City of Goodyear City Clerk's Office Received 4/4/2024 at 11:04 A.M.



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE INFORMATION (required):

| | Committee Information: | Committee Name: | Roberts Councilmember | | |
|-----|----------------------------------|--|-----------------------|---|---|
| CAN | DIDATE INFORMATION (only if fili | ing as a candidate comr | nittee): | | |
| | Office Sought. | □ County Office: ☑ Citv/Town Office | . City Council | Special District Office: School Board District: |) |

Cumulative Report:

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

REPORTING PERIOD (check one):

| | REPORTING PERIOD | REPORT DUE |
|--------------|--|--------------------------------------|
| | 2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023 | February 26, 2023 to March 4, 2023 |
| | 2023 March Post-Election (Q1) Report (Local Only): February 26, 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 |
| \checkmark | 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) | \$ 1,447.17 | | | | |
| (b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period) | \$ 0.00 | \$ 2,000.00 | | | |
| (c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period) | \$ 0.00 | \$ 552.83 | | | |
| (d) = Balance at close of reporting period | \$ 1,447.17 | | | | |
| 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 9/28/23; League Update 11/15/23 (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.

Ryann Roberts

Ryann Roberts Digitally signed by Ryann Roberts Date: 2024.04.04 10:54:13 -07'00'

04/04/2024

Printed Name of Committee Treasurer

Signature of Committee Treasurer

Date



SUMMARY OF RECEIPTS (Schedule A):

| / | | 1 | |
|----|---|------|--------|
| / | 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(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 | | |
| | Outstanding Accounts Receivable / Debts Owed to Committee | | |
| | | | |
| | Miscellaneous Receipts (use cash and/or equity as applicable) | | |
| | Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12) | | |



SUMMARY OF DISBURSEMENTS (Schedule B):

| | Disbursements | Cash | Equity |
|-----|--|------|--------|
| 1. | Disbursements for Operating Expenses | | |
| 2. | Contributions Made | | |
| | (a) Candidate Committees | | |
| | (b) Political Action Committees | | |
| | (c) Political Parties | | |
| | (d) Partnerships | | |
| | (e) Corporations & Limited Liability Companies (PAC & Political Parties Only) | | |
| | (f) Labor Organizations (PAC & Political Parties Only) | | |
| | (g) Monetary Contributions Subtotal (add 2(a) through 2(f)) | | |
| | (h) Contribution Refunds Provided to the Reporting Committee | | |
| | (i) Monetary Contributions Total (subtract 2(h) from 2(g)) | | |
| 3. | Loans | | |
| | (a) Loans Made | | |
| | (b) Loan Guarantees Made | | |
| | (c) Forgiveness on Loans Made | | |
| | (d) Repayment of Loans Received | | |
| | (e) Accrued Interest on Loans Received | | |
| | (f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c)) | | |
| ŀ. | 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)) | | |
| 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 | | |
| 16. | Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15) | | |



| / | Indi | vidual Contributor Inforn | nation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--|----------------------------|-----------------|---|---|
| | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| 1 | | 1 | | | | |
| 1 | City | State | ZIP | | | |
| | Occupation | Employer | I | | | |
| | Name | | Date Contribution Received | | | |
| | | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | 1 | | |
| | Occupation | Employer | | | | |
| | Name | | Date Contribution Received | | | |
| | | | | | | |
| | Street Address | 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 | | | | | | |
| J | City | State | ZIP | | | |
| | Occupation | Employer | 1 | | | |
| | Enter total only if last page o (transfer the total received this page) | f schedule 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 ____



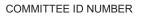


MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

| | Inc | dividual Contributor Inform | Date Contribution Received | Amount Received | Amount this Reporting Period | Amount this Election Cycle |
|---|--|-----------------------------|----------------------------|-----------------|---------------------------------|-------------------------------|
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | _ | | |
| | Occupation | Employer | | | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | Street Address | | | | |
| ŀ | 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 p | of schedule | | | | |

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



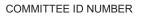


MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

| / | Candidate Committee | e Contributor Infor | mation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---------------------|---------------------------|--------|-----------------|---|---|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | • | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| _ | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| _ | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | | | | | | |

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





MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

| / | | n Committee Contributor | Information | Amount Receive | Cumulative d Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---------------------|-------------------------|-------------|----------------|---|---|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Re | ceived | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Re | ceived | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Re | ceived | | | |
| | Committee Name | | | | | |
| | Street Address | 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 | | | |
| | | | | | | |

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

| | Politic | cal Party Contributor Inform | nation | Amount Receiv | ed Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycl |
|---|--|--|--------------|---------------|--|--|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Rece | eived | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Rec | eived | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Rec | eived | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Rec | eived | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Rec | eived | | | |
| _ | Enter total only if last page of (transfer the total received this p | of schedule eriod to "Summary of Receipts | " line 1(f)) | | | |



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

| | Partnersh | nip Contributor Infor | mation | Amount Receive | d Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|-----------------------|----------|------------------|---|---|
| | Partnership Name | | | Reporting Fellod | Election Cycle | |
| | 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 | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Received | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Received | | | |
| 1 | Enter total only if last page of sch (transfer the total received this period | nedule | (r) | 1 | | |



COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

| / | | ontributor Inform | ation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---|---|---|--|---|
| | Corporation/LLC Name | | | | | |
| | Street Address | | | • | | |
| 1 | City | State | ZIP | - | | |
| | Corporation Commission File Number | Date Contribution Receive | d | | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | • | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | • | | |
| 3 | City | State | ZIP | • | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sumi | nary of Receipts," I | ine 1(h)) | | | |
| | | 0.1 | | | | / |
| | 2 2 3 3 | Corporation/LLC Name Street Address City Corporation Commission File Number Corporation/LLC Name Street Address City Corporation/LLC Name Street Address City Corporation/LLC Name Street Address Corporation/LLC Name Street Address Corporation/LLC Name Street Address City Corporation Commission | Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State | Street Address Chy State ZiP Corporation Commission File Number Date Contribution Received Corporation/LLC Name Street Address ZiP Chy State ZiP Corporation/LLC Name Date Contribution Received Corporation/LLC Name Date Contribution Received Corporation/LLC Name Date Contribution Received Corporation/LLC Name Street Address Street Address | Corporation VLLC Name Bited AdSees Dly State Dly State Corporation Commission File Number Date Contribution Received Drand Address | Corporation / LLC Contributor Information Amount Received Amount Respecting Period Corporation/LLC Name Itele Advance Ite |



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

| | Labor Organi | zation Contributor Ir | nformation | Amount Receive | d Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycl |
|---|--|-----------------------|------------------|----------------|---|--|
| | Labor Organization Name | | | | Reporting Feriod | Liection Cyci |
| - | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution F | Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Received | | | |
| | Labor Organization Name | | | | | |
| - | Street Address | | | | | |
| ; | City | State | ZIP | | | |
| - | Corporation Commission File Number | Date Contribution | Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| ŀ | City | State | ZIP | | | |
| - | Corporation Commission File Number | Date Contribution | Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| ; | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Received | | | |
| | Enter total only if last page of sch (transfer the total received this period | edule | ots." line 1(i)) | | | |



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

| | | Candidate Information | ı | 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 | | I | | | |
| 3 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | I | Date Contribution Received | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | I | Date Contribution Received | | | |
| | Street Address | | I | | | |
| 5 | City | State | ZIP | | | |
| | Occupation | Employer | I | | | |
| | Enter total only if last page | e of schedule s period to "Summary of Recei | | <u> </u> | | |

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

| | Contributor Information | | | Amount Refunded | Cumulative Amount this Reporting Period | Cumulative Amount th Election Cyc |
|---|--------------------------------------|-------|-------------------------------|-----------------|---|---|
| | Name | | Date Contribution Refunded | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| | Name | | Date Contribution Refunded | | | |
| - | Street Address | | | _ | | |
| 2 | City | State | ZIP | _ | | |
| • | ID Number (if applicable) | | Date of Original Contribution | - | | |
| | Name | | Date Contribution Refunded | | | |
| - | Street Address | | | _ | | |
| 3 | City | State | ZIP | _ | | |
| • | ID Number (if applicable) | | Date of Original Contribution | _ | | |
| | Name | | Date Contribution Refunded | | | |
| | Street Address | | | _ | | |
| 4 | City | State | ZIP | _ | | |
| - | ID Number (if applicable) | | Date of Original Contribution | _ | | |
| | Name | | Date Contribution Refunded | | | |
| ŀ | Street Address | | | - | | |
| 5 | City | State | ZIP | - | | |
| • | ID Number (if applicable) | | Date of Original Contribution | - | | |
| | Enter total only if last page of sch | dula | | | | |

Schedule A(1)(I), page____ of____



LOANS RECEIVED:

1

2

3

4

5

| | | | 1 | | |
|------------------------|--------------------------|-----------------------------------|-----------------|---|---|
| Lend | ler Information | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| ender Name | Date Loan Received | | | | |
| treet Address | | | _ | | |
| | | | | | |
| ity | State | ZIP | | | |
| | | | _ | | |
| Jarantor/Endorser Name | Non-Electoral Purpose? (| (PACs and Political Parties Only) | | | |
| nder Name | Date Loan Received | | | | |
| | | | | | |
| reet Address | | | | | |
| | | | | | |
| ty | State | ZIP | | | |
| uarantor/Endorser Name | Non-Electoral Purpose? (| (PACs and Political Parties Only) | - | | |
| | | | | | |
| ender Name | Date Loan Received | | | | |
| | | | _ | | |
| reet Address | | | | | |
| ity | State | ZIP | | | |
| | | | | | |
| uarantor/Endorser Name | _ | (PACs and Political Parties Only) | | | |
| | | | | | |
| nder Name | Date Loan Received | | | | |
| reet Address | | | - | | |
| | | | | | |
| ty | State | ZIP | | | |
| | | | _ | | |
| Jarantor/Endorser Name | Non-Electoral Purpose? (| (PACs and Political Parties Only) | | | |
| nder Name | Date Loan Received | | | | |
| | | | | | |
| treet Address | I | | | | |
| | | | _ | | |
| ty | State | ZIP | | | |
| | | | | | |
| uarantor/Endorser Name | Non-Electoral Purpose? (| (PACs and Political Parties Only) | | | |

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

SCHEDULE A(2)(a)



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

| / | Lend | der 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 | g | | | |
| | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | _ | | |
| 2 | City | State | ZIP | _ | | |
| | Original Amount of Loan | Amount Still Outstandin | g | _ | | |
| _ | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | _ | | |
| 3 | City | State | ZIP | _ | | |
| | Original Amount of Loan | Amount Still Outstanding | g | _ | | |
| _ | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | - | | |
| 4 | City | State | ZIP | _ | | |
| | Original Amount of Loan | Amount Still Outstanding | g | - | | |
| _ | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | - | | |
| 5 | City | State | ZIP | - | | |
| | Original Amount of Loan | Amount Still Outstanding | g | - | | |
| | | | | | | |

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

| | Borrowe | Information | | Amount Repaid | Cumulative Amount this Reporting Period | Cumulative Amount th Election Cycl |
|---|--|--------------------------|-------------------------|---------------|---|--|
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | | | _ | | |
| 2 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | Street Address | | | | |
| 3 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | | | _ | | |
| 4 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | 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 "Sun | | | | | |

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



INTEREST ACCRUED ON LOANS MADE:

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

SCHEDULE A(2)(d)

| / | Borrow | er Information | | Amount of Interest Accrued | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycl |
|---|--------------------------|--------------------------|-----------------------|-------------------------------|---|--|
| | 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 | 1 | | | |
| _ | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 3 | City State | | 710 | | | |
| | | | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | 1 | | | |
| | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | 1 | | | |
| | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | | | | | | |

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



STATE OF ARIZONA

COMMITTEE ID NUMBER

| | Pa | | Amount Rebated or Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---|-----------------------|-------------------------------|---|---|--|
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | | - | | |
| 1 | City | State | ZIP | _ | | |
| | Original Purchase Amount | Reason for Refund/Rel | pate | _ | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | | - | | |
| 2 | City | State | ZIP | _ | | |
| | Original Purchase Amount | Reason for Refund/Rel | pate | - | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | | _ | | |
| 3 | Gity | State | ZIP | _ | | |
| | Original Purchase Amount | Reason for Refund/Rel | pate | _ | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | _ | | | |
| 4 | | | | _ | | |
| | Спу | State | ZIP | _ | | |
| | Original Purchase Amount | Reason for Refund/Rel | pate | | | |
| | Payor Name | Payor Name | | | | |
| 5 | Street Address | | - 1 | | | |
| 5 | City | State | ZIP | | | |
| | Original Purchase Amount | Reason for Refund/Rel | pate | | | |
| | Enter total only if last page of sched (transfer the total received this period to | | | | | |



SCHEDULE A(4)

| INTEREST ACCRUEI | ON COMMITTE | = MONIES |
|------------------|-------------|----------|
| INTEREST ACCINCL | | |

| | 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 ____





SCHEDULE A(5)(a)

| / | Indiv | idual Contributor Inform | ation | 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 | | _ | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | - | | |
| 5 | City | State | ZIP | - | | |
| | Occupation | Employer | | - | | |
| | | | | | | |

*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 ____



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 | |
|---|--|--|--|--|
| | 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 |
|---------------------|
| 23-02 |

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

SCHEDULE A(5)(c)

| Candidate Committee | Contributor Infor | mation | Amount Received | Cumulative Amount this | Cumulative |
|---|--|--|---|--|---|
| Committee Name | | | | Reporting Period | Amount this Election Cycle |
| | Committee Name | | | | |
| Street Address | | | - | | |
| City | State | ZIP | - | | |
| Committee ID Number | Date In-Kind Contribution I | Received | | | |
| Committee Name | | | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Committee ID Number | Date In-Kind Contribution | Received | | | |
| Committee Name | | | | | |
| Street Address | - | | | | |
| City | State | ZIP | - | | |
| Committee ID Number | Date In-Kind Contribution | Received | - | | |
| Committee Name | | | | | |
| Street Address | - | | | | |
| City | State | ZIP | - | | |
| Committee ID Number | Date In-Kind Contribution | Received | - | | |
| Committee Name | | | | | |
| Street Address | | | | | |
| City | State | ZIP | - | | |
| Committee ID Number | Date In-Kind Contribution | Received | - | | |
| Enter total only if last page of schedule | monu of Peacints " | inc $F(d)$ | 1 | | |
| | Street Address Street Address Committee ID Number Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee ID Number Committee ID Number Committ | Street Address City State Committee ID Number Date In-Kind Contribution Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Committee Name Street Address City State City State City State City Date In-Kind Contribution Committee ID Number Date In-Kind Contribution | Street Address State ZIP Committee ID Number Date In-Kind Contribution Received Committee Name State ZIP Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number | Street Address Street | Breek Address ZIP Committee ID Number Date In-Kond Contribution Received Committee ID Number Date In-Kond Contribution Received |

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





SCHEDULE A(5)(d)

| IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMI | TTEES |
|--|-------|
|--|-------|

| / | Candidate C | Committee Contributor Ir | nformation | Amount Receive | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---------------------|--|----------------|----------------|---|---|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribu | tion Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contrib | ution Received | | | |
| _ | Committee Name | | | | | |
| 3 | Street Address | | | | | |
| | | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribu | ution Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | e ID Number Date In-Kind Contribution Received | | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contrib | ution Received | | | |
| | | | | | | |

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





IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

| / | Political Action Commi | ttee Contributor In | formation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|---------------------------|------------|-----------------|---|---|
| | Committee Name | | | | | |
| | Street Address | | | - | | |
| 1 | City | State | ZIP | - | | |
| | Committee ID Number | Date In-Kind Contribution | Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | - | | |
| 2 | City | State | ZIP | - | | |
| | Committee ID Number | Date In-Kind Contribution | Received | - | | |
| | Committee Name | | | | | |
| | Street Address | | - | | | |
| 3 | City | State | ZIP | - | | |
| | Committee ID Number | Date In-Kind Contribution | Received | - | | |
| | Committee Name | | | | | |
| | Street Address | | - | | | |
| 4 | City | State | ZIP | - | | |
| | Committee ID Number | Date In-Kind Contribution | Received | - | | |
| | Committee Name | | | | | |
| | Street Address | | - | | | |
| 5 | City | State | ZIP | - | | |
| | Committee ID Number | Date In-Kind Contribution | Received | - | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sur | | | | | |
| | (transter the total received this period to "Su | nmary of Receipts," | line 5(e)) | | | |

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

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



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

| | Partnersl | nip Contributor Inform | nation | Amount Received | d 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 | pution 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 | pution Received | | | |
| - | Enter total only if last page of sch (transfer the total received this period | nedule | | | | |





IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

| / | _ | Corporation / LLC C | Contributor Inform | ation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|---|---------------------------|----------------------|-----------------|---|---|
| | | Corporation/LLC Name | | | | | |
| 1 | - | Street Address | | | | | |
| | 1 | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date In-Kind Contribution | Received | | | |
| | | Corporation/LLC Name | | | | | |
| | | Street Address | | | | | |
| 2 | 2 | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date In-Kind Contribution | Received | | | |
| | | Corporation/LLC Name | | | | | |
| | | Street Address | | | | | |
| 3 | 3 | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date In-Kind Contribution | Received | | | |
| | | Corporation/LLC Name | | | | | |
| | | Street Address | | | | | |
| 4 | ł | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date In-Kind Contribution | Received | | | |
| | | Corporation/LLC Name | | | | | |
| F | | Street Address | | | | | |
| 5 | נ | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date In-Kind Contribution | Received | | | |
| | | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," I | ine 5(h)) | | | |
| | | | Sa | hedule A(5)(h), page | of | | |

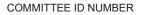


IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

| | Labor Organ | ization Contributor | Information | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|-------------------------------|--------------------|-----------------|---|---|
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | l |
| | Corporation Commission File Number | Date In-Kind Cont | tribution Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | l |
| 2 | City | State | ZIP | | | l |
| | Corporation Commission File Number | Date In-Kind Con | tribution Received | | | l |
| | Labor Organization Name | | | | | |
| | Street Address | | | | l | |
| 3 | City | State | ZIP | | | l |
| | Corporation Commission File Number | Date In-Kind Con | tribution Received | | | l |
| | Labor Organization Name | L | | | | |
| | Street Address | | | | | l |
| 4 | City | State | ZIP | | | l |
| | Corporation Commission File Number | Date In-Kind Con | tribution Received | | | l |
| _ | Labor Organization Name | I | | | | |
| | Street Address | | | | l | |
| 5 | City | State | ZIP | | | l |
| | Corporation Commission File Number | Date In-Kind Con | tribution Received | | | l |
| | Enter total only if last page of sch (transfer the total received this period | nedule to "Summary of Rece | ipts," line 5(i)) | I | | |

Arizona Secretary of State Revision 9/28/23





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

SCHEDULE A(5)(j)

| / | | | | 1 | | |
|---|--|-----------------------------|---|-----------------|---|---|
| | Car | didate Information | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| | Name | | Date In-Kind Contribution Received | | | |
| 1 | Street Address | | | - | | |
| | City | State | ZIP | - | | |
| | Asset or Property Contributed | | | - | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | _ | | |
| 2 | City | State | ZIP | - | | |
| | Asset or Property Contributed | | | - | | |
| | Name | | | | | |
| | | _ | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Asset or Property Contributed | | | | | |
| | Name | ame Date In-Kind Contributi | | | | |
| | Street Address | | - | | | |
| 4 | City | State | ZIP | - | | |
| | Asset or Property Contributed | | I | - | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | - | | |
| 5 | City | State | ZIP | - | | |
| | Asset or Property Contributed | | | - | | |
| | Enter total only if last page of sche (transfer the total received this period to | edule | | | | |
| | (transfer the total received this period to | | ^{ots,"} line 5(j)) Schedule A(5)(j), page o | - | | |





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 | | 1 | | | |
| | Name | | Date In-Kind Donation Received | | | |
| | Street Address | - | | | | |
| 3 | City | State | ZIP | - | | |
| | Type of Item Donated | 1 | - | | | |
| | Name | Date In-Kind Donation Received | | | | |
| | Street Address | | - | | | |
| 4 | City | State | ZIP | | | |
| | Type of Item Donated | 1 | - | | | |
| | 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 | mary of Receipts " | line 6) | 1 | | |



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

| | Cred | itor 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 | I | Date of Extension of Credit | _ | | |
| | Enter total only if last page of sched (transfer the total received this period to " | lle Summary of Rece | ipts," line 7(a)) | | | |



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

| | Credito | or 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 | ZIP | - | | | |
| | | State | | - | | |
| | 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 | | | | | |
| 5 | Street Address | | | - | | |
| | City | State | ZIP | - | | |
| | Services or Goods Originally Provided on Credit | | | | | |
| | Enter total only if last page of schedul (transfer the total received this period to "Su | e mmary of Receipts," | line 7(b)) | <u> </u> | | |
| | (transfer the total received this period to "Su | mmary of Receipts," | line 7(b)) | | | |



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

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

Schedule A(8), page____ of ____



COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

| | | nformation | | Payment Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|--------------------|--------------|----------------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Services or Goods Purchased | Payment Date | | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Services or Goods Purchased | | Payment Date | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Services or Goods Purchased | | Payment Date | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Services or Goods Purchased | | Payment Date | | | |
| _ | Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Services or Goods Purchased | Payment Date | | | | |
| - | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," | line 9) | I | | |





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 | City | State | ZIP | | | |
| | | Type of Account Receivable or Debt Owed | | | | | |
| | | Name | | | | | |
| | | Street Address | | | | | |
| | 2 | City | State | ZIP | | | |
| | | Type of Account Receivable or Debt Owed | Date that Debt Accrued | | | | |
| | | Name | | | | | |
| | | Street Address | | | | | |
| ; | 3 | City | State | ZIP | | | |
| | | Type of Account Receivable or Debt Owed | Date that Debt Accrued | | | | |
| | | Name | | | | | |
| | | Street Address | | | | | |
| 4 | 4 | City | State | ZIP | | | |
| | | Type of Account Receivable or Debt Owed | I | Date that Debt Accrued | | | |
| | | Name | | | | | |
| | | Street Address | | | | | |
| į | 5 | City | State | ZIP | | | |
| | | Type of Account Receivable or Debt Owed | <u> </u> | Date that Debt Accrued | | | |
| | | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," li | I ine 10) | l | | |
| | | | Sc | chedule A(10), page o | f | | |

Arizona Secretary of State Revision 9/28/23

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 th Election Cyc |
|---|---|--------------|--------------|--------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Receipt Type | I | Receipt Date | | | |
| | Name | | | | | |
| | Street Address | | | _ | | |
| | City | State | ZIP | | | |
| | Receipt Type | | Receipt Date | | | |
| | Name | | | | | |
| - | Street Address | | | | | |
| | City | State | ZIP | | | |
| | | State | | | | |
| | Receipt Type | Receipt Date | | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| ŀ | Receipt Type | | Receipt Date | | | |
| | Name | | | | | |
| | Street Address | | | _ | | |
| | City | State | ZIP | | | |
| | Receipt Type | | Receipt Date | | | |
| 4 | 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)

| / | Recipie | ent Information | | Amount Paid | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--------------------------------|--|--|--------------------|---|---|
| | Name | ne Disbursement Date | | | | |
| | | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | | | | □ Cash | | |
| | Type of Operating Expense Paid | Non-Electoral Purpose? (PACs and Political Parties Only) | | □ 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 | _ | | |
| | | | | □ 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 | | | | |
| | Chanak Aukanan | | | _ | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | - | | |
| | | | | □ Cash □ Credit | | |
| | Type of Operating Expense Paid | Non-Electoral Purpose? | PACs and Political Parties Only) | | | |
| | | | | | | |

Schedule B(1), page____ of ____

COMMITTEE ID NUMBER



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

| / | 1 | te 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 | • | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City State ZIP | | | | | |
| | Committee ID Number Date Contribution Made | | □ Cash □ Credit | | | |
| | | | | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number Date Contribution Made | | | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | | | | | | |
| | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | □ Credit | | |
| - | Enter total only if last page of | of schedule period to "Summary of Disburser | | | | |

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





MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

| / | Political Act | tion Committee Recipient Ir | nformation | Amount Contributed | Cumulative Amount this | Cumulative Amount this |
|---|---------------------|---|------------------|-----------------------|---------------------------|---------------------------|
| | Committee Name | | Reporting Period | Election Cycle | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | □ Cash □ Credit | | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State ZIP | | | | |
| | Committee ID Number | mittee ID Number Date Contribution Made | | | | |
| | Committee Name | 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 | ee ID Number Date Contribution Made | | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | □ Cash □ Credit | | |

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



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

| | Politi | cal Party Recipient Inform | nation | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycl |
|---|--|----------------------------|------------------------|-----------------------|---|--|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | ty State ZIP | | | | |
| | Committee ID Number Date Contribution Made | | □ Cash □ Credit | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution M | Date Contribution Made | | | |
| - | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution M | Date Contribution Made | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution M | ade | □ Cash □ Credit | | |
| | Committee Name | Committee Name | | | | |
| | Street Address | Street Address | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution M | ade | □ Cash □ Credit | | |
| _ | Enter total only if last page of | f schedule | rsements," line 2(c)) | | | |



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

| | Partners | ship Recipient Inform | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycl | |
|-----|--|-----------------------|-----------------------|---|--|--|
| | Partnership Name | | | | | |
| - | Street Address | | | | | |
| | City | State | ZIP | | | |
| - | Corporation Commission File Number Date Contribution Made | | | □ Cash □ Credit | | |
| | Partnership Name | | | | | |
| - | ireet Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | □ Cash □ Credit | |
| | Partnership Name | | | | | |
| - | Street Address | | | | | |
| ; | City | State | ZIP | | | |
| - | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| ŀ | City | State | ZIP | | | |
| - | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| 1 | Partnership Name | | | | | |
| | Street Address | | | | | |
| ; - | 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 | | | | |





MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

| | Corporation | / LLC Recipient Inf | ormation | 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 | | | | | |
| 2 | City State ZIP | | | | | |
| | Corporation Commission File Number | er Date Contribution Made | | □ Cash □ Credit | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Enter total only if last page of sch (transfer the total disbursed this perio | ledule | | I | | |



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

| | Labor Orgai | nization Recipient Info | Amount Contributor | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|--|-------------------------|-----------------------|---|---|--|
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Ma | lde | □ Cash □ Credit | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| - | Corporation Commission File Number Date Contribution Made | | | □ Cash □ Credit | | |
| | Labor Organization Name | | | | | |
| - | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Ma | ade | □ Cash □ Credit | | |
| _ | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Ma | ade | □ Cash □ Credit | | |
| | Labor Organization Name | | | | | |
| | Street Address | Street Address | | | | |
| 5 | City | State ZIP | | | | |
| | Corporation Commission File Number | Date Contribution Ma | ade | □ 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 Information | | | Amount Refunded | Cumulative Amount this Reporting Period | Cumulative Amount thi Election Cycl |
|---|--|---------------------|-------------------------------|-----------------|---|---|
| | Committee Name | | Date Refund Received | | Reporting Feriod | Election Cycl |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | | Date of Original Contribution | | | |
| | Committee Name | | Date Refund Received | | | |
| | | | | | | |
| 0 | itreet Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | | Date of Original Contribution | | | |
| | Committee Name | | Date Refund Received | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | | Date of Original Contribution | | | |
| | Committee Name | | Date Refund Received | | | |
| | Street Address | street Address | | _ | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | | Date of Original Contribution | | | |
| | Committee Name | | Date Refund Received | | | |
| | Street Address | | | _ | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Committee ID Number | | | | |
| _ | Enter total only if last page of (transfer the total disbursed this p | f achadula | | | | |

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



SCHEDULE B(3)(a)

LOANS MADE:

| | | | | 1 | 1 1 | |
|---|---|--------------------------------------|------------|---------------|---|---|
| / | Borrower | Information | | Amount Loaned | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| | Borrower Name | | | | | |
| | Street Address | Street Address | | | | |
| 1 | City | State | ZIP | - | | |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| | Borrower Name | I | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | _ | | |
| | Guarantor/Endorser Name | Date Loan Made | <u> </u> | | | |
| | 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 | arantor/Endorser Name Date Loan Made | | | | |
| | Borrower Name | 1 | | | | |
| | Street Address | | | 1 | | |
| 5 | City | State | ZIP | 1 | | |
| | Guarantor/Endorser Name | Date Loan Made | 1 | 1 | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts " I | line 3(a)) | | | |

Schedule B(3)(a), page____of____



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

| / | | Guarantor Information | | Amount | Cumulative Amount this | Cumulative Amount thi |
|---|-----------------------|-----------------------|------|------------|---------------------------|--------------------------|
| _ | Guarantor Information | | | Guaranteed | Reporting Period | Election Cy |
| | Guarantor Name | Guarantor Name | | | | |
| ľ | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guarant | eed | | | |
| | Currentee Norma | | | | | |
| | Guarantor Name | | | | | |
| 2 | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaran | teed | | | |
| | Guarantor Name | | | | | |
| | Street Address | | | | | |
| 3 | 0.1 | | ZIP | | | |
| | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaran | teed | | | |
| | Guarantor Name | | | | | |
| | Street Address | | | | | |
| ŀ | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaran | teed | | | |
| | Guarantor Name | | | | | |
| | Street Address | Street Address | | | | |
| 5 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaran | heed | | | |
| | | Date Loan Guaran | | | | |

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



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

| / | Borrowe | r Information | | Amount Forgiven | Cumulative Amount this | Cumulative Amount this |
|---|---|--------------------------|-----------------------|-----------------|---------------------------|---------------------------|
| | Borrower Name | | Date Forgiveness Made | | Reporting Period | Election Cycle |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| - | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| _ | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | _ | | |
| - | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | _ | | |
| 5 | City | State | ZIP | _ | | |
| | Original Amount of Loan | Amount Still Outstanding | | _ | | |
| _ | Enter total only if last page of schedule | | | | | |

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 | 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 per | | | | | |

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

SCHEDULE B(3)(d)



ACCRUED INTEREST ON LOANS RECEIVED:

| SCHE | | B(3) | (a) |
|------|------|------|-----|
| SURE | DULE | D(3) | (e) |

| / | | Information | | Amount of Interest Accrued | Cumulative Amount this Reporting Period | Cumulative Amount th Election Cycl |
|---|---|--------------------------|-----------------------|-------------------------------|---|--|
| | Lender Name | | Date Interest Accrued | | | |
| | 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 | | _ | | |
| | - | | 1 | | | |
| | Lender Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | Lender Name | | Date Interest Accrued | | | |
| | Street Address | | | _ | | |
| 4 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | Lender Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Su | | results "line $2/-1$ | | | |

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 | _ | | |
| | 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 | | | _ | | |
| | | | | | | |
| 5 | City | State | ZIP | - | | |

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)

| / | Candidate | e Committee Recipient Ir | nformation | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------|-------------|-----------------------|---|---|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contrib | pution 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 Contri | bution Made | | | |
| _ | Committee Name | | | | | |
| | | | | | | |
| 4 | 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 Contri | bution Made | | | |
| | Enter total only if last page of | Faabadula | | | | |

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





SCHEDULE B(5)(b)

| IN-KIND CONTRIBUTIONS TO | POLITICAL ACTION COMMITTEES: |
|--------------------------|------------------------------|
|--------------------------|------------------------------|

| | Political Action | Committee Recipient | Information | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|----------------------|-------------|-----------------------|---|---|
| | Committee Name Street Address | | | | | |
| | | | | | | |
| 1 | City | State | ZIP | | | |
| - | Committee ID Number | Date In-Kind Contrib | ution Made | | | |
| | Committee Name | | | | | |
| - | treet Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contrib | oution Made | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contrib | oution Made | | | |
| | Committee Name | | | | | |
| · | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| - | Committee ID Number | Date In-Kind Contrib | oution Made | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| - | | | | | | |
| | Committee ID Number Date In-Kind Contribution Made | | | | | |

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

| | Political | Party Recipient Informa | tion | 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 Contribution | on Made | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribut | on Made | — | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribut | on Made | | | |
| | Committee Name | I | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribut | on Made | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| | | | State ZIP | | | |
| 5 | City | State | | | | |
| 5 | City Committee ID Number | State Date In-Kind Contribute | | | | |



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

| | Partners | hip Recipient Informat | ion | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------|----------|-----------------------|---|---|
| | Partnership Name | Partnership Name | | | | |
| - | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| • | Corporation Commission File Number | Date In-Kind Contributio | on Made | | | |
| | Partnership Name | | | | | |
| - | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| - | Corporation Commission File Number | Date In-Kind Contributi | ion Made | | | |
| | Partnership Name | | | | | |
| - | Street Address | Irreet Address | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contributi | ion Made | | | |
| | Partnership Name | | | | | |
| - | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| - | Corporation Commission File Number | Date In-Kind Contributi | ion Made | | | |
| | Partnership Name | | | | | |
| - | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| ŀ | Corporation Commission File Number | Date In-Kind Contributi | ion Made | | | |
| ┥ | Enter total only if last page of sch (transfer the total disbursed this perio | nedule | | I | | |



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

| | Corporation | n / LLC Recipient In | formation | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycl |
|---|--|----------------------|----------------|-----------------------|---|--|
| | Corporation/LLC Name | | | Licotion byo | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Cont | ribution Made | | | |
| 1 | Corporation/LLC Name | | | | | |
| - | Street Address | | | | | |
| 2 | 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 Con | tribution Made | | | |
| | Corporation/LLC Name | | | | | |
| - | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Con | tribution Made | | | |
| | Corporation/LLC Name | I | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Con | tribution Made | | | |
| | Enter total only if last page of sch (transfer the total disbursed this perio | nedule | | | | |

Arizona Secretary of State Revision 9/28/23



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

| | Labor Orgai | nization Recipient Ir | nformation | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cyc |
|---|---|-----------------------|----------------|-----------------------|---|---|
| l | Labor Organization Name | | | | | Election by |
| | Street Address | | | | | |
| (| City | State | ZIP | | | |
| (| Corporation Commission File Number | Date In-Kind Cont | ribution Made | | | |
| l | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| (| Corporation Commission File Number | Date In-Kind Con | tribution Made | | | |
| I | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| (| Corporation Commission File Number | Date In-Kind Con | tribution Made | | | |
| l | Labor Organization Name | | | | | |
| ~ | Street Address | | | | | |
| ļ | City | State | ZIP | | | |
| (| Corporation Commission File Number | Date In-Kind Con | tribution Made | | | |
| I | Labor Organization Name | | | | | |
| ~ | Street Address | | | | | |
| , | City | State | ZIP | | | |
| (| Corporation Commission File Number | Date In-Kind Con | tribution 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)

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

Schedule B(6), page____ of ____



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

| / | - | Recipient Informatic | 1 | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|-----------------------------|-------------------------------------|-----------------------|---|---|
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | - | | |
| 1 | City | State | ZIP | - | | |
| | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) Opposed (| (including % opposed) | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | | Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | 1 | | |
| 2 | City | State | ZIP | | | |
| | Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Oppose | | (including % opposed) | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast Election Month/Year | | Credit | | | |
| | Recipient Name | <u> </u> | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | 1 | 1 | | |
| 3 | City | State | ZIP | | | |
| | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) Opposed | I (including % opposed) | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | | _ 🗆 Credit | | |
| | Recipient Name | <u> </u> | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | 1 | | |
| | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) Opposed (| (including % opposed) | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | | _ 🗆 Credit | | |
| | Enter total only if last page of schedu | le | | l | | |
| | (transfer the total disbursed this period to " | Summary of Disbursen | nents," line 7) | | | |

Schedule B(7), page____ of ____



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

| Expenditure | Recipient Informatic | on | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|---|--|--|--|---|
| cipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| eet Address | | | - | | |
| у | State | ZIP | - | | |
| pporting or Opposing Issuance of Recall Order? | Candidate Sought to be Rec | alled | □ Cash | | |
| te of First Publication, Display, Delivery, or Broadcast | Office Held | | Credit | | |
| cipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| eet Address | | | - | | |
| y | State | ZIP | - | | |
| pporting or Opposing Issuance of Recall Order? | Candidate Sought to be Rec | alled | □ Cash | | |
| Date of First Publication, Display, Delivery, or Broadcast Office Held | | _ □ Credit | | | |
| cipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| eet Address | | | - | | |
| у | State | ZIP | 1 | | |
| pporting or Opposing Issuance of Recall Order? | Candidate Sought to be Rec | alled | □ Cash | | |
| te of First Publication, Display, Delivery, or Broadcast | Office Held | | _ 🗆 Credit | | |
| cipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| eet Address | | | - | | |
| у | State | ZIP | 4 | | |
| pporting or Opposing Issuance of Recall Order? | Candidate Sought to be Rec | alled | _ □ Cash | | |
| te of First Publication, Display, Delivery, or Broadcast | Office Held | | _ □ Credit | | |
| y pporti te of I | ing or Opposing Issuance of Recall Order? First Publication, Display, Delivery, or Broadcast | ing or Opposing Issuance of Recall Order? Candidate Sought to be Rec First Publication, Display, Delivery, or Broadcast Office Held | ing or Opposing Issuance of Recall Order? Candidate Sought to be Recalled First Publication, Display, Delivery, or Broadcast Office Held | State ZIP ing or Opposing Issuance of Recall Order? Candidate Sought to be Recalled First Publication, Display, Delivery, or Broadcast Office Held | ing or Opposing Issuance of Recall Order? Candidate Sought to be Recalled |

Schedule B(8), page____ of ____





SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

| | Benefi | tted Candidate | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---------------------------|-----------------------|--------|---|---|
| | Candidate Name | | Date Benefit Provided | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Type of Benefit Provided | | l | | | |
| | Notes: | | | | | |
| | Candidate Name | | Date Benefit Provided | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Type of Benefit Provided | | | | | |
| | Notes: | | | | | |
| | Candidate Name | | Date Benefit Provided | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Type of Benefit Provided | | • • | | | |
| | Notes: | | | | | |
| | Candidate Name | | Date Benefit Provided | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Type of Benefit Provided | | | | | |
| | Notes: | | | | | |
| | Enter total only if last page of schedul (transfer the total disbursed this period to " | e Summary of Disbursen | nents," line 9) | | | |
| | 1 | | | | <u> </u> | / |

Schedule B(9), page____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

| / | / Recipient C | ommittee Informat | tion | Payment Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|----------------------|---------------------|--------------------|---|---|
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Exper | nse (if applicable) | | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Exper | nse (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 | nse (if applicable) | □ Cash □ Credit | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Exper | nse (if applicable) | □ Cash □ Credit | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Exper | nse (if applicable) | □ Cash □ Credit | | |
| | Enter total only if last page of school | | | | | |
| | Enter total only if last page of schedu (transfer the total disbursed this period to | "Summary of Disburg | sements," line 10) | | | |

Schedule B(10), page____ of _____



REIMBURSEMENTS MADE:

SCHEDULE B(11)

| | Recipier | nt Information | | Reimbursement Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|----------------|--------------------|-------------------------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Services or Goods Reimbursed | | Reimbursement Date | □ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | □ Cash □ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | □ Cash □ Credit | | |
| | | | | | | |
| | Name | | | | | |
| | itreet Address | | | | | |
| 4 | City | State | ZIP | □ Cash | | |
| | Services or Goods Reimbursed | | Reimbursement Date | Credit | | |
| | Name | | I | | | |
| | 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 "S | | | | | |

Schedule B(11), page____ of ____





OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

| | | Debt Information | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cyc |
|---|--------------------------------------|------------------|------------------------|--------|---|---|
| | 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 | | | |
| | | | | | | |

Schedule B(12), page____ of ____

COMMITTEE ID NUMBER

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

| | SCHED | JLE B(13) |
|---|--|-----------|
| umulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
| | | |

| | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|--|--|
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Total (transfer the total disbursed this period to "Summary of Disbursements," line 13) | | |
| | | |

Schedule A(13), page____ of ____



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

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



COMMITTEE ID NUMBER

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