	Sche	edule B(5)(b), page of	f		/



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party	Recipient Information	tion	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 Contributio	n Made			
	Committee Name					
	Street Address			-		
2	City	State	ZIP	-		
2	Committee ID Number	Date In-Kind Contributio	n Made	_		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	on Made			
	Committee Name					
2	Street Address					
4	City	State	ZIP	-		
1	Committee ID Number	Date In-Kind Contribution	on Made	-		
-	Committee Name					
- 100	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Made			
	Enter total only if last page of schedu (transfer the total disbursed this period to "	le Summarv of Disburse	ments," line 5(c))			
	,		edule B(5)(c), page	of		



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	hip Recipient Informat	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Street Address					
1	City	State	ZIP	2		
	Corporation Commission File Number	Date In-Kind Contribut	lion Made			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Made			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Made			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Made			
1	Partnership Name					
	Street Address					
ō	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Made			
	Enter total only if last page of sch (transfer the total disbursed this period	l edule d to "Summary of Disburs	ements," line 5(d))			



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

ration/LLC Name Address ration Commission File Number ration/LLC Name	State Date In-Kind Contributio State Date In-Kind Contributio State State State State	ZIP			
ration Commission File Number ration/LLC Name ration Commission File Number ration/LLC Name Address	Date In-Kind Contributio	ZIP on Made			
ration/LLC Name Address ration Commission File Number ration/LLC Name Address	Date In-Kind Contributio	ZIP on Made			
ration/LLC Name Address ration Commission File Number ration/LLC Name Address	State Date In-Kind Contribution State State	ZIP on Made			
Address	Date In-Kind Contributio	on Made			
ration Commission File Number vration/LLC Name	Date In-Kind Contributio	on Made			
ration/LLC Name Address	Date In-Kind Contributio	on Made			
ration/LLC Name Address	State				
: Address		ZIP			
		ZIP			
ration Commission File Number		ZIP			
ration Commission File Number					
	Date In-Kind Contribulic	ion Made			
ration/LLC Name					
t Address					
	State	ZIP			
ration Commission File Number	Date In-Kind Contribution	ion Made			
oration/LLC Name					
t Address					
	State	ZIP			
ration Commission File Number	Date In-Kind Contributio	ion Made			
er total only if last page of scl	hedule od to "Summary of Disburse	ements," line 5(e))			
ore t A	tion/LLC Name	tion/LLC Name Address State tion Commission File Number Date In-Kind Contributi	stion/LLC Name	tion/LLC Name Address State ZIP ation Commission File Number Date In-Kind Contribution Made	tion/LLC Name Address State ZIP ation Commission File Number Date In-Kind Contribution Made



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organ	nization Recipient Info	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ition Made			
	Labor Organization Name					
	Street Address					
	City State		ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
1	Labor Organization Name					
	Street Address	1 1 1 1 H				
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Labor Organization Name					
	Street Address					
•	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contrib	ution Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Enter total only if last page of sch (transfer the total disbursed this period	edule d to "Summary of Disbur	sements," line 5(f))			



COMMITTEE ID NUMBER

SCHEDULE B(6)

INDEPENDENT EXPENDITURES MADE:

	-	Recipient Informa		Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (i	ncluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	– □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (i	ncluding % opposed)	– □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
3	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)		- □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ 🗆 Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
4	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (i	ncluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	Credit		
_	Enter total only if last page of schedul	e				
	(transfer the total disbursed this period to "	Summary of Disburs	sements," line 6)			



COMMITTEE ID NUMBER

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure F	Recipient Informat	ion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Recipient Name Mode of Advertising (TV, mail, etc)					
ľ	Street Address			_		
1	City	State	ZIP			
ľ	Ballot Measure(s) Supported (Including % supported)	Ballot Measure(s) Oppose	d (including % opposed)	□ Cash		
ľ	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- 🗆 Credit		
1	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP	-		
ľ	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppose	d (including % opposed)	□ Cash		
ľ	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ 🗆 Credit		
1	Recipient Name		Mode of Advertising (TV, mail, etc)			
ľ	Street Address		.1			
3	City	State	ZIP	-		
ŀ	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)		– ⊡ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		Credit		
+	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppose	d (including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		Credit		
E	Enter total only if last page of schedul (transfer the total disbursed this period to "\$	e Summary of Disburse	ements," line 7)			



COMMITTEE ID NUMBER

RECALL EXPENDITURES MADE:

1

2

3

4

Cumulative Cumulative Expenditure Expenditure Recipient Information Amount this Amount this Amount Election Cycle Reporting Period Mode of Advertising (TV, mail, etc) Recipient Name Street Address ZIP City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash Credit Office Held Date of First Publication, Display, Delivery, or Broadcast Recipient Name Mode of Advertising (TV, mail, etc) Street Address ZIP State City Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash Credit Office Held Date of First Publication, Display, Delivery, or Broadcast Recipient Name Mode of Advertising (TV, mail, etc) Street Address ZIP City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled 🗆 Cash Credit Date of First Publication, Display, Delivery, or Broadcast Office Held Recipient Name Mode of Advertising (TV, mail, etc) Street Address State ZIP City Candidate Sought to be Recalled Supporting or Opposing Issuance of Recall Order? 🗆 Cash Credit Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 8) Schedule B(8), page____ of ____

SCHEDULE B(8)



COMMITTEE ID NUMBER

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

		ted Candidate	Date Benefit Provided	Amount	Amount this Reporting Period	Amount this Election Cycl
	Candidate Name Street Address		Date Benefit Provided	_		
		1				
1	City	State	ZIP		-	
	Type of Benefit Provided					
	Notes;					
	Candidate Name		Date Benefit Provided			
	Street Address					
2	City	State	ZIP	-		
	Type of Benefit Provided	1				
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address			_		
3	City	State	ZIP	_		
	Type of Benefit Provided					
	oles:					
	Candidate Name		Date Benefit Provided			
	Street Address			-		
4	City	State	ZIP	_		
	Type of Benefit Provided	P				
8	Nates:					
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	e Summary of Disburse	ements," line 9)	1.		



COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient	Committee Inform	nation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Payment Date					
	Street Address					
1	City	State	ZIP			
3	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	kpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Exper		xpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Expens		xpense (if applicable)	□ Cash □ Credit		
	Committee Name	17 2	Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)	□ Cash □ Credit		
-	Enter total only if last page of sche (transfer the total disbursed this period t	dule o "Summary of Disb	ursements," line 10)			



COMMITTEE ID NUMBER

SCHEDULE B(11)

REIMBURSEMENTS MADE:

	Recipient	Information		Reimbursement	Cumulative Amount this	Cumulative Amount this
	Name			Amount	Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	Credit		
	Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date			
	Name					
	Street Address	_				
3	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date			
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date			
	Name		1			24
	Street Address					
5	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disburser	I ments," line 11)			



COMMITTEE ID NUMBER

OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
1	Name					
1	Street Address					
1	City	Slate	ZIP			
7	Type of Account Payable or Debt Owed		Date that Debt Accrued	1		
ľ	Name					
	Street Address					
2	City	State	ZIP	-		
1	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
3	City	State	ZIP			
1	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
1	Name					
	Street Address			1		
4	City	State	ZIP	-		
1	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
	Name					
	Street Address		1			
5	City	State	ZIP	-		
1	Type of Account Payable or Debt Owed		Date that Debt Accrued	1		
E	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Disburseme	ents," line 12)			



COMMITTEE ID NUMBER

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 B(13), page____ of ____



MISCELLANEOUS DISBURSEMENTS:

Cumulative Cumulative Amount this Amount this **Recipient Information** Amount Election Cycle Reporting Period Name Street Address 1 State City ZIP 🗆 Cash Disbursement Type Disbursement Date Credit Name Street Address 2 City State ZIP 🗆 Cash Credit Disbursement Date Disbursement Type Name Street Address 3 City State ZIP Cash Credit Disbursement Date Disbursement Type Name Street Address 4 State City ZIP 🗆 Cash Disbursement Date Credit Disbursement Type Name Street Address 5 City State ZIP 🗆 Cash Credit Disbursement Type Disbursement Date Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 14) Schedule B(14), page_____ of ____

SCHEDULE B(14)



AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

	Cumulative Amount this Reporting Period	Cumulative Amount this Electio Cycle
Cumulative of Disbursements - \$250 or Less (If disbursements of \$250 or less are listed on any of the other disbursement schedules, do not include them on Schedule B(15))		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 15)		

Schedule B(15), page____ of ____

2021-02 COMMITTEE ID NUMBER

Office Sought: □ County Office: □ City/Town Office Rec'd

electronically

10/29/2022 9:03

am Goodyear

REPORTING PERIOD REPORT DUE

Cumulative Report:

□ Special District Office: □ School Board District:

Committee Information: Committee Name: CANDIDATE INFORMATION (only if filing as a candidate committee):

COMMITTEE INFORMATION (required): Juan Ojeda City Council

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

X - Check here if this is the candidate committees 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):

2022

REPORTING PERIOD REPORT			
2020 4 th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021		
2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 20	Eebruary 21, 2021 to February 27, 2021		
2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 20	21 April 1, 2021 to April 15, 2021		
2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021		
2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*		
2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021		
2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021		
2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021		
2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September	30, 2021 October 1, 2021 to October 15, 2021		
2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021		
2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16,	2021 October 17, 2021 to October 23, 2021		
2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to Decemb	Der 31, 2021 January 1, 2022 to January 15, 2022		
2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022		
2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 20	Eebruary 20, 2021 to February 26, 2022		
2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March	April 1, 2022 to April 15, 2022		
2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022		
2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022		
2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022		
2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022		
2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022		
2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022		

X	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§§ 1-243(A) , 1-301 and 1-303.

Activity Cash Activity This Reporting Period

FINANCIAL SUMMARY (required):

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)	136.67		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	00		
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	00		
(d) = Balance at close of reporting period 136.67			
Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page and the following page need to be filed.			

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity. Arizona Secretary of State Revision 12/29/21 (fillable format)



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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.

COMMITTEE ID NUMBER

COMMITTEE ID NUMBER	
SLIMMARY OF RECEIRTS (Schodule A):	

CHE STO

SUMMARY OF RECEIPTS (Schedule A): STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

1. Monetary Contributions Received Receipts Cash Equity

1	
1	
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(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(I) 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

10. Outstanding Accounts Receivable / Debts Owed to Committee

11. Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)

- 12. Miscellaneous Receipts (use cash and/or equity as applicable)
- 13. Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)

Arizona Secretary of State Revision 12/29/21 (fillable format)



SUMMARY OF DISBURSEMENTS (Schedule B): STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

	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 (PACs & Political Parties Only) (f)	
Labor Organizations (PACs & 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 (PACs & Political Parties Only) (f)	
Labor Organizations (PACs & 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	<u> </u>
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 (use cash and/or equity as applicable)	
15. Aggregate of Disbursements - \$250 or Less (use cash and/or equity as	
applicable) 16. Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add	
3(f), 5(g), & 12-15)	



CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

format)

MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:* SCHEDULE A(1)(a) Amount Received

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Name Date Contribution Received 1 Street Address ZIP State City Occupation Employer Name Date Contribution Received 2 Street Address City State ZIP Occupation Employer Date Contribution Received Name 3

Individual Contributor Information

	Street Address					
	City	State	ZIP			
	City	State	ZIF			
	Occupation	Employer				
4	Name	•	Date Contribution Received			
1						
	Street Address					
		T				
	City	State	ZIP			
	Occupation	Employer				
-						
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
ĺ						
	Occupation Employer					
	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(a))					
1						

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

Schedule A(1)(a), page_of



MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):* SCHEDULE A(1)(b) Period Cumulative Amount this Election Cumulative Amount this Reporting

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))	

100 are listed on Schedule A(1)(a), do not include them on Schedule A(1)(b).

*If in-state individual contributions of more than

Schedule A(1)(b), page_of



format) CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS SCHEDULE A(1)(c) Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Individual Contributor Information Amount Received

1	Name		Date Contribution Received		
	Street Address				
			r		
	City	State	ZIP		
	Occupation				
	Occupation	Employer			
2	Name		Date Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
			1		
3	Name		Date Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
4	Name	1	Date Contribution Received		
	Street Address				
			[
	City	State	ZIP		
	Occupation	Employer			
╞	Name		Date Contribution Received		
5	THEFT		Date Contribution Received		
L	1		1		

Street Address					
City	State	ZIP			
Occupation Employer					
Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	1(c))			

Schedule A(1)(c), page of



CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES: SCHEDULE A(1)(d)

Information Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Candidate Committee Contributor

1	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date Contribution Rece	ived		
2	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number Date Contribution Received				
3	Committee Name				
	Street Address				

	City	State	ZIP		
	Committee ID Number	Date Contribution Rece	vived		
4	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date Contribution Rece	ived		
5	Committee Name				
	Street Address				
			[
	City	State	ZIP		
	Committee ID Number	Date Contribution Rece	ived		
	Enter total only if last page of schedule (transfer the total received this period to "Summ				
	(transfer the total received this period to "Summ	ary of Receipts," line	1(d))		

Schedule A(1)(d), page of



Arizona Secretary of State Revision 12/29/21 (fillable , format)

CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES: SCHEDULE A(1)(e)

Information Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Political Action Committee Contributor

1	Committee Name		
	Street Address		
	City	State	ZIP

	Committee ID Number	Date Contribution Rece	ived			
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	vived			
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	lived			
4	4 Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	ived			
5	Committee Name					
	Street Address					
	City	er Date Contribution Received				
	Committee ID Number					
	Enter total only if last page of schedule (transfer the total received this period to "Summ	<u> </u>				

Schedule A(1)(e), page of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA COMMITTEE CAMPAIGN



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES: SCHEDULE A(1)(f) Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Political Party Contributor Information

1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Recei	ived			
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	• Jived			
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	eived			
4	Committee Name					
	Street Address					
	City	State ZIP Date Contribution Received				
	Committee ID Number					
5	5 Committee Name					

Street Address					
City	State	ZIP			
Committee ID Number Date Contribution Received					
Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	1(f))			

Schedule A(1)(f), page of



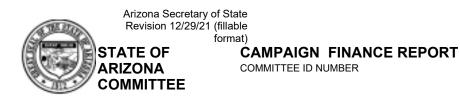
MONETARY CONTRIBUTIONS FROM PARTNERSHIPS: SCHEDULE A(1)(g) Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Partnership Name Street Address ZIP City State Corporation Commission File Number Date Contribution Received Partnership Name 2 Street Address City State ZIP Corporation Commission File Number Date Contribution Received Partnership Name 3 Street Address

Partnership Contributor Information

	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Rece	lived		
4	Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Rece			
	Corporation Commission File Number	Date Contribution Rece	aved		
5	Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Rece	vived		
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(g))				

Schedule A(1)(g), page of



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs: SCHEDULE A(1)(h)

Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Corporation / LLC Contributor Information

1	Corporation/LLC Name		
	Street Address		

	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
		Date Contribution Rece	97790			
	0					
3	Corporation/LLC Name					
	Street Address					
			Γ			
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	sived			
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	sived			
5	Corporation/LLC Name					
ľ						
	Street Address					
	City	Dity State ZIP				
	Comparation Commission File Number	Data Contribution D	nivod			
	Corporation Commission File Number	Date Contribution Rece	51VEG			
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	1(h))			

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS: SCHEDULE A(1)(i)

Information Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Labor Organization Contributor

1	Labor Organization Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Recei	ived		
2	Labor Organization Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Rece	ived		
3	Labor Organization Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Rece	ived		
4	Labor Organization Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Rece	ived		
	Corporation Commission File Number Date Contribution Received				

5	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(i))					

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

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE

CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES: SCHEDULE A(1)(j) Cumulative Amount this Reporting Period Cumulative Amount this Election

Cycle

1	Name		Date Contribution Received		
	Street Address		L		
	City	State	ZIP		
	Occupation	Employer			
2	Name		Date Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
3	Name	-	Date Contribution Received		

Candidate Information Amount Received

Street Address City State ZIP	
City State ZIP	
City State ZIP	
City State ZIP	
Occupation Employer	
4 Name Date Contribution Received	
Street Address	
City State ZIP	
Occupation Employer	
5 Name Date Contribution Received	
Street Address	
City State ZIP	
Gity State Zir	
Occupation Employer	
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(j))	
(transier the total received this period to "Summary of Receipts," line 1(j))	

Schedule A(1)(j), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONAFINANCE REPORT COMMITTEE

CAMPAIGN

COMMITTEE ID NUMBER

REFUNDS GIVEN BACK TO CONTRIBUTORS: SCHEDULE A(1)(I)

Refunded Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Contributor Information Amount

1	Name	Date Contribution Refunded		
	Street Address			

	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
2	Name		Date Contribution Refunded			
2						
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
3	Name		Date Contribution Refunded			
	Street Address					
		0.1	7/0			
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
4	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
		ID Number (if applicable)				
<u> </u>						
5	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)	ID Number (if applicable)		1		
⊢	Enter total only if last page of schodulo			I		
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	1(I))			
	1					

Schedule A(1)(I), page of

STATE OF ARIZONA COMMITTEE CAMPAIGN

FINANCE REPORT

COMMITTEE ID NUMBER

LOANS RECEIVED: SCHEDULE A(2)(a)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Lender Information Amount Received

1	Lender Name	Date Loan Received			
	Street Address				
	City	State	ZIP		
	Guarantor/Endorser Name	Non-Electoral Purpose?	? (PACs and Political Parties		
		Only) 🗖			
2	Lender Name	Date Loan Received			
	Street Address				
	City	State	ZIP		
	Guarantor/Endorser Name	Non-Electoral Purpose?	? (PACs and Political Parties		
		Only) 🗆			
3	Lender Name	Date Loan Received			
	Street Address				
	City	State	ZIP		
	Guarantor/Endorser Name	Non-Electoral Purpose?	? (PACs and Political Parties		
		Only) 🗆			
4	Lender Name	Date Loan Received			
	Street Address				
	City	State	ZIP		
	Guarantor/Endorser Name	Non-Electoral Purpose?	? (PACs and Political Parties		
		Only)			

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

Schedule A(2)(a), page_of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

FORGIVENESS ON LOANS RECEIVED: SCHEDULE A(2)(b)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Lender Name Date Forgiveness Received 1 Street Address ZIP City State Amount Still Outstanding Original Amount of Loan Date Forgiveness Received 2 Lender Name Street Address City ZIP State Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received 3

Lender Information Amount Forgiven

	Street Address				
	City	State	ZIP		
	Original Amount of Loan	Amount Still Outstanding	9		
			-		
4	Lender Name		Date Forgiveness Received		
	Street Address				
	City	State	ZIP		
	Original Amount of Loan	Amount Still Outstanding	g		
5	Lender Name		Date Forgiveness Received		
	Street Address				
	City	State	ZIP		
	City	State	Zir		
	Original Amount of Loan	Amount Still Outstanding	g		
	Enter total only if last page of schedule				
	(transfer the total received this period to "Summ				

Schedule A(2)(b), page_of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE **CAMPAIGN FINANCE REPORT**

COMMITTEE ID NUMBER

REPAYMENT ON LOANS MADE: SCHEDULE A(2)(c)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Borrower Information Amount Repaid

1	Borrower Name	Date Repayment Received		
	Street Address			

	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	9		
2	Borrower Name		Date Repayment Received		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding			
	Onginal Amount borrowed	Amount Still Outstandin	9		
_	Borrower Name		Date Pengyment Provised		
3	Borrower Name		Date Repayment Received		
	Street Address				
			Γ		
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	g		
4	Borrower Name		Date Repayment Received		
	Street Address			-	
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	.		
5	Borrower Name		Date Repayment Received		
	Street Address		l		
	City	State	ZIP		
	Original Amount Porround	Amount Still Outstand	<u> </u>		
	Original Amount Borrowed	Amount Still Outstandin	9		
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	2(c))		

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

INTEREST ACCRUED ON LOANS MADE: SCHEDULE A(2)(d)

Interest Accrued Cumulative Amount this Reporting Period Cumulative Amount this Election f Cycle

Borrower Information Amount of Cy

1	Borrower Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	1		
2	Borrower Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	J		
3	Borrower Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	I		
4	Borrower Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	1		

5	Borrower Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Array and Deservined	Arra aurat Otill Outate adia			
	Original Amount Borrowed	Amount Still Outstanding	9		
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 2(d))				
		ary or receipts, line	2(4))		

Schedule A(2)(d), page_of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA FINANCE REPORT COMMITTEE CAMPAIGN

REBATES AND REFUNDS RECEIVED: SCHEDULE A(3)

Rebated or Refunded Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Payor Information Amount

1	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
2	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
3	Payor Name		Date Rebate/Refund Received		

	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
4	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
5	Payor Name		Date Rebate/Refund Received		
	Street Address				
	City	State	ZIP		
	Original Purchase Amount	Reason for Refund/Rebate			
	Unginai Furundoe Alitioutit	Reason for Refund/Rebate			
	Enter total only if last page of schedule (transfer the total received this period to "Su	mmary of Receipte '	" line 3)		
	(transfer the total received this period to "Summary of Receipts," line 3)				

Schedule A(3), page of _____

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

> INTEREST ACCRUED ON COMMITTEE MONIES: SCHEDULE A(4) Cumulative Amount this Election Cycle

Cumulative Amount this Reporting Period

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

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER CAMPAIGN

Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Individual Contributor Information

1	Name		Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
2	Name		Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
3	Name		Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
4	Name		Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
5	Name	1	Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		

Occupation	Employer			
Enter total only if last page of schedule (transfer the total received this period to "Summ	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(a))			

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

Schedule A(5)(a), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONAFINANCE REPORT

COMMITTEE CAMPAIGN

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):* SCHEDULE A(5)(b) Period Cumulative Amount this Election Cycle

Cumulative Amount this Reporting

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 5(b))	

are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

*If contributions of more than \$100

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA FINANCE REPORT

COMMITTEE CAMPAIGN

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS SCHEDULE A(5)(c) Amount Received Cumulative Amount this Reporting Period Individual Contributor Information Cumulative Amount this Election Cycle

1	Name		Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
2	Name		Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		
	Occupation	Employer			
					
3	Name		Date In-Kind Contribution Received		
	Street Address				
			E		
	City	State	ZIP		
	Occupation	Employee			
	Occupation	Employer			
_	Name		Date In Kind Contribution Received		
4			Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		

	Occupation	Employer				
5	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(c))					

Schedule A(5)(c), page____ of ____

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER CAMPAIGN

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES: SCHEDULE A(5)(d) Information Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributio	n Received		
2	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number Date In-Kind Contribution Received				

Candidate Committee Contributor

_					
3	Committee Name				
	Street Address	Street Address			
	City				
	Committee ID Number	Date In-Kind Contributi	on Received		
-					
4	4 Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Received		
5	Committee Name	1			
Ũ					
	Street Address				
			710		
	City	State	ZIP		
	Committee ID Number Date In-Kind Contribution Received				
1	Enter total only if last page of schedule (transfer the total received this period to "Summ	and of Deckinster # "			
	(transier the total received this period to "Summ				

Schedule A(5)(d), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE

CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES: SCHEDULE A(5)(e)

Information Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Political Action Committee Contributor

1

	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contribution	on Received		
	Committee Name				
2	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Received	1	
3	Committee Name	1			
	Street Address				
		0.1	715		
	City	State	ZIP		
	Committee ID Number Date In-Kind Contribution Received				
	Commutee ID Number	Date In-Kind Contributi	on Received		
	Commute in Number	Date In-Kind Contributi	on Received		
4	Committee Name	Date In-Kind Contributi	on Received		
4		Date In-Kind Contributi	on Received		
4		Date In-Kind Contributi	on Received		
4	Committee Name	Date In-Kind Contributi	on Received		
4	Committee Name	Date In-Kind Contributi	ZIP		
4	Committee Name Street Address				
4	Committee Name Street Address		ZIP		
4	Committee Name Street Address City	State	ZIP		
	Committee Name Street Address City	State	ZIP		
4	Committee Name Street Address City Committee ID Number	State	ZIP		
	Committee Name Street Address City Committee ID Number Committee Name	State	ZIP		
	Committee Name Street Address City Committee ID Number	State	ZIP		
	Committee Name Street Address City Committee ID Number Committee Name Street Address	State Date In-Kind Contributi	ZIP on Received		
	Committee Name Street Address City Committee ID Number Committee Name	State	ZIP		
	Committee Name Street Address City Committee ID Number Committee Name Street Address	State Date In-Kind Contributi	ZIP on Received		
	Committee Name Street Address City Committee ID Number Committee Name Street Address	State Date In-Kind Contributi	ZIP on Received		
	Committee Name Street Address City Committee ID Number Committee Name Street Address City City City	State Date In-Kind Contributi	ZIP on Received		
	Committee Name Street Address City Committee ID Number Committee Name Street Address City City City	State Date In-Kind Contributi State Date In-Kind Contributi	ZIP on Received ZIP		

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA CAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES: SCHEDULE A(5)(f)

Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributio	n Received		
2	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Received		
3	Committee Name				
3					
	Street Address				
	2 74	0.1	ZIP		
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Received		
4	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	n Received		

Political Party Contributor Information

5	5 Committee Name					
	Street Address					
	City State ZIP					
	Committee ID Number	Date In-Kind Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(f))					

Schedule A(5)(f), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE **CAMPAIGN FINANCE REPORT**

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS: SCHEDULE A(5)(g)

Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Partnership Contributor Information

1	Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributio	n Received		
2	Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contribution Received			

—					
3	Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Received		
	Partnership Name				
4					
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Received		
5	Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Received		
	Entor total only if last page of each dute				
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	: 5(g))		

Schedule A(5)(g), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs: SCHEDULE A(5)(h)

Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributio	on Received		
2	Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Received		
3	3 Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	ion Received		
4	Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contribution Received			
5	Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	Ion Received		
	Enter total only if last page of schedule (transfer the total received this period to "Summ	<u> </u>			

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS: SCHEDULE A(5)(i) Information Amount Received Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Labor Organization Contributor

1	Labor Organization Name				
	Street Address				
			-		
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributio	n Received		
2	Labor Organization Name				
	Street Address				
	City.	State	ZIP		
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contribution	on Received		
3	Labor Organization Name				
	Street Address				
	City	State	ZIP		
			<u> </u>		
	Corporation Commission File Number	Date In-Kind Contribution	on Received		
4	Labor Organization Name				
	Street Address				

	City	State	ZIP		T
		outo			
	Corporation Commission File Number	Date In-Kind Contribution	on Received		
5	Labor Organization Name				
	Street Address				
	City	State	ZIP		
					ļ
	Corporation Commission File Number	Date In-Kind Contribution	on Received		
_					-
	Enter total only if last page of schedule (transfer the total received this period to "Summ	any of Pacaints " line	5(i))		
		ary of Receipts, IIIIe	J(1))		

Schedule A(5)(i), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE

CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM CANDIDATE'S PERSONAL ASSETS OR PROPERTY: SCHEDULE A(5)(j)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Candidate Information Amount

Received

1	Name		Date In-Kind Contribution Received		
	Street Address				
	City	State	ZIP		
	Asset or Property Contributed				
2	Name		Date In-Kind Contribution Received		
	Street Address				

	City	State	ZIP			
	Asset or Property Contributed					
0	Name	Date In-Kind Contribution				
3	Name		Received			
	Street Address					
	City	State	ZIP			
	Asset or Property Contributed					
4	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	City	State	ZIF			
	Asset or Property Contributed					
5	Name		Date In-Kind Contribution			
			Received			
	Street Address					
				{		
	City	State	ZIP			
				1		
	Asset or Property Contributed					
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	5(j))			
			<u></u>			

Schedule A(5)(j), page of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA FINANCE REPORT COMMITTEE CAMPAIGN

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Source Information Amount Received

1	Name		Date In-Kind Donation Received		
	Street Address				
	City	State	ZIP		
	Type of Item Donated				
2	Name		Date In-Kind Donation Received		
	Street Address				
	City	State	ZIP		
	Type of Item Donated				
3	Name		Date In-Kind Donation Received		
	Street Address	Street Address			
	City	State	ZIP		
	Type of Item Donated				
4	Name		Date In-Kind Donation Received		
	Street Address				
	City	State	ZIP		
	Type of Item Donated				
5	5 Name Street Address		Date In-Kind Donation Received		
	City	State	ZIP		

Type of Item Donated		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 6)		

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Arizona Secretary of State Revision 12/29/21 (fillable

STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE

COMMITTEE ID NUMBER

EXTENSIONS OF CREDIT RECEIVED: SCHEDULE A(7)(a)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Creditor Information Amount of Credit Extended

1	Name	lame				
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
2	2 Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
3	Name					
	Street Address					
	City State		ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			

4	1 Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
5	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	7(a))			
1						

Schedule A(7)(a), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA CAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED: SCHEDULE A(7)(b) Payment Amount on Credit Extended Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	1 Name			
	Street Address			
	City	State	ZIP	
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	
2	Name			

Creditor Information

-					
	Street Address				
	City	State	ZIP		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit		
_					
3	Name				
	Street Address				
	City	State	ZIP		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit		
	Name				
4					
	Street Address				
	City	State	ZIP		
	Services as Conde Originally, Desvided on Oradit		Data of Original Enterprises of Condition		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit		
5	Name		•		
ľ					
	Street Address				
	City	State	ZIP		
	Services or Goods Originally Provided on Credit Date of Original Extension		Date of Original Extension of Credit		
	, i tottaba on ordan				
	Enter total only if last page of schedule				
	Enter total only if last page of schedule (transfer the total received this period to "Summ	nary of Receipts," line	7(b))		
I.					

Schedule A(7)(b), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

Amount Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Payor Committee Information Payment

1	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)			
2	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP	1		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)			
3	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)	-		
4	Committee Name		Payment Date			
	Street Address		<u> </u>			
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)			
			· · · · · · · · · · · · · · · · · · ·			
	Committee Name		Payment Date			
3	5 Committee Name					
	Street Address					
	City	State	ZIP			
		Suite				

Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)		
Enter total only if last page of schedule (transfer the total received this period to "Summ			

Schedule A(8), page of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES: SCHEDULE A(9)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Payor Information Payment Amount

1	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
_						
2	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
3	Name					
	Street Address					
	City State		ZIP			
			۷I۲			
	Services or Goods Purchased	-	Payment Date			

4	Name	Name				
	Street Address	Street Address				
	City	State	ZIP			
				4		
	Services or Goods Purchased		Payment Date			
5	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased	l	Payment Date			
	Services of Goods Purchased		r ayment Date			
	Enter total only if last name of schedule			1		
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	9)			

Schedule A(9), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE: SCHEDULE A(10)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Information Amount

1	Name				
	Street Address				
	City State ZIP				
	Type of Account Receivable or Debt Owed		Date that Debt Accrued		
2	Name				

	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed	1	Date that Debt Accrued			
3	Name		•			
Ũ						
	Street Address					
	City	State	ZIP			
				ļ		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
4	Name					
	Street Address					
	01	0.1	ZIP			
	City	State	ZIP			
	Type of Account Receivable or Debt Owed	1	Date that Debt Accrued			
5	Name					
ľ						
	Street Address					
				{		
	City	State	ZIP			
				4		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
-			1	1		
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipte " line	10)			

Schedule A(10), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

Cumulative Amount this Reporting Period

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)	

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Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA

COMMITTEE CAMPAIGN

FINANCE REPORT

COMMITTEE ID NUMBER

MISCELLANEOUS RECEIPTS: SCHEDULE A(12)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
2	2 Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
3	3 Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
4	Name		L			
	Street Address					
	City	State	ZIP			
	Receipt Type	<u> </u>	Receipt Date			
5	Name					

Source Information Amount

	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Receipts," line	12)			

Schedule A(12), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONAFINANCE REPORT

COMMITTEE CAMPAIGN

COMMITTEE ID NUMBER

DISBURSEMENTS FOR OPERATING EXPENSES: SCHEDULE B(1)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Recipient Information Amount Paid

1	Name	Disbursement Date		□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Type of Operating Expense Paid	Non-Electoral Purpose' Only) 🛛	? (PACs and Political Parties		
2	Name	Disbursement Date		□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Type of Operating Expense Paid	Non-Electoral Purpose'	? (PACs and Political Parties		
3	Name	Disbursement Date		□ Cash □ Credit	
	Street Address				

	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose' Only) □	? (PACs and Political Parties			
4	Name	Disbursement Date		□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose' Only) 🛛	Non-Electoral Purpose? (PACs and Political Parties Only)			
5	Name	Disbursement Date		□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 1)					

Schedule B(1), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE

CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES: SCHEDULE

B(2)(a)

Candidate Committee Recipient

Information Amount Contributed Cumulative

Amount this Reporting Period Cumulative Amount this Election Cycle

1	Committee Name	□ Cash □ Credit			
	Street Address				
	City	State	ZIP		

	Committee ID Number	Date Contribution Made			
2	Committee Name			□ Cash □ Credit	
	Street Address				
	Sueer Address				
	City	State	ZIP		
	Committee ID Number	Date Contribution Made	e		
3	Committee Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date Contribution Made	e		
4	Committee Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date Contribution Made	e		
5	Committee Name			□ Cash □ Credit	
	Street Address				
	City State ZIP				
	Committee ID Number	Date Contribution Made			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum				

Schedule B(2)(a), page_of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA COMMITTEE CAMPAIGN

FINANCE REPORT

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES: SCHEDULE B(2)(b)

Amount this Reporting Period Cumulative Amount this Election Cycle

		Political Action Comm	nittee Recipient	Information Amount Cor Cumulative	ntributed Am	ount this Reporting F nulative Amount this	Election Cycle
1	Committee Name				□ Cash □ Credit		
	Street Address						
	City		State	ZIP	-		
	Committee ID Number		Date Contribution Made	<u> </u>			
2	Committee Name						
	Street Address						
	City		State	ZIP			
	Committee ID Number		Date Contribution Made	e			
3	Committee Name				□ Cash □ Credit		
	Street Address						
	City		State	ZIP			
	Committee ID Number		Date Contribution Made	e			
4	Committee Name				□ Cash □ Credit		
	Street Address						
	City		State	ZIP			
	Committee ID Number		Date Contribution Made	e	1		
5	Committee Name				□ Cash □ Credit		
	Street Address						

City	State	ZIP			
Committee ID Number	Date Contribution Made				
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(b))					

Schedule B(2)(b), page_of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONAĆAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES: SCHEDULE B(2)(c)

Information Amount Contributed Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

					1	
1	Committee Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made	3			
2	Committee Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number Date Contribution Made					
3	Committee Name			□ Cash □ Credit		
	Street Address					
	City State ZIP					

Political Party Recipient

	Committee ID Number	Date Contribution Made	Date Contribution Made			
4	Committee Name			□ Cash □ Credit		
	Street Address					
	City	State	State ZIP			
	Committee ID Number	Date Contribution Made	Date Contribution Made			
5	Committee Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(c))					

Schedule B(2)(c), page of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA CAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO PARTNERSHIPS: SCHEDULE B(2)(d) Amount Contributed Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Partnership Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Made			

Partnership Recipient Information

2	Partnership Name		□ Cash □ Credit		
	Street Address	•			
	City	State	ZIP		
	Corporation Commission File Number Date Contribution Made				
3	Partnership Name		□ Cash □ Credit		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Made	9		
4	Partnership Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number Date Contribution Made				
5	Partnership Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum				

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Arizona Secretary of State Revision 12/29/21 (fillable format)



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs: SCHEDULE B(2)(e)

Information Amount Contributed Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

_						
	1	Corporation/LLC Name			□ Cash □ Credit	
		Street Address				
		City	State	ZIP		
		Corporation Commission File Number	Date Contribution Made			
	2	Corporation/LLC Name			□ Cash □ Credit	
		Street Address				
		City	State	ZIP		
		Corporation Commission File Number	Date Contribution Made			
	3	Corporation/LLC Name			□ Cash □ Credit	
		Street Address				
		City	State	ZIP		
		Corporation Commission File Number	Date Contribution Mad	e		
	4	Corporation/LLC Name			□ Cash □ Credit	
		Street Address				
		City	State ZIP			
		Corporation Commission File Number Date Contribution Made				
	5	Corporation/LLC Name			□ Cash □ Credit	
1						

Corporation / LLC Recipient

	Street Address				
	City	State	ZIP		
	Corporation Commission File Number Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sumr				

Schedule B(2)(e), page_of

Arizona Secretary of State Revision 12/29/21 (fillable

format)

STATE OF ARIZONACAMPAIGN FINANCE REPORT

COMMITTEE

COMMITTEE ID NUMBER

 MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS: SCHEDULE B(2)(f)

 Labor Organization Recipient
 Information Amount Contributor Cumulative
 Amount this Reporting Period Cumulative Amount this Election Cycle

1	Labor Organization Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Made			
2	Labor Organization Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date Contribution Made	3		
3	Labor Organization Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		

	Corporation Commission File Number	Date Contribution Made				
4	Labor Organization Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Labor Organization Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(f))					

Schedule B(2)(f), page of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

CONTRIBUTION REFUNDS RECEIVED: SCHEDULE B(2)(h)

Refunded Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Contributor Information Amount

1	Committee Name		Date Refund Received		
	Street Address	dress			
	City	State	ZIP		
	Committee ID Number		Date of Original Contribution		

2	2 Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
3	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
4	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
5	Committee Name		Date Refund Received			
	Street Address		<u> </u>			
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
╞	Enter total only if last page of schedule (transfer the total disbursed this period to "Sumr	nary of Disbursemen	ts," line 2(h))			

Schedule B(2)(h), page_of

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONAFINANCE REPORT COMMITTEE CAMPAIGN

Amount this Reporting Period Cumulative Amount this Election Cycle

Borrower Information Amount Loaned Cumulative

1	Borrower Name					
Ľ						
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
2	Borrower Name					
[
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
3	3 Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
1						
L						
4	Borrower Name					
	Street Address					
	City	State	ZIP			
1						
1	Guarantor/Endorser Name	Date Loan Made				
1						
⊢						
5	Borrower Name					
L						

	Street Address				
	City	State	ZIP		
	Guarantor/Endorser Name Date Loan Made				
	Enter total only if last page of schedule (transfer the total received this period to "Summ				

Schedule B(3)(a), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

LOAN GUARANTEES MADE: SCHEDULE B(3)(b)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Guarantor Information Amount Guaranteed

1	Guarantor Name				
	Street Address				
	City	State	ZIP		
	Borrower Name	Date Loan Guaranteed			
2	2 Guarantor Name				
	Street Address				
	City	State	ZIP		
	Borrower Name Date Loan Guaranteed				
3	3 Guarantor Name				
	Street Address				

	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
4	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
		Date Loan Guaranteed				
5	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 3(b))					

Schedule B(3)(b), page_of

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STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

FORGIVENESS ON LOANS MADE: SCHEDULE B(3)(c)

Forgiven Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Borrower Information Amount

1	Borrower Name		Date Forgiveness Made		
ľ	Street Address				
ľ	City	State	ZIP		

	Original Amount of Loan	Amount Still Outstanding	9			
2	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	9			
3	Borrower Name		Date Forgiveness Made			
	Street Address		<u> </u>			
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	9			
4	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	9			
5	Borrower Name		Date Forgiveness Made			
	Street Address	Street Address				
	City	State	ZIP			
	Original Amount of Loan Amount Still Outstandin		9			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	<u> </u>				

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Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA COMMITTEE CAMPAIGN

FINANCE REPORT

COMMITTEE ID NUMBER

REPAYMENT ON LOANS RECEIVED: SCHEDULE B(3)(d)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Lender Information Amount Repaid

1	Lender Name		Date Repayment Made		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	g		
2	Lender Name		Date Repayment Made		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstandin	g		
3	Lender Name		Date Repayment Made		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	g		
4	Lender Name		Date Repayment Made		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstandin	g		
5	Lender Name		Date Repayment Made		

Street Address					
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	9		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sumr	nary of Disbursemen	ts," line 3(d))		

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format)

STATE OF ARIZONA COMMITTEE **CAMPAIGN FINANCE REPORT**

COMMITTEE ID NUMBER

ACCRUED INTEREST ON LOANS RECEIVED: SCHEDULE B(3)(e)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Lender Information Amount of Interest Accrued

1	Lender Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	g		
2	Lender Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	9		
3	Lender Name		Date Interest Accrued		
	Street Address				

1	Cit.	State	ZIP		
	City	Siale	ZIP		
	Original Amount Borrowed	Amount Still Outstanding	9		
4	Lender Name		Date Interest Accrued		
	Street Address				
	City	State	ZIP		
	Original Amount Borrowed	Amount Still Outstanding			
	с С		-		
5	Lender Name		Date Interest Accrued		
5					
	Street Address				
	0.1	State	ZIP		
	City	State	ZIP		
			l		
	Original Amount Borrowed	Amount Still Outstanding	g		
⊢					
	Enter total only if last page of schedule				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	mary of Disbursemen	ts," line 3(e))		

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STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS): SCHEDULE B(4) Cumulative

Amount this Reporting Period Cumulative Amount this Election Cycle

Recipient Information Amount Rebated / Refunded

1	Name of Original Payor		Date Rebate/Refund Made		
ľ	Street Address				
ľ	City	State	ZIP		

	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment		
2	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		
3	Name of Original Payor	I	Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor		
4	Name of Original Payor	<u> </u>	Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor		
5	Name of Original Payor	1	Date Rebate/Refund Made		
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor		
	Enter total only if last page of schere (transfer the total disbursed this period to	dule o "Summary of Disbursemen	ts," line 4)		

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Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA COMMITTEE CAMPAIGN

FINANCE REPORT

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES: SCHEDULE B(5)(a) Amount Contributed Amount this Reporting Period Cumulative Amount this Election Cycle

Candidate	Committee	Recipient
oundate	0011111111000	rtooipiont

Information Amount Contributed Cumulative

1	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contribution	n Made		
2	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Made		
3	Committee Name				
Ŭ					
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Made		
4	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Made		
5	Committee Name				
	Street Address				

City	State	ZIP		
Committee ID Number	Date In-Kind Contribution	on Made		
Enter total only if last page of schedule (transfer the total disbursed this period to "Sumr	nary of Disbursemen	ts," line 5(a))		

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STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES: SCHEDULE

B(5)(b)

Political Action Committee Recipient Information Amount Contributed Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributio	n Made		
2	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contribution	on Made		
3	Committee Name				
	Street Address				
	City	State	ZIP		

	Committee ID Number	Date In-Kind Contributi	on Made		
4	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Made		
5	Committee Name				
	Street Address				
	City	State	ZIP		
	Committee ID Number	Date In-Kind Contributi	on Made		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summ	nary of Disbursemen	ts," line 5(b))	1	

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Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES: SCHEDULE B(5)(c)

Information Amount Contributed Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Committee Name			
	Street Address			
	City	State	ZIP	
	Committee ID Number	Date In-Kind Contributio	n Made	

Political Party Recipient

2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	on Made			
3	Committee Name					
	Street Address					
	City	State	ZIP			
				-		
	Committee ID Number	Date In-Kind Contributi	on Made			
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	on Made			
F	Committee Name					
5						
	Street Address					
	City	State	ZIP			
	Committee ID Number Date In-Kind Contribution Made					
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	nary of Dieburcomer	ts " line $5(c)$			
		nary or Disputsemen				

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Arizona Secretary of State Revision 12/29/21 (fillable format)



Amount Contributed Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributio	n Made		
2	2 Partnership Name Street Address				
	City	State	ZIP		
	Corporation Commission File Number Date In-Kind Contribution Made				
3	3 Partnership Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Made		
4	Partnership Name	I			
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number Date In-Kind Contribution Made				
5	5 Partnership Name				

Partnership Recipient Information

	Street Address					
	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Made					
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sumr					

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STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs: SCHEDULE B(5)(e)

Information Amount Contributed Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributio	n Made		
2	2 Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
1					
	Corporation Commission File Number Date In-Kind Contribution Made				
3	Corporation/LLC Name				

Corporation / LLC Recipient

	Street Address				
	Street Audress				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	ion Made		
4	Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	ion Made		
-	Operation # LO Name				
5	Corporation/LLC Name				
	Street Address				
	City	State	ZIP		
1	Comparing Comprising File Number	Date In-Kind Contribution Made			
	Corporation Commission File Number				
	Enter total only if last page of schedule			4	
1	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	mary of Disbursemer	nts," line 5(e))		

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Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA COMMITTEE COMMITTEE

CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

	Labor Organization	n Recipient	IN-KIND Information Amount C Cumulative	An An	TO LABOR ORGAN nount this Reporting mulative Amount this	Period	JLE B(5)(f)
Organization Name							
Address							
		State	ZIP				

Labor

Street

City

1

	Corporation Commission File Number Date In-Kind Contribution Made				
2	Labor Organization Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Made		
3	3 Labor Organization Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Made		
4	4 Labor Organization Name				
	Street Address				
	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contributi	on Made		
5	Labor Organization Name				
	Street Address				
	City State ZIP				
	Corporation Commission File Number	Date In-Kind Contributi	on Made		
-	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	nary of Disbursemer	ts," line 5(f))		

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Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONA COMMITTEE CAMPAIGN

FINANCE REPORT

COMMITTEE ID NUMBER

INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

1	Recipient Name		Mode of Advertising (TV, mail, etc)	□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (inc	luding % opposed)		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought		
2	Recipient Name Street Address		Mode of Advertising (TV, mail, etc)	□ Cash □ Credit	
	City	State	ZIP		
	Candidate(s) Supported (including % supported)	Candidate(s) Supported (including % supported) Candidate(s) Opposed (inc			
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought		
3	Recipient Name		Mode of Advertising (TV, mail, etc)	□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Candidate(s) Supported (including % supported)	Candidate(s) Supported (including % supported) Candidate(s) Opposed (inc			
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought		
4	Recipient Name		Mode of Advertising (TV, mail, etc)	□ Cash □ Credit	
	Street Address				

Expenditure Recipient Information Expenditure Amount

	City	State	ZIP			
Ī	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)				
Ī	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su					

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STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

BALLOT MEASURE EXPENDITURES MADE: SCHEDULE B(7)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Expenditure Recipient Information Expenditure Amount

1	Recipient Name		Mode of Advertising (TV, mail, etc)	□ Cash □ Credit	
	Street Address				
	City State		ZIP		
	Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Oppose		! (including % opposed)		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year			
2	2 Recipient Name Street Address		Mode of Advertising (TV, mail, etc)	□ Cash □ Credit	
	City	State	ZIP		
	Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Oppose		I (including % opposed)		
		Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			

3	Recipient Name		Mode of Advertising (TV, mail, etc)		
3			modo of / lator loning (11, mail, oto)	□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (including % opposed)		
	Data of First Dublication, Disalau Daliusa, an Decadarat	Election Month/Year			
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/ rear			
4	Recipient Name		Mode of Advertising (TV, mail, etc)	□ Cash	
				□ Credit	
	Street Address				
	City	State	ZIP		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (including % opposed)		
			- (
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year			
	Enter total only if last page of schedule				
	(transfer the total disbursed this period to "Su	mmary of Disbursemen	ts," line 7)		

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ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

RECALL EXPENDITURES MADE: SCHEDULE B(8)

Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Expenditure Recipient Information Expenditure Amount

1	Recipient Name	Mode of Advertising (TV, mail, etc)	□ Cash □ Credit	
	Street Address			



	City	State	ZIP		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held			
2	Recipient Name		Mode of Advertising (TV, mail, etc)	□ Cash	
				□ Credit	
	Street Address				
	City	State	ZIP		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held			
3	Recipient Name		Mode of Advertising (TV, mail, etc)	□ Cash	
				□ Credit	
	Street Address				
	City	State	ZIP		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	called		
		g			
	Date of First Publication, Display, Delivery, or Broadcast	Office Held			
	Date of First Fubilitation, Display, Denvery, of Diodaddat				
F	Recipient Name		Mode of Advertising (TV, mail, etc)		
4				□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	City	State	LIF		
	Supporting or Opposing log	Condidate South to L. D.	applied		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ระสิทธิน		
		0.5			
	Date of First Publication, Display, Delivery, or Broadcast	Office Held			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disbursemen	ts," line 8)		

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STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY): SCHEDULE B(9)

Amount this Reporting Period Cumulative Amount this Election Cycle

Benefitted Candidate Amount Cumulative

1	Candidate Name		Date Benefit Provided		
	Street Address				
	City	State	ZIP		
	Type of Benefit Provided				
	Notes:				
2	Candidate Name		Date Benefit Provided		
	Street Address				
	City	State	ZIP		
	Type of Benefit Provided				
	Notes:				
3	Candidate Name		Date Benefit Provided		
	Street Address				
	City	State	ZIP		
	Type of Benefit Provided				
	Notes:				

4	Candidate Name		Date Benefit Provided		
	Street Address				
	City	State	ZIP		
	Type of Benefit Provided				
	Notes:				
	Enter total only if last page of schedule				
	(transfer the total disbursed this period to "Su	mmary of Disbursemen	ts," line 9)		

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format) STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSEPAYMENTS MADE: SCHEDULE B(10) Payment Amount Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Recipient Committee Information

1	Committee Name		Payment Date	□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)		
2	Committee Name		Payment Date	□ Cash	
				□ Credit	
	Street Address				
	Street Address City	State	ZIP		

3	Committee Name		Payment Date	□ Cash	
				□ Credit	
	Street Address				
			[
	City	State	ZIP		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)		
4	Committee Name		Payment Date	□ Cash	
				□ Credit	
	Street Address				
	City	State	ZIP		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	е (паррісаріе)		
5	Committee Name		Payment Date	□ Cash	
				□ Credit	
	Street Address				
			[
	City	State	ZIP		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)		
	Enter total only if last page of schedule			<u> </u>	
	(transfer the total disbursed this period to "Sum	mary of Disbursemen	ts," line 10)		

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CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER



REIMBURSEMENTS MADE: SCHEDULE B(11)

Reimbursement Amount Cumulative Amount this Reporting Period Cumulative Amount this Election Cycle

Recipient Information

1	Name		
1		□ Cash □ Credit	
		L Orean	

	Street Address				
	City	State	ZIP		
	Services or Goods Reimbursed		Reimbursement Date		
2	Name			□ Cash □ Credit	
	Street Address				
			r		
	City	State	ZIP		
	Services or Goods Reimbursed		Reimbursement Date		
	Name				
3	Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Services or Goods Reimbursed		Reimbursement Date		
4	Name		<u> </u>	□ Cash	
				□ Credit	
	Street Address				
	City	State	ZIP		
	Services or Goods Reimbursed		Reimbursement Date		
5	Name			□ Cash □ Credit	
	Street Address				
			l		
	City	State	ZIP		
	Services or Goods Reimbursed		Reimbursement Date		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	mary of Disbursemen	ts," line 11)		
1					

Arizona Secretary of State Revision 12/29/21 (fillable format) STATE OF ARIZONACAMPAIGN FINANCE REPORT COMMITTEE COMMITTEE ID NUMBER

> OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE: SCHEDULE B(12)

Amount this Reporting Period Cumulative Amount this Election Cycle

Debt Information Amount Cumulative

1	Name				
	Street Address				
	City	State	ZIP		
	Type of Account Payable or Debt Owed		Date that Debt Accrued		
2	Name				
	Street Address				
	City	State	ZIP		
	Type of Account Payable or Debt Owed		Date that Debt Accrued		
3	Name				
	Street Address				
	City	State	ZIP		
	Type of Account Payable or Debt Owed		Date that Debt Accrued		
4	Name				
	Street Address				
	City	State	ZIP		
	Type of Account Payable or Debt Owed		Date that Debt Accrued		

	(
5	Name				
•					
	Street Address				
	City	State	ZIP		
	Type of Account Payable or Debt Owed		Date that Debt Accrued		
	Entertated entry if least name of a shadula				
	Enter total only if last page of schedule (transfer the total received this period to "Summ	ary of Disbursements	a" line 12)		
		ary of Disbursements	s, mic (2)		

Schedule B(12), page of

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA

COMMITTEE

CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT: SCHEDULE B(13) Cumulative Amount this Election

Cycle

Cumulative Amount this Reporting Period

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)	

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONACAMPAIGN FINANCE REPORT

COMMITTEE

COMMITTEE ID NUMBER

MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

Amount this Reporting Period Cumulative Amount this Election Cycle

Recipient Information Amount Cumulative

1	Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
2	Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
			Distancement Date			
3	Name			□ Cash □ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type	I	Disbursement Date			
4	Name			□ Cash		
				□ Credit		
	Street Address					
	City	State	ZIP			
	1	1	1	1	1	

	Disbursement Type		Disbursement Date		
5	Name			□ Cash □ Credit	
	Street Address				
	City	State	ZIP		
	Disbursement Type	<u>.</u>	Disbursement Date		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sum	mary of Disbursemen	ts," line 14)		

Schedule B(14), page of _

Arizona Secretary of State Revision 12/29/21 (fillable format)

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT COMMITTEE ID NUMBER

AGGREGATE OF DISBURSEMENTS – \$250 OR LESS: SCHEDULE B(15) Cumulative Amount this Election Cycle

Cumulative Amount this Reporting Period

Cumulative of Disbursements - \$250 or Less (If disbursements of \$250 or less are listed on any of the other disbursement schedules, do not include them on Schedule B(15))	
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 15)	

Schedule B(15), page of _____

Arizona Secretary of State Revision 12/29/21 (fillable format)



STATE OF ARIZONA **COMMITTEE CAMPAIGN** FINANCE REPORT

COMMITTEE ID NUMBER 2020-02

COMMITTEE INFORMATION (required):

COMMIT	TEE INFORMATION (require	ed):		TAM 47 2022 02 4208
	Committee Information:	Committee Name:	Juan Ojeda City Council 2022	JHN1 (2023 02:43m
CANDID	DATE INFORMATION (only if filing as a candidate committee):			

1	Office Sought:	County Office:	Special District Office:
		City/Town Office:	School Board District:

Cumulative Report:

🗵 Check here if this is the candidate committees 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
	2020 4th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 202
	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 202
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
1	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
	2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
1	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination
	*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S.	§§§ 1-243(A), 1-301 and 1-303.

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
 (a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period) 	136.67	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	0	
c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	0	
d) = Balance at close of reporting period	136.67	

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

Received by the Goodyear **City Clerk's Office** January 8, 2024 at 8:48 a.m.



STATE OF ARIZONA **COMMITTEE CAMPAIGN FINANCE REPORT**

COMMITTEE INFORMATION (required):

	Committee Information:	Committee Name:	
CAN	DIDATE INFORMATION (only if filing	as a candidate committee):	
	Office Sought:	County Office:	Special District Office:
	~	City/Town 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, 2023 to March 31, 2023	April 1, 2023 to April 15, 2023
2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 15, 2023
2023 Quarter 2 Report: April 1, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
2023 Quarter 3 Report: July 1, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
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 August Pre-Primary Election Report: July 1, 2024 to July 20, 2024	July 21, 2024 to July 27, 2024
2024 August Post-Primary Election (Q3) Report: July 21, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
2024 Quarter 3 Report: July 1, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
2024 November Pre-General Election Report: October 1, 2024 to October 19, 2024	October 20, 2024 to October 26, 2024
2024 November Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024	January 1, 2025 to January 15, 2025
Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination
*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§§ 1-24	3(A), 1-301 and 1-303.

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (<i>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 must following page need to be filed.	be completed, but only this c	over 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. Arizona Secretary of State Revision 9/28/23; League Update 11/15/23 (fillable format)



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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):

/		Cash	
	Receipts	Cash	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		
3. 10.	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)		
13.	Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)		



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))		
.	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))		
	Rebates and Refunds Made (Non-Contributions)		
j.	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))		
i.	Independent Expenditures Made		
	Ballot Measure Expenditures Made		
	Recall Expenditures Made		
).	Support Provided to Party Nominees (Political Parties Only)		
0.	Joint Fundraising / Shared Expense Payments Made		
1.	Reimbursements Made		
2.	Outstanding Accounts Payable / Debts Owed by Committee		
3.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
4.	Miscellaneous Disbursements		
5.	Aggregate of Disbursements - \$250 or Less		
6.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)		



STATE OF ARIZONA **COMMITTEE CAMPAIGN FINANCE REPORT**

/	Indiv	vidual Contributor Inforn	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			
	Street Address	Street Address				
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address		I			
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer		_		
	Enter total only if last page of	schedule				
	(transfer the total received this pe	eriod to "Summary of Recei	pts," 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 ____



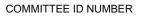


MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

/	Inc	dividual Contributor Inform	Date Contribution Received	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address		Date Contribution Received			
1	City	State	ZIP			
		State	∠ir			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page (transfer the total received this	of schedule				

Schedule A(1)(c), page_____ of _____



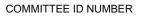


MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

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	I				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address	ess				
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	1				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	l ad			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Receipts " !	ine 1(d))			
		mary of Receipts, 1				

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





MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/		on 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			
	Querrie IDMunica					
	Committee ID Number	Date Contribution Re	ceivea			
	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			
		Date Contribution Re	oorrou			

Schedule A(1)(e), page____ of ____



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

	Politic	al Party Contributor Infor	mation	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 Re	eceived			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Committee Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Committee Name					
	Street Address					
5	City	State	State ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Enter total only if last nage o	f schedule eriod to "Summary of Receipt				



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnersl	nip Contributor Infor	Amount Receive	d Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution F	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address					
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	nedule				



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(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	1	City	State	ZIP			
	ľ	Corporation Commission File Number	Date Contribution Receive	d			
		Corporation/LLC Name					
	·	Street Address					
2	2	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Corporation/LLC Name					
		Street Address					
3	3	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Corporation/LLC Name					
		Street Address					
4	1	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Corporation/LLC Name					
	·	Street Address					
5	5	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
\mid		Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts," I	ine 1(h))	1		
							/

COMMITTEE ID NUMBER



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organi	zation Contributor Info	ormation	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 Rec	eived			
	Labor Organization Name					
Street Address						
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rec	eived			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rec	eived			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rec	eived			
	Labor Organization Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rec	eived			
	Enter total only if last page of sch (transfer the total received this period	edule to "Summary of Receipts	," line 1(i))			



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

		Candidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	I	Date Contribution Received			
	Street Address		I	_		
4	City	State	ZIP	_		
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	L	Employer				

Schedule A(1)(j), page____ of ____



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

		Contributor Informatio	n	Amount Refunded	Cumulative Amount this	Cumulative Amount th
	Name	Date Contribution Refunded		Reporting Period	Election Cyc	
-	Street Address					
	Street Address					
	City	State	ZIP			
I	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		<u> </u>			
-	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution	_		
4	Enter total only if last page o	f a sha duda				

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? (F	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? (F	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? (F				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," l	ine 2(a))			

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

SCHEDULE A(2)(a)



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

/	Lender	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		Date Forgiveness Received			
	Street Address			_		
2	City	State	ZIP	_		
	Original Amount of Loan			_		
		Amount Still Outstanding	1			
	Lender Name	Date Forgiveness Received				
	Street Address					
3	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		_		
	Lender Name		Date Forgiveness Received			
	Street Address		_			
4	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstanding		-		
	Lender Name		Date Forgiveness Received			
	Street Address			_		
5				_		
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts "	line 2(b))			

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrowe	r Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
ľ	Original Amount Borrowed	Amount Still Outstanding	I			
	Borrower Name		Date Repayment Received			
	Street Address			_		
2	City	State	ZIP	-		
ľ	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Repayment Received			
-	Street Address		_			
3	City	State	ZIP	_		
F	Original Amount Borrowed	Amount Still Outstanding		_		
	Sorrower Name		Date Repayment Received			
	Street Address		_			
ŀ	City	State	ZIP	_		
ľ	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address			-		
; -	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Enter total only if last page of schedule (transfer the total received this period to "Sun					

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



INTEREST ACCRUED ON LOANS MADE:

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

SCHEDULE A(2)(d)

/	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulati Amount t Election C
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding					
	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	Borrower Name				
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sum					

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



	_
COMMITTEE ID NUMBER	

STATE OF ARIZONA

SCHEDULE A(3)

REBATES AND REFUNDS RECEIVED:	

Payor Name Date Relation/Refund Reconved Street Address Street Address 1 City State ZP Original Purchases Amount Reason for Refund/Relatals Image: Comparison of Refund/Relatals 2 Payor Name Date Relate/Refund Reconved 3 Street Address City 2 City State ZP 4 Original Purchases Amount Reason for Refund/Relatals 2 City State ZP 4 Payor Name Date Relate/Refund Reconved State 3 State ZP City State 4 Payor Name Date Relate/Refund Reconved State 5 City State ZP State 6 City State ZP State 7 City State ZP State 6 City State ZP State 7 City State ZP State 6 City State ZP State 7 City	ount this	Cumulat Amount t Election C	Cumulative Amount this Reporting Period	Amount Rebated or Refunded		nformation	Payor I		
1 Cay State ZIP Original Purchases Amount Resears for Refund/Recaived 2 Payor Name Date Recaise/Refund Received 3 Stotel Addreses ZIP 0 riginal Purchase Amount Resears for Refund/Received 4 Resears for Refund/Received Date Received 5 Stotel Addrese ZIP 7 State ZIP 0 State ZIP 0 State Addrese Date Received 3 State Addrese Date Received 4 Resears for Refund/Received State 5 State Addrese ZIP 6 State Addrese ZIP 7 State Addrese ZIP 7 State ZIP 7 State Addrese ZIP 7 State Addrese ZIP 7 Resears for Refund/Received State 8 State Addrese ZIP 6 State Addrese ZIP 7 Resears for Refund/Received State 8 State Addrese ZIP 6 Resears for Refund/Received State					Date Rebate/Refund Received		lame	Payor Name	
Image: Street Address Street Address 2 Fryor Name 2 City 3 City 4 Reason for RefundRetaute 0 City 3 City 3 City 3 City 4 Reason for RefundRetaute 5 City 6 City 5 City				-		Address			
Payor Name Date Rebate/Refund Received Street Address City State Proyor Name Date Rebate/Refund Received Proyor Name Date Rebate/Refund Received Proyor Name Date Rebate/Refund Received Street Address Date Rebate/Refund Received City Bate Drignal Purchase Amount Reason for Refund/Rebate Proyor Name Date Rebate/Refund Received Street Address Date Rebate/Refund Received Proyor Name Date Rebate/Refund Received Street Address City Proyor Name Date Rebate/Refund Received Street Address City Payor Name Date Rebate/Refund Received Street Address City Street Address Date Rebate/Refund Received Street Address City				-	ZIP	State		City	1
2 Street Address 2 Gty State City State 2 Original Purchase Amount Reason for Refund/Rebate 3 Payor Name Date Rebate/Refund Received 3 Street Address City 4 City State 7 Payor Name Date Rebate/Refund Received 8 City State 7 City State 8 City State 9 State ZiP 1 Original Purchase Amount Reason for Refund/Rebate 4 Report Name Date Rebate/Refund Received 5 City State ZiP 1 Original Purchase Amount Reason for Refund/Rebate 6 State ZiP 1 Original Purchase Amount Reason for Refund/Rebate 1 Original Purchase Amount Reason for Refund/Rebate 1 State ZiP 1 Payor Name Date Rebate/Refund Received 5 City State ZiP				-	9	Reason for Refund/Rebate	Purchase Amount	Original Pur	
2 Cty State 2 P Original Purchase Amount Reason for RefundRebate 3 Payor Name 3 Oty 3 Oty 0 riginal Purchase Amount Reason for RefundRebate 4 Payor Name 0 riginal Purchase Amount Reason for RefundRebate 9 Payor Name 0 riginal Purchase Amount Reason for RefundRebate 1 Payor Name 0 riginal Purchase Amount Reason for RefundRebate 1 Original Purchase Amount 1 Payor Name 1 Date Rebate/Refund Received 2 Street Address 2 Cty 2 Street Address 2 Cty 1 Payor Name 1 Date Rebate/Refund Received 2 Street Address 2 Cty 2 Street Address 5 Cty 2 Street Address					Date Rebate/Refund Received		lame	Payor Name	┢
Image: State in the second for Refund Rebate Original Purchase Amount Reason for Refund Rebate/Refund Received Street Address Image: State in the second for Refund Rebate/Refund Received Street Address Image: State in the second for Refund Rebate/Refund Received Payor Name Date Rebate/Refund Received Payor Name Date Rebate/Refund Received Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Rebate Image: Street Address Image: State in the second for Refund/Received Image: Street Address Image: State in the second for Refund/Received Image: Street Address Image: State in the second for Refund/Received Image: Street Address Image: State in the second for Refund/Received Image: Street Address Image: State in the second for Refund/Received Image: Street Address Image: State				-			ddress	Street Addre	
Image: state of the state is a s				-	ZIP	State		City	2
3 Street Address CRy State Original Purchase Amount Reason for Refund/Rebate 4 Payor Name Street Address ZIP CRy State ZIP Original Purchase Amount Date Rebate/Refund Received Street Address CRy State CRy State Original Purchase Amount Reason for Refund/Rebate Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received Street Address City				-	e	Reason for Refund/Rebate	Purchase Amount	Original Pur	
3 City State ZIP Original Purchase Amount Reason for Refund/Rebate Image: Constraint of the constrai					Date Rebate/Refund Received		lame	Payor Name	┢
City State ZP Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received Street Address				-			Street Address		
Image: Payor Name Date Rebate/Refund Received Street Address Image: Payor Name Image: City State ZIP Original Purchase Amount Reason for Refund/Rebate Date Rebate/Refund Received Street Address Street Address City State Street Address City				-	ZIP	State		City	3
A Street Address City State Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received Street Address City Street Address City Street Address City				-	e	Reason for Refund/Rebate	Purchase Amount	Original Pur	
4 City State ZIP Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received 5 Street Address City State					Date Rebate/Refund Received		lame	Payor Name	╞
City State ZIP Original Purchase Amount Reason for Refund/Rebate Payor Name Date Rebate/Refund Received Street Address Street Address City State ZIP				-			Address	Street Addre	
Payor Name Date Rebate/Refund Received Street Address 5 City State					ZIP	State		City	4
5 Street Address City State ZIP				-	e	Reason for Refund/Rebate	Purchase Amount	Original Pur	
5 City State ZIP					Date Rebate/Refund Received		lame	Payor Name	┢
				-			Street Address		
Original Durphage Amount Research for Refund/Relate				-	ZIP	State		City	5
Original Fulcitase Amount Reason for Relund/Rebate				-	e	Reason for Refund/Rebate	Purchase Amount	Original Pur	
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 3)					ing 2)	monu of Deer 1 is 11	total only if last page of schedule	Enter to	╞
Itransfer the total received this period to "Summary of Receipts," line 3)	/				ine 3)	mary of Receipts," I	rer the total received this period to "Sum	(transfer	L



SCHEDULE A(4)

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

Schedule A(4), page____ of ____





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

SCHEDULE A(5)(a)

/	/ Ii	ndividual Contributor Informat	ion	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			-		
4	City	State	ZIP			
	Occupation	Employer		-		
			Date In Kind Contribution Received			
	Name		Date In-Kind Contribution Received	-		
5	Street Address			4		
J	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page (transfer the total received thi	e of schedule s period to "Summary of Receipts	." line 5(a))			

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

Schedule A(5), page____ of ____



IN-KIND CONTRIBUTIONS RECEIVED FROM 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 ____

COMMITTEE ID NUMBER



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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

SCHEDULE A(5)(c)

				I		
	Candidate	e Committee Contributor Info	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Received			
	Committee Name					
	Street Address					
2	2 City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Received			
	Committee Name					
	Street Address					
3	3 City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Received			
	Committee Name					
	Street Address					
4	4 City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Received			
	Committee Name					
	Street Address					
5	5 City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Received			
	Enter total only if last page of (transfer the total received this p	of schedule period to "Summarv of Receipts."	" line 5(d))			
<u> </u>		, z	- 11		1	





IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

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

Schedule A(5)(d), page____ of ____





IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/	Political Action	Committee Contributor I	nformation	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 Contributio	n Received			
	Committee Name					
-	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Received			
	Committee Name					
-	Street Address					
3	City	State	ZIP			
-	Committee ID Number	Date In-Kind Contribution	on Received			
	Committee Name					
-	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	on Received			
┥	Committee Name					
-	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Received			

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Politica	al Party Contributor Info	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl	
	Committee Name						
ĺ	Street Address						
1	City	State	ZIP				
	Committee ID Number						
	Committee Name						
	Street Address						
2	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	tribution Received				
	Committee Name						
	Street Address						
3	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	tribution Received				
	Committee Name						
	Street Address						
4	City	State	ZIP				
ľ	Committee ID Number	Date In-Kind Cont	tribution Received				
	Committee Name	I					
	Street Address						
5	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	tribution Received				
	Enter total only if last page of (transfer the total received this pe	schedule ariod to "Summary of Recei	pts," line 5(f))				



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersl	nip Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Received			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Received			
	Enter total only if last page of sch (transfer the total received this period	ledule				





IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	/						
_		Corporation / LLC C	ontributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Corporation/LLC Name					
	ľ	Street Address					
1		City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution I	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					
	Ī	Street Address					
4		City	State	ZIP	-		
		Corporation Commission File Number	Date In-Kind Contribution	Received			
		Corporation/LLC Name					
		Street Address					
5	; -	City	State	ZIP	-		
		Corporation Commission File Number	Date In-Kind Contribution	Received	1		
	 (Enter total only if last page of schedule (transfer the total received this period to "Sumi	nary of Receipts," I	ine 5(h))	1		
$\overline{\}$				hedule A(5)(h), page			

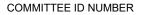


IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organ	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Enter total only if last page of sch (transfer the total received this period	nedule				

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





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

SCHEDULE A(5)(j)

	Candidate	e 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		1		-		
•	City	State	ZIP	_		
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address		- ·	-		
4	City	State	ZIP	-		
	Asset or Property Contributed			-		
	Name		Date In-Kind Contribution Received			
	Street Address	-				
5	City	State	ZIP	-		
	Asset or Property Contributed	-				
	Enter total only if last page of schedule (transfer the total received this period to "Sum					





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

SCHEDULE A(6)

	Source	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Donation Received			,	
	Street Address					
1	City	State	ZIP			
	Type of Item Donated		·			
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP	_		
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
3	City	State	ZIP			
	Type of Item Donated					
	Name	Date In-Kind Donation Received				
	Street Address					
4	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address		_			
5	City	State	ZIP			
	Type of Item Donated	1				
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,"	' line 6)	-1		



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

		litor Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit				
	Name					
	Street Address			_		
2	City	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		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		Date of Extension of Credit			
	Enter total only if last page of sched (transfer the total received this period to	ule	-4- 2 (-))			
	(transter the total received this period to '	Summary of Receip	ots," line 7(a))			

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PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

/	Credito	r 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					
	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	mmary of Receipts "	line 7(b))			
		ninary of Receipts,				



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor C	committee Informa	tion	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name		Payment Date			
ľ	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
-	Enter total only if last page of sche (transfer the total received this period to	dule				

Schedule A(8), page____ of ____



COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

		Payor Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address	Street Address				
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased	I	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 (transfer the total received this pe	schedule				

Schedule A(9), page____ of ____





OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/	/		mation		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					
	ĺ	Street Address					
2	2	City	State	ZIP			
		Type of Account Receivable or Debt Owed	I	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					
2	4	City	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_		Name					
		Street Address					
Ę	5	City	State	ZIP			
	ľ	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)			
		\searrow	Sc	chedule A(10), page o	of		

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COMMITTEE ID NUMBER

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 this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
ĺ	Receipt Type		Receipt Date	-		
	Name		I			
	Street Address			-		
2	City	State	ZIP	_		
	Receipt Type		Receipt Date	-		
	Name					
:	Street Address		_			
3	City	State	ZIP	_		
	Receipt Type		Receipt Date	_		
	Name					
	Street Address		-			
4	City	State	ZIP	_		
	Receipt Type		Receipt Date	_		
_	Name					
	Street Address			-		
5	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)

/	Rec	ipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursement Date				
	Street Address			_		
1	City	State	ZIP			
				□ Cash		
	Type of Operating Expense Paid		? (PACs and Political Parties Only)	□ Credit		
	Name	Disbursement Date				
	Street Address			_		
2	City	State	ZIP			
				□ Cash □ Credit		
	Type of Operating Expense Paid					
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP			
				□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose?	? (PACs and Political Parties Only)	□ Credit		
	Name	Disbursement Date				
				_		
	Street Address					
4	City	State	ZIP			
				□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose?	PACs and Political Parties Only)	□ Credit		
	Name	Disbursement Date				
	Street Address					
5						
	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	Credit		
	. The er obergania Exhering Land	pooo.	n-Electoral Purpose? (PACs and Political Parties Only)			

Schedule B(1), page____ of ____





MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	1	Committee 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			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
0						
3	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made					
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
_	Enter total only if last page of a	schedule				
	(transfer the total disbursed this pe	eriod to "Summary of Disburser	ments," line 2(a))			

Schedule B(2)(a), page____ of ____





MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/		ction Committee Recipient Ir	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made	•	□ Cash □ 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 Date Contribution Made			Credit		
	Committee Name					
4	Street Address	o	7/2			
	City	State	ZIP	□ Cash □ Credit		
	Committee Name	Committee ID Number Date Contribution Made				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made	9	□ Cash □ Credit		

Schedule B(2)(b), page____ of ____



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Politie	cal Party Recipient Infor	nation	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 Made					
	Committee Name					
-	Street Address					
2	City	State	ZIP			
,	Committee ID Number	Date Contribution N	Nade	□ Cash □ Credit	□ Cash □ Credit	
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
,	Committee ID Number	Date Contribution N	Date Contribution Made			
1	Committee Name					
	Street Address					
	City	State	ZIP	□ Cash		
1	Committee ID Number	Date Contribution	/lade			
ľ	Committee Name	I				
	Street Address					
,	City	State	ZIP	□ Cash		
,	Committee ID Number	Date Contribution N	/lade			
╈	Enter total only if last page of transfer the total disbursed this p	f schedule	irsements " line 2(c))	I		



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	ship Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Partnership Name					
	Street Address					
2	City	State	ZIP			
-	Corporation Commission File Number	Date Contribution	n Made	□ Cash □ Credit	□ Cash □ Credit	
	Partnership Name					
3 –	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Date Contribution Made			
	Partnership Name					
	Street Address					
ŀ	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	n Made			
┥	Partnership Name	I				
	Street Address					
	City	State	ZIP	□ Cash		
ľ	Corporation Commission File Number	Date Contribution	n Made			
	Enter total only if last page of sch (transfer the total disbursed this perio	l nedule	ursemente "line O(-l\)	I		





MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	n / LLC Recipient In	formation	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	Made	□ Cash □ Credit			
	Corporation/LLC Name						
	Street Address	eet Address					
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit	□ Cash □ Credit		
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP	□ Cash			
	Corporation Commission File Number	ation Commission File Number Date Contribution Made					
	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit			
	Corporation/LLC Name	<u> </u>					
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit			
_	Enter total only if last page of scl (transfer the total disbursed this perio	nedule					

Schedule B(2)(e), page____ of ____



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	nization Recipient Info	rmation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Labor Organization Name						
	Street Address						
1	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Mad	le				
	Labor Organization Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Ma	de	□ Cash □ Credit	□ Cash □ Credit		
	Labor Organization Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit			
	Labor Organization Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Mag	de	□ Cash □ Credit			
	Labor Organization Name	I					
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Mag	de	□ Cash □ Credit			
	Enter total only if last page of sch (transfer the total disbursed this perio	nedule					

Schedule B(2)(f), page____ of ____



COMMITTEE ID NUMBER

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

		Contributor Informatio	on	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cycl
	Committee Name		Date Refund Received			
1	Street Address		I			
	City	State	ZIP	_		
	Committee ID Number	I	Date of Original Contribution	-		
	Committee Name		Date Refund Received			
	Street Address			_		
2	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address			_		
3	City	State	ZIP	_		
	Committee ID Number		Date of Original Contribution	_		
	Committee Name	Committee Name				
	Street Address			_		
1	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 p					

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



SCHEDULE B(3)(a)

LOANS MADE:

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

Schedule B(3)(a), page____of



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

/					Cumulative	Cumulative
	Guara	ntor Information		Amount Guaranteed	Amount this Reporting Period	Amount thi Election Cyc
	Guarantor Name					
·	Street Address			_		
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed		_		
_	Guarantor Name					
	Street Address			_		
				_		
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
Ī	Street Address	-				
3	City	State	ZIP	_		
ľ	Borrower Name	Date Loan Guaranteed		_		
	Guarantor Name					
	Street Address			_		
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed		_		
	Guarantor Name					
	Street Address			-		
5	City	State	ZIP	_		
	Borrower Name	Date Loan Guaranteed		_		

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



FORGIVENESS ON LOANS MADE:

SCHED	JLE	B(3)	(c)

/	Во	rrower Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cycl
	Borrower Name		Date Forgiveness Made			
	Street Address			_		
1	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstand	ling	_		
	Borrower Name		Date Forgiveness Made			
	Street Address			_		
2	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstand	ling	_		
┥	Borrower Name		Date Forgiveness Made			
	Street Address			_		
3	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstand	ding	_		
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstand	ding	_		
	Borrower Name		Date Forgiveness Made			
	Street Address			_		
5	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstand	ling	_		

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



REPAYMENT ON LOANS RECEIVED:

		Lender Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name		Date Repayment Made			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name		Date Repayment Made			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Enter total only if last page of s (transfer the total disbursed this pe					

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

SCHEDULE B(3)(d)



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/	Le	ender Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Lender Name		Date Interest Accrued			
-	Street Address					
1	City	State	ZIP			
-	Original Amount Borrowed	Amount Still Outstandi	ng	_		
	Lender Name		Date Interest Accrued			
-	Street Address					
2	City	State	ZIP			
-	Original Amount Borrowed	Amount Still Outstandi	ng			
	Lender Name		Date Interest Accrued			
			Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandi	ng			
	Lender Name		Date Interest Accrued			
	Street Address			_		
1	City	State	ZIP	_		
-	Original Amount Borrowed	Amount Still Outstandi	ng			
	Lender Name		Date Interest Accrued			
-	Street Address			_		
5	City	State	ZIP	_		
	Driginal Amount Borrowed Amount Still Outstanding			_		

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/		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					
1	City	State	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address			_		
2	City	State	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
1	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
3	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					
4	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					
			ZIP			
5	City	State				

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)

Constitucional Reporting Pariod Election Cycle Constitución Name Sinet Adotsos Sinet Adotsos Sinet Adotsos Sinet Adotsos 1 Cirr Date in Kind Contribution Mode Sinet Adotsos Sinet Adotsos Sinet Adotsos 2 Committee D Number Date in Kind Contribution Mode Sinet Adotsos Sinet Adotsos Sinet Adotsos 2 Committee D Number Date in Kind Contribution Mode Sinet Adotsos Sinet Adotsos Sinet Adotsos 2 Committee D Number Date in Kind Contribution Mode Sinet Adotsos Sinet Adotsos Sinet Adotsos 3 Committee D Number Date in Kind Contribution Mode Sinet Adotsos Sinet Adotsos Sinet Adotsos 3 Cirr Sinet Adotsos Sinet Adotsos Sinet Adotsos Sinet Adotsos 4 Cirr Sinet Adotsos Sinet Adotsos Sinet Adotsos Sinet Adotsos 5 Committee Toman Date in Adotsos Sinet Adotsos Sinet Adotsos Sinet Adotsos 5 Committee Toman Date in Adotsos Sinet Adotsos Sinet Adotsos Sinet Adotsos 6 Committee Toman Date in Adotsos Sinet Adotsos Sinet Adotsos Sinet Adotsos 5 Cirr S	Candidate Committee Recipient Information Amount this Contributed Amount this Reporting Period Amount this Election Cycle Committee Name Image: State						
Sinef. Address 1 Chy Sale 2^{p} 2 Convertiee 10 Aurobee Date In-Kine Constitution Markee 3 Convertiee 10 Aurobee Date In-Kine Constitution Markee 4 Convertiee 10 Aurobee Date In-Kine Constitution Markee 4 Convertiee 10 Aurobee Date In-Kine Constitution Markee 5 Convertiee 10 Aurobee Date In-Kine Constitution Markee 5 Convertiee 10 Aurobee Date In-Kine Constitution Markee 5 Convertiee 10 Aurobee Date In-Kine Constitution Markee 6 Convertiee 10 Aurobee Date In-Kine Constitution Markee 6 Convertiee 10 Aurobee Date In-Kine Constitution Markee 6 Convertiee 10 Aurobee Date In-Kine Constitution Markee 7 State ZP </th <th>Brent Address ZP Consists ID Number Data Indices Constitution Made Constitute ID Number Data In Kind Constitution Made Constitute ID Number</th> <th>/</th> <th>Candidate Committee</th> <th>e Recipient Inforr</th> <th>nation</th> <th>Amount this</th> <th>Cumulative Amount this Election Cycle</th>	Brent Address ZP Consists ID Number Data Indices Constitution Made Constitute ID Number Data In Kind Constitution Made Constitute ID Number	/	Candidate Committee	e Recipient Inforr	nation	Amount this	Cumulative Amount this Election Cycle
1 Cry State 2^{p} Correntice 1D Number Oale In Kind Contribution Made Image: Contribute Name Image: Contribute Name 2 Contribute Name Table in Kind Contribution Made Image: Contribute Name Image: Contribute Name 2 Contribute Name Table in Kind Contribution Made Table in Kind Contribution Made Image: Contribute Name 2 Contribute Name Table in Kind Contribution Made Table in Kind Contribution Made Image: Contribute Name Image: Contribute Name 3 Contribute Name Table in Kind Contribution Made Table in Kind Contribution Made Image: Contribute Name 4 Contribute ID Number Date in Kind Contribution Made Table in Kind Contribution Made Image: Contribute Name 4 Contribute ID Number Date in Kind Contribution Made Table in Kind Contribution Made Image: Contribute ID Number Image: Contribute ID Number 4 Contribute ID Number Date in Kind Contribution Made Image: Contribute ID Number Image: Contribute ID Number Image: Contribute ID Number 5 Contribute ID Number Date in Kind Contribution Made Image: Contribute ID Number Image: Contribute ID Number Image: Contribute ID Number	Image: Second secon	Committee Name					
O_{1}	Od Line	Street Address					
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City State Zir Committee ID Number Date In-Kind Contribution Made	Committee ID Number Date In-Kind Contribution Made	Street Address					
		5 City		State	ZIP		
	Enter total only if last page of schedule	Committee ID Number		Date In-Kind Contribution	Made		
	Enter total only if last page of schedule						

Schedule B(5)(a), page____ of ____





IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Ac	tion Committee Recipie	nt 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 Cont				
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
1	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
	Street Address					
4						
•	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
_	Enter total only if last page of (transfer the total disbursed this	of schedule				

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Politi	cal Party Recipient Inforn	nation	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 Contrib	ution Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrit	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 Contrib	oution Made			
	Committee Name	I				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	mmittee ID Number Date In-Kind Contribution Made				
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IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	ship Recipient Inforr	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl	
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Partnership Name					
	Street Address					
5	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				



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	/ LLC Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	tribution Made			
	Corporation/LLC Name					
	2000					
s	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	tribution Made			
	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	ntribution Made			
	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	mmission File Number Date In-Kind Contribution Made				
l	Enter total only if last page of sch	ledule				

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IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Orga	nization Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
L	abor Organization Name				Liection Cyc	
S	Street Address					
C	Sity	State	ZIP			
C	Corporation Commission File Number	Date In-Kind Conti	ibution Made			
L	abor Organization Name					
S	Street Address					
C	Dity	State	ZIP			
C	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
L	abor Organization Name					
S	Street Address					
c	City	State	ZIP			
C	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
L	abor Organization Name					
S	Street Address					
C	Dity	State	ZIP			
C	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
L	abor Organization Name					
s	Street Address					
C	Dity	State ZIP				
¢	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
E	Enter total only if last page of sch transfer the total disbursed this perio	nedule				

Schedule B(5)(f), page____ of ____



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

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

Schedule B(6), page____ of ____



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

Expenditure F	Recipient Informati	ion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
cipient Name		Mode of Advertising (TV, mail, etc)			
eet Address					
/	State	ZIP	-		
lot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (including % opposed)	_ □ Cash		
e of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- □ Credit		
cipient Name		Mode of Advertising (TV, mail, etc)			
eet Address			-		
1	State	ZIP	-		
Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Oppo		d (including % opposed)	□ Cash		
te of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
zipient Name		Mode of Advertising (TV, mail, etc)			
eet Address			1		
/	State	ZIP	-		
lot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (including % opposed)	□ Cash		
e of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ □ Credit		
cipient Name		Mode of Advertising (TV, mail, etc)			
eet Address			1		
,	State	ZIP	1		
llot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (including % opposed)	□ Cash		
te of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ □ Credit		
ter total only if last page of schedul	e	ements," line 7)			
	bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast bient Name It Address It Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast It Measure(s) Supported (including % supported) It Measure(s) Supported (including % suppor	pient Name tt Address tt Measure(s) Supported (including % supported) of First Publication, Display, Delivery, or Broadcast tt Address tt Address	tt Address Address ZIP t Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) of First Publication, Display, Delivery, or Broadcast Election Month/Year State ZIP tt Address Xiefe It Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) of First Publication, Display, Delivery, or Broadcast Election Month/Year (Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) of First Publication, Display, Delivery, or Broadcast Election Month/Year State ZIP (Measure(s) Supported (including % supported)) Ballot Measure(s) Opposed (including % opposed) of First Publication, Display, Delivery, or Broadcast Election Month/Year (Measure(s) Supported (including % supported)) Ballot Measure(s) Opposed (including % opposed) of First Publication, Display, Delivery, or Broadcast Election Month/Year cient Name Mode of Advertising (TV, mail, etc) tt Address ZIP tt Address ZIP of First Publication, Display, Delivery, or Broadcast Election Month/Year tt Address ZIP of First Publ	Amount Address Amount Address Amount Address Address Amount Address Address	Expenditure Recipitent Information Expenditure Amount this Reporting Period and Name Mode of Advertising (TV, mal, etc) Reporting Period # Address Sale ZP Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Cash of Piter Publication, Display, Delivery, or Browdowit Elevisor Moreh/Year Cash Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Cash Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Cash Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Cash Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Credit Addresse Sate ZP Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Credit Addresse Sate ZP Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Credit Addresse Sate ZP Chemane(i) Supported (rabulang % supported) Balan Meesoure(c) Caponed (molading % supported) Credit Addresse Credit Credit Credit

Schedule B(7), page____ of ____



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

/	Expenditure	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name	Mode of Advertising (TV, mail, etc)				
	Street Address			_		
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be R		called	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Re		called	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	ast Office Held		_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		-			
3	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	called	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		_			
4	City	State	ZIP	4		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		Credit		
	Enter total only if last page of schedu	e		<u> </u>		
	(transfer the total disbursed this period to "	Summary of Disburser	ments," line 8)			

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SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	/	Benefitt	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Candidate Name		Date Benefit Provided			
	ľ	Street Address					
1	1	City	State	ZIP			
	-	Type of Benefit Provided					
	ŀ	Notes:					
┢		Candidate Name		Date Benefit Provided			
		Street Address					
2	2	City	State	ZIP	-		
	-	Type of Benefit Provided					
	l	Notes:					
┢		Candidate Name		Date Benefit Provided			
	-	Street Address					
3	3	City	State	ZIP			
	ľ	Type of Benefit Provided					
	l	Notes:					
		Candidate Name		Date Benefit Provided			
	ľ	Street Address					
4	4	City	State	ZIP			
	ŀ	Type of Benefit Provided	<u> </u>	<u> </u>	1		
	-	Notes:					
F		Enter total only if last page of schedule (transfer the total disbursed this period to "S	e ummary of Disburser	nents," line 9)	1		
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Schedule B(9), page____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

-		Committee Inform	nation	Payment Amount	Amount this Reporting Period	Amount this Election Cycle
	Committee Name	Payment Date				
1	Street Address		1			
'	City	State	ZIP	□ Cash		
I	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP	□ Cash		
1	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Committee Name	Payment Date				
-	Street Address	I				
3	City	State	ZIP	 □ Cash		
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense		xpense (if applicable)			
	Committee Name	Payment Date				
	Street Address					
4	City	State	ZIP	□ Cash		
1	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)			
	Committee Name	Payment Date				
-	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable		xpense (if applicable)	□ Cash □ Credit		
┥	Enter total only if last page of sched (transfer the total disbursed this period to	ule				

Schedule B(10), page____ of ____



REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Information		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					
3	Street Address	ſ				
3	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	Reimbursement Date	Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
_						

Schedule B(11), page____ of ____





OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

/		Debt Information		Amount	Cumulative Amount this	Cumulative Amount this
	1		Amount	Reporting Period	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		Date that Debt Accrued			
	Enter total only if last page of sch	odulo				
	(transfer the total received this period	to "Summary of Rece	eipts." line 12)			

Schedule B(12), page____ of ____

COMMITTEE ID NUMBER

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	Name				
	Street Address					
1	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date			
	Name		I			
	Street Address					
2	City		ZIP			
	Disbursement Type	Disbursement Date	□ Cash □ Credit			
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
1	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Disbursement Type	<u> </u>	Disbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	I				
	·		-			



AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

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

Schedule B(15), page____ of