Received by Goodyear City Clerk's Office
July 11, 2024 at 2:51 p.m.

STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER

COMMIT	TEE INFORMATION (required):		
	Committee Information:	Committee Name:	
CANDIDA	ATE INFORMATION (only if filing	g as a candidate committee):	
	Office Sought:	☐ County Office:	☐ Special District Office:
		City/Town Office:	☐ School Board District:
	Cumulative Report:		
	☐ Check here if this is the o	andidate committee's first, cumulative repo	t for the election cycle. Also select appropriate Reporting Period below.
	Cumulative reporting period	start date (which supersedes the start dat	e for the Reporting Period selected below):
REPORT	ING PERIOD (check one):		

REPORT DUE  uary 26, 2023 to March 4, 2023  1, 2023 to April 15, 2023  1, 2023 to April 17, 2023  30, 2023 to May 6, 2023  1, 2023 to July 15, 2023  1, 2023 to July 17, 2023
1, 2023 to April 15, 2023 1, 2023 to April 17, 2023 30, 2023 to May 6, 2023 1, 2023 to July 15, 2023
1, 2023 to April 17, 2023 30, 2023 to May 6, 2023 1, 2023 to July 15, 2023
30, 2023 to May 6, 2023 1, 2023 to July 15, 2023
1, 2023 to July 15, 2023
. , ,
1 2023 to July 17 2023
1, 2023 to July 17, 2023
16, 2023 to July 22, 2023
ber 1, 2023 to October 16, 2023*
ber 1, 2023 to October 16, 2023*
ber 22, 2023 to October 28, 2023
ary 1, 2024 to January 16, 2024*
ary 1, 2024 to January 16, 2024*
uary 25, 2024 to March 2, 2024
1, 2024 to April 15, 2024
1, 2024 to April 15, 2024
5, 2024 to May 11, 2024
1, 2024 to July 15, 2024
1, 2024 to July 15, 2024
14, 2024 to July 20, 2024
ber 1, 2024 to October 15, 2024
ber 1, 2024 to October 15, 2024
ber 20, 2024 to October 26, 2024
ary 1, 2025 to January 15, 2025
e Date of Termination

reporting deadline extended to next business day if deadline date is a notingly of outridy. A.K.O. 333 1-240(A), 1-001 6

#### FINANCIAL SUMMARY (required):

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



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.

	hylan	
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

## SUMMARY OF RECEIPTS (Schedule A):

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



## SUMMARY OF DISBURSEMENTS (Schedule B):

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



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

SCHEDULE A(1)(a)

	Individual Contr	ributor Informatio	n	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	<u> </u>	Date Contribution Received			
	Street Address		L	-		
2	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address			-		
3	City	State	ZIP	-		
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			_		
4	City	State	ZIP	-		
	Occupation	Employer		_		
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP	-		
	Occupation	Employer		_		
L						
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," l	line 1(a))			

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

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

COMMITTEE ID NUMBER

## 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))		

<sup>\*</sup>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)

				ı	1 1	
	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address		1			
1	City	State	ZIP			
	Occupation	Employer	1			
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
-	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5		State	ZIP			
	City		∠ıı			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receipts,"	line 1(c))			

Arizona Secretary of State Revision 9/28/23

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/	Candidate Committee	· Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	I ed			
	Committee Name	I				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	ID Number Date Contribution Received				
	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			
_	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(d))			

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

	Political Action Com	mittee Contributor Ir	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number Date Contribution Received					
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Enter total only if last page of schedu	ıle				
	(transfer the total received this period to "	Summary of Receipts,"	line 1(e))			

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

/						
	Political Party Co	ntributor Informat	ion	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					
5	Street Address					
J	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts." I	line 1(f))			

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	-		
	Sky	Suite				
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
2		I	T	-		
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
-	Partnership Name					
	Street Address					
3		_				
	City	State	ZIP			
	Corporation Commission File Number  Date Contribution Received					
	Partnership Name					
	Street Address			<u> </u>		
4						
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	l ed	-		
	Partnership Name					
	O A Live			-		
5	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	I ed	-		
-	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	line 1(g))			

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC C	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					-
	Street Address					
1		T	1	_		
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed	-		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
				_		
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	os.ps. alion 220 mano					
	Street Address	1				
3	City	State	ZIP			
				_		
	Corporation Commission File Number	Date Contribution Receive	ed			
-	0					
	Corporation/LLC Name					
	Street Address			=		
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
				_		
	Street Address					
5	City	State	ZIP	1		
	Corporation Commission File Number	Date Contribution Receive	ed	1		
L						
	Enter total only if last page of schedule (transfer the total received this period to "Sum					
	transier the total received this period to "Sum	mary of Receipts," I	line 1(n))			

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organization (	Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	I d			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive				
		Date Contribution Receive	eu			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Descript "	ina 4(i))			
	(transfer the total received this period to "Sum	mary or Receipts," I	iiie i(i))			

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

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

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	С	ontributor Informatio	n	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			j
	Street Address					
1	City	State	ZIP			
	ID Number (if applicable)	I	Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
ļ	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Enter total only if last page of so					

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



LOANS RECEIVED: SCHEDULE A(2)(a)

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

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



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

	Lender I	nformation		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	I	Date Forgiveness Received			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	I	Date Forgiveness Received			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u> </u>			
	Lender Name		Date Forgiveness Received			
	Street Address		<u> </u>			
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	l	Date Forgiveness Received			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," li	ine 2(b))	l		

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



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

/						
	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
•	Street Address					
1	City	State	ZIP			
•	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
•	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				

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

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address		<u> </u>	-		
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address		<u> </u>	-		
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	l	Date Interest Accrued			
	Street Address			-		
3	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Interest Accrued			
	Street Address			-		
4	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Interest Accrued			
	Street Address			_		
5	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	line 2(d))			

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



# STATE OF ARIZONA FRIMINGERE FOR PAIGN

COMMITTEE ID NUMBER

	Payo	or Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Street Address		l			
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	te	-		
	Payor Name		Date Rebate/Refund Received			
	Street Address			-		
2	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refund/Reba	te	_		
	Payor Name		Date Rebate/Refund Received			
	Street Address			_		
3	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refund/Reba	te	-		
	Payor Name		Date Rebate/Refund Received			
	Street Address			-		
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	te			
	Payor Name		Date Rebate/Refund Received			
	Street Address			-		
5	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refund/Reba	te	-		

Schedule A(3), page\_\_\_\_ of \_\_\_\_

COMMITTEE ID NUMBER

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

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



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

SCHEDULE A(5)(a)

	Individual Contr	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address			-		
1	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP	_		
	Occupation	Employer		<u> </u>		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
3	City	State	ZIP			
	Occupation	Employer		1		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
4	City	State	ZIP	<u> </u>  -		
	V.S	State				
	Occupation	Employer				
	Name	•	Date In-Kind Contribution Received			
	Street Address		<u> </u>	1		
5	City	State	ZIP	1		
	Occupation	Employer		-		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," l	line 5(a))	<u> </u>		

\*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))		

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

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



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

SCHEDULE A(5)(c)

Candidate Committee	e Contributor Info	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Committee Name					
Street Address		_			
on out Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	I Received	_		
Committee Name					
Street Address			4		
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	<u> </u> -		
	_ato in raind contribution				
Committee Name					
Street Address					
City	State	ZIP	1		
Committee ID Number	Date In-Kind Contribution	Received	1		
	Committee Name  Street Address  City  Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Committee Name  Street Address  City  Committee ID Number  Committee Name  Street Address  City  Committee Name  Street Address  City  Committee ID Number	Committee Name  Street Address  City State  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  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  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution	Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee Name  Street Address  City State ZIP  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	Sheet Address  City State ZiP  Committee ID Number Date In-Kind Contribution Received  Committee Name  Sheet Address  City State ZiP  Committee Name  Sheet Address  City State ZiP  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received	Candidate Committee Contributor Information  Amount Received Amount this Reporting Period  Committee ID Number  Co

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

Candidate Committee	Contributor Infor	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
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				
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Received			
Enter total only if last page of schedule	(5)				
	Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  Committee ID Number  Committee Name  Street Address  City  Committee ID Number  City  Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Street Address  City  Committee Name  Street Address  City  Committee ID Number  Committee ID Number  Committee ID Number	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 ID Number Date In-Kind Contribution  Committee Name  Street Address  City State  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  Committee Name  Street Address  City State  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  Date In-Kind Contribution	Street Address  City State   ZIP    Committee ID Number   Date In-Kind Contribution Received    Committee Name   ZIP    Committee ID Number   Date In-Kind Contribution Received    City   State   ZIP    Committee ID Number   Date In-Kind Contribution Received    Committee Name   ZIP    Committee Name   ZIP    Committee ID Number   Date In-Kind Contribution Received    City   State   ZIP    Committee ID Number   Date In-Kind Contribution Received    Committee Name   ZIP    Committee Name   ZIP    Committee Name   ZIP    Committee Name   ZIP    Committee ID Number   Date In-Kind Contribution Received    City   State   ZIP    Committee ID Number   Date In-Kind Contribution Received    Committee ID Number   Date In-Kind Contribution Received    Committee Name   ZIP    Committee Name   ZIP	Street Address  City State	Committee Name  Committee Name  Street Addresses  City  Committee Name  Commi

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

	Political Action Committ	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	<u> </u>				
	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 "Sum	mary of Receipts " I	ine 5(e))	ı		

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

Political Party Contributor Information  Amount Received Amount his Reporting Period  Cormittee Name  Stored Address  Cormittee ID Number  Committee ID Number  Date in Kind Contribution Received  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	,						
Street Address  Cry State ZIP  Committee ID Number  Committee Name  Street Address  City State ZIP  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Committee ID Number  Date In-Kind Contribution Received	/	Political Party C	ontributor Informa	tion	Amount Received	Amount this	Cumulative Amount this Election Cycle
Tony State   ZIP   Committee ID Number   Date In-Kind Contribution Received    Committee Name   Street Address    Committee ID Number   Date In-Kind Contribution Received		Committee Name			-	-	
Committee ID Number  Date In-Kind Contribution Received  Committee Name  Street Address  Zip  Committee ID Number  Date In-Kind Contribution Received  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received		Street Address					
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	1	City	State	ZIP			
Street Address  2 City State ZIP  Committee ID Number Date In-Kind Contribution Received  Street Address  3 City State ZIP  Committee ID Number Date In-Kind Contribution Received		Committee ID Number	Date In-Kind Contribution	Received			
City		Committee Name	1				
Committee ID Number  Date In-Kind Contribution Received  Committee Name  Street Address  Tity  State  ZIP  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Committee Name  Street Address  4  City  State  ZIP  Committee Name  Date In-Kind Contribution Received		Street Address					
Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  City State ZIP  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  City Date In-Kind Contribution Received	2	City	State	ZIP			
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 ID Number	Date In-Kind Contribution	n Received	-		
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					
Committee ID Number  Date In-Kind Contribution Received  Committee Name  Street Address  City  State  ZIP  Committee ID Number  Date In-Kind Contribution Received	}	Street Address			-		
Committee Name  Street Address  4  City  State  ZIP  Committee ID Number  Date In-Kind Contribution Received  Committee Name	3	City	State	ZIP			
Street Address  4 City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee Name		Committee ID Number	Date In-Kind Contribution	n Received			
City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee Name		Committee Name					
City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee Name		Street Address					
Committee Name	4	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Date In-Kind Contribution Received			
Street Address		Committee Name	Committee Name				
		Street Address			_		
5 City State ZIP	5	City	State	ZIP			
Committee ID Number Date In-Kind Contribution Received		Committee ID Number	Date In-Kind Contribution	n Received			
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(f))		Enter total only if last page of schedule	<u> </u>				

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

,						
	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address			-		
1	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Partnership Name					
	Street Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Partnership Name					
	Street Address	_				
3	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Partnership Name					
	Street Address			_		
4	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
	Partnership Name					
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Possints " !	lino 5(a)\			
	Charles of the total received this period to Sum	mary or recompis, I	V(9//			

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

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

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

/	Labor Organization	n Contributor Inforr	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					,
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
_	Enter total only if last page of schodule	<u> </u>				
	Enter total only if last page of schedule (transfer the total received this period to "Su	, mmary of Receipts,"	line 5(i))			

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



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

SCHEDULE A(5)(j)

/						
/	Candidate	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Asset or Property Contributed					
			Taaaa			
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
		Otale	2.1			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address		1			
4	City	State	ZIP			
	Asset or Property Contributed					
_	Name		Date In-Kind Contribution Received			
	Street Address					
5						
	City	State	ZIP			
	Asset or Property Contributed					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(j))	1		,
$\leftarrow$			nedule A(5)(i) page of	•	1	<del>/</del> /



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

SCHEDULE A(6)

_	Source I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Donation Received				
	Street Address		-			
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
3	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
4	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated	Type of Item Donated				
-	Enter total apply if last name of each adula					
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts,"	line 6)			

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



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

	Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit	_		
	Name					
	Street Address					
3	City	State	ZIP	_		
	Services or Goods Provided on Credit  Date of Extension of Credit					
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
5	City	State	ZIP	_		
	Services or Goods Provided on Credit		Date of Extension of Credit	_		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	monu of Descinte "	line 7(a))			
	Transisi the total received this period to Sum	mary or Necelpis, I				

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



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

/	Creditor	Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
3	Street Address					
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	ımary of Receipts," l	ine 7(b))			

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Committee Information			Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	-		
	Committee Name		Payment Date			
	Street Address			-		
2	City	State	ZIP	_		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	_		
	Committee Name	<u> </u>	Payment Date			
	Street Address			_		
3	City	State	ZIP	-		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	_		
	Committee Name		Payment Date			
	Street Address			_		
4	City	State	ZIP	-		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	-		
			T			
	Committee Name		Payment Date			
_	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			
	Enter total only if last page of schedule (transfer the total received this period to "Sui	1				

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



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

_	Payor Ir	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	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 "Summary of Receipts," line 9)			l		

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



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/				I	l I	0
	Info	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		Date that Debt Accrued			
	Name					
	Street Address		1			
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address	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		Date that Debt Accrued	_		
	Name					
5	Street Address					
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts " I	ine 10)	- L		

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

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)

_	Source I	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Receipt Type Receipt Date					
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name		l			
	Street Address					
5	City	State	ZIP			
	Receipt Type	<u> </u>	Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts," li	I ine 12)	<u> </u>		

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



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

ī	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name	Disbursement Da	ate			
Street Address	<u> </u>	I			ı
City	State	ZIP			1
Type of Operating Expense Paid		pose? (PACs and Political Parties Only)	□ Cash □ Credit		ì
Name		ate			
Street Address					ı
City	State	ZIP			ı
Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Cash □ Credit		1
Name		Disbursement Date			
Street Address					1
City	State	ZIP			1
Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Cash □ Credit		1
Name	Disbursement Date				
Street Address					1
City	State	ZIP			ì
Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)			i
Name		ate			
Street Address					1
City	State	ZIP	□ Cash		l
Type of Operating Expense Paid	Non-Electoral Pur	pose? (PACs and Political Parties Only)	□ Credit		ı
	Name  Street Address  City  Type of Operating Expense Paid  Name  Street Address  City  Type of Operating Expense Paid  Name  Street Address  City  Type of Operating Expense Paid  Name  Street Address  City  Type of Operating Expense Paid  Name  Street Address  City  Type of Operating Expense Paid  Name  Street Address  City  Type of Operating Expense Paid  Name  Street Address  City  Type of Operating Expense Paid	Street Address  City State  Type of Operating Expense Paid Non-Electoral Pur  Name Disbursement Date  Street Address  City State  Type of Operating Expense Paid Non-Electoral Pur  Name Disbursement Date  Street Address  City State  Type of Operating Expense Paid Non-Electoral Pur  Name Disbursement Date  Street Address  City State  Type of Operating Expense Paid Non-Electoral Pur  Name Disbursement Date  Street Address  City State  Type of Operating Expense Paid Non-Electoral Pur  Name Disbursement Date  Street Address  City State  Type of Operating Expense Paid Non-Electoral Pur  Disbursement Date  Street Address  City State  Type of Operating Expense Paid Non-Electoral Pur  Disbursement Date  Street Address  Street Address	Street Address  City State ZIP  Type of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)  Name Disbursement Date  Street Address  City State ZIP  Type of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)  Name Disbursement Date  Street Address  City State ZIP  Type of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)  Name Disbursement Date  Street Address  City State ZIP  Non-Electoral Purpose? (PACs and Political Parties Only)  Name Disbursement Date  Street Address  City State ZIP  Type of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)  Name Disbursement Date  Street Address  City State ZIP  Type of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)  Disbursement Date  Street Address  City State ZIP  Name Disbursement Date	Disbursement Date	Reporting Period  Disbursement Date  Street Address  City State  Disbursement Date  Street Address  Disbursement Date  Street Address  Street Address  City State  Disbursement Date  City State  City State  Disbursement Date  City State  Disbursement Date  City State  City State  Disbursement Date  City State  City State State  City State St

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MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committee	e Recipient Infori	Candidate Committee Recipient Information						
	Committee Name			Contributed	Reporting Period	Election Cycle			
	Street Address								
1	City	State	ZIP	□ Cash					
	Committee ID Number	Date Contribution Made	1	☐ Credit					
	Committee Name								
	Street Address								
2	2 City	State	ZIP	□ Cash					
	Committee ID Number	Number Date Contribution Made							
	Committee Name								
3	Street Address								
J	City	State	ZIP	□ Cash					
	Committee ID Number Date Contribution Made			☐ Credit					
	Committee Name  Street Address								
4	1	Ctata	ZIP						
	City  Committee ID Number	State  Date Contribution Made	ZIF	☐ Cash☐ Credit					
	Committee Name	Date contribution wade							
	Street Address								
5	City	State ZIP							
	Committee ID Number	Date Contribution Made		□ Cash □ Credit					
	Enter total only if last page of schedule								
	(transfer the total disbursed this period to "Su	mmary of Disbursen	ments," line 2(a))						



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

_	Political Action Commi	ttee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address	dress				
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
	Committee Name					
2	Street Address		T			
	City	State  Date Contribution Made	ZIP	□ Cash □ Credit		
	Committee ID Number  Date Contribution Made  Committee Name			oroni		
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			□ Credit		
	Committee Name Street Address					
4		State	ZIP			
	Committee ID Number	Date Contribution Made	ZIF	□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
L	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disbursen	nents," line 2(b))			
/	_	Sche	edule B(2)(b), page of	·		



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party	Recipient Informati	ion	Amount	Cumulative Amount this	Cumulative Amount this
	Committee Name	Contributed	Reporting Period	Election Cycle		
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash	☐ Cash☐ Credit	
	Committee Name					
3 –	Street Address					
	Ct.	State	ZIP			
	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name	<b>-</b>				
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	0					
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
_	Enter total only if last page of schedu (transfer the total disbursed this period to "	lo				



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partner	ship Recipient Informa	tion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name						
	Street Address	Street Address					
1	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Mad	le	□ Credit			
	Partnership Name	l l					
	Street Address						
2	City	State	ZIP	□ Cash			
	Corporation Commission File Number	Date Contribution Mad	de	□ Credit	☐ Cash☐ Credit☐		
	Partnership Name						
3 -	Street Address						
	City	State	ZIP	T 0 l			
	Corporation Commission File Number	Date Contribution Mad	de	□ Cash □ Credit			
	Partnership Name						
	Street Address	Street Address					
4	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Mad	de	□ Cash □ Credit			
	Partnership Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Mad	de	□ Cash □ Credit			
	Enter total only if last page of sc (transfer the total disbursed this perio	hedule		l			



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	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	Date Contribution	Made	□ Cash □ Credit	☐ 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 scl (transfer the total disbursed this perio	l nedule				



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

/		Labor Organizat	on Recipient Inform	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	L	Labor Organization Name					
	S	itreet Address					
1	1 0	Sity	State	ZIP	□ Cash		
	C	corporation Commission File Number	Date Contribution Made		□ Credit		
	L	abor Organization Name	1				
		bet Address					
2	2 0	Sity	State	ZIP	□ Cash		
	C	Corporation Commission File Number	on Commission File Number  Date Contribution Made				
	L	abor Organization Name					
		treet Address					
3	3 0	city	State	ZIP	□ Cash		
	C	Corporation Commission File Number	Date Contribution Made	1	□ Credit		
	L	abor Organization Name					
	S	treet Address					
4	1 0	Sity	State	ZIP	□ Cash		
	C	Corporation Commission File Number	Date Contribution Made	1	□ Credit		
	L	abor Organization Name	1				
		Street Address					
5	5 0	Sity	State	ZIP	□ Cash		
	C	Corporation Commission File Number  Date Contribution Made		□ Credit			
	E (t	inter total only if last page of scheduransfer the total disbursed this period to	e Summary of Disburser	ments," line 2(f))	I .		



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

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

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LOANS MADE: SCHEDULE B(3)(a)

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

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

/	Guarantor	- Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	treet Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	<u> </u>	-		
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
_	Enter total only if last page of schedule (transfer the total received this period to "Sum					

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



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

				I	j I	
	Borrower	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	1			
	Borrower Name		Date Forgiveness Made			
	Street Address		l			
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	1			
	Borrower Name		Date Forgiveness Made			
	Street Address	l				
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	L	Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	l			
	Borrower Name	l	Date Forgiveness Made			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disburses	nents " line 3(c\\	<u> </u>		

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

Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP	-		
Original Amount Borrowed	Amount Still Outstanding		-		
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding		_		
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding				
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
	Amount Still Outstanding		_		
	Amount Still Outstanding				
Lender Name		Date Repayment Made			
Street Address					
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	mmary of Disbursen	nents," line 3(d))	•		
	Lender Name  Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Original Amount Borrowed	Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstanding  Enter total only if last page of schedule	Lender Name Date Repayment Made  Street Address  City State ZIP  Original Amount Borrowed Amount Still Outstanding  Lender Name Date Repayment Made  Street Address  City State ZIP  Original Amount Borrowed Amount Still Outstanding  Lender Name Date Repayment Made  Street Address  City State ZIP  Original Amount Borrowed Amount Still Outstanding  Lender Name Date Repayment Made  Street Address  City State ZIP  Original Amount Borrowed Amount Still Outstanding  Lender Name Date Repayment Made  Street Address  City State ZIP  Original Amount Borrowed Amount Still Outstanding  Lender Name Date Repayment Made  Street Address  City State ZIP  Original Amount Borrowed Amount Still Outstanding  Lender Name Date Repayment Made	Lender Name  Caly  State  ZiP  Original Amount Borrowed  Amount Sill Outstanding  Lender Name  Date Repayment Made  State  ZiP  Original Amount Borrowed  Amount Sill Outstanding  Lender Name  Date Repayment Made  ZiP  Original Amount Borrowed  Amount Sill Outstanding  Lender Name  Date Repayment Made  State  ZiP  Original Amount Borrowed  Amount Sill Outstanding  Lender Name  Date Repayment Made  ZiP  Original Amount Borrowed  Amount Sill Outstanding  Lender Name  Date Repayment Mede  State Address  City  State  ZiP  Original Amount Borrowed  Amount Sill Outstanding  Lender Name  Date Repayment Mede  State Address  ZiP  Original Amount Borrowed  Amount Sill Outstanding  Lender Name  Date Repayment Mede	Lender Name Date Repayment Mode  Cry State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address City State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Cry State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Cry State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Sever Address Cry State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Sever Address Cry State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Cry State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Cry State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Cry State State ZP Criginal Amount Berrowed Amount State Cate Repayment Mode Sever Address Cry State State ZP Criginal Amount State Cate State Cate State Cate State Cate State

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ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued		. 0	•
	Street Address			1		
1	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Interest Accrued			
	Street Address			-		
3	City	State	ZIP	-		
	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 "Sur	nmary of Disbursen	nents," line 3(e))			

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REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Red	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
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			
	0					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor	L	Date Rebate/Refund Made			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
_	Enter total only if last page of sche	edule				
	(transfer the total disbursed this period	to "Summary of Disburs	sements," line 4)			

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IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committe	e Recipient Inforr	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	I 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					
	City					
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Action Comm	nittee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made	_		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	ummary of Disburser	ments," line 5(b))			

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IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

Committee Name   Street Address				
Street Address  1 City State ZIP  Committee ID Number Date In-Kind Contribution Made  2 City State ZIP  Committee ID Number Date In-Kind Contribution Made  3 City State ZIP  Committee Name  5 Street Address  3 City State ZIP  Committee ID Number Date In-Kind Contribution Made  4 City State ZIP  Committee Name  5 Street Address  4 City State ZIP  Committee Name  5 Street Address  5 City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  5 Street Address  5 City State ZIP  Committee Name  5 Street Address		Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1 City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  2 City State ZIP  Committee Name  Street Address  3 City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  4 City State ZIP  Committee Name  Street Address  4 City State ZIP  Committee Name  Street Address  5 City State ZIP  Committee Name  Street Address  5 City State ZIP  Committee Name  Street Address  5 City State ZIP  Committee ID Number Date In-Kind Contribution Made	Committee Name			-
Committee ID Number  Committee Name  Street Address  City  Committee Name  Street Address  City  State  ZIP  Committee Name  Street Address  City  State  ZIP  Committee ID Number  Date In-Kind Contribution Made   Committee Name  Street Address  City  State  ZIP  Committee ID Number  Date In-Kind Contribution Made   Committee Name  Street Address  City  State  ZIP  Committee Name  Street Address  Street Address				
Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Street Address  Street Address  City State ZIP  Committee Name  Street Address  Street Address				
Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  Gity State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  Gity State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made				
City State   ZIP   Committee ID Number   Date In-Kind Contribution Made    Committee Name   Street Address    City   State   ZIP   Committee ID Number   Date In-Kind Contribution Made    Committee ID Number   Date In-Kind Contribution Made    Committee Name   Street Address    City   State   ZIP   Committee ID Number   Date In-Kind Contribution Made    Committee ID Number   Date In-Kind Contribution Made    Committee ID Number   Date In-Kind Contribution Made    Committee Name   Street Address    City   State   ZIP    Committee Name   Street Address    City   State   ZIP    Committee Name    Committee Name    Committee Name   Street Address    City   State   ZIP    Committee Name   Committee Na				
Committee ID Number  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made	ess			
Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made				
Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Street Address  Street Address  City State ZIP  Committee Name  Street Address  Street Address				
City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP	Committee Name			
Committee ID Number  Date In-Kind Contribution Made  Committee Name  Street Address  City  State  ZIP  Committee ID Number  Date In-Kind Contribution Made  ZIP  Committee ID Number  Date In-Kind Contribution Made  Committee Name  Street Address  City  State  ZIP				
Committee Name  Street Address  4  City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  5  City State ZIP				
Street Address  4 City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  5 City State ZIP				
City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP				
City State ZIP  Committee ID Number Date In-Kind Contribution Made  Committee Name  Street Address  City State ZIP				
Committee Name  Street Address  City State ZIP				
Street Address  City State ZIP		_		
5 City State ZIP				
City State ZIP				
Date III-Niliu Continuution Made				
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 5				

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/						
	Partnership	Recipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name					
	Street Address			_		
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name					
	Street Address					
3	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
	Partnership Name					
	Street Address			_		
4	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
	Partnership Name					
	Street Address			_		
5	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedu	ıle				
	Enter total only if last page of schedu (transfer the total disbursed this period to	'Summary of Disburser	nents," line 5(d))			

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

Corporation	n / LLC Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
oration/LLC Name			,		
st Address					
	State	ZIP			
oration Commission File Number	Date In-Kind Contributi	ion Made			
oration/LLC Name					
Street Address					
	State	ZIP			
oration Commission File Number	Date In-Kind Contribut	ion Made			
Corporation/LLC Name					
et Address					
	State	ZIP			
oration Commission File Number	Date In-Kind Contribut	tion Made			
oration/LLC Name					
et Address					
	State	ZIP			
oration Commission File Number	Date In-Kind Contribut	ion Made			
Corporation/LLC Name					
et Address					
	State	ZIP			
oration Commission File Number	Date In-Kind Contribut	tion Made			
ora	tion Commission File Number	tion Commission File Number  Date In-Kind Contribut  total only if last page of schedule	State ZIP  tion Commission File Number Date In-Kind Contribution Made	tion Commission File Number  Date In-Kind Contribution Made  total only if last page of schedule	tion Commission File Number  Date In-Kind Contribution Made  total only if last page of schedule

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organizatio	n Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					·
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
	Labor Organization Name					
	Street Address			1		
2	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
	Labor Organization Name					
	Street Address			_		
3	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
	Labor Organization Name					
	Street Address			_		
4		Tau	I	_		
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name					
_	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	ummary of Disburser	ments." line 5(f))	ı		

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



INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

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

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



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure	Recipient Info	ormation	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/Ye	ar	_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			_		
2	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/Yea	ar	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP	-		
•	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s)	Opposed (including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Yea	ar	_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
4	City	State	ZIP	-		
•	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)		_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Yea	ar	_ □ Credit		
_	Enter total only if last page of schedu					

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



RECALL EXPENDITURES MADE: SCHEDULE B(8)

/	Expenditure I	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			_		
1	City	State	ZIP	_		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			. Li Gredit		
	Recipient Name	ı	Mode of Advertising (TV, mail, etc)			
	Street Address			=		
3	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ Li Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		I	-		
4	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "S	L e Summary of Disbursen	nents," line 8)	1		

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



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address		<u> </u>			
1	City	State	ZIP			
	Type of Benefit Provided	<u> </u>	<u> </u>			
	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	l	I			
	Notes:					
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	e ummary of Disbursen	nents," line 9)			

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

COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

_	Recipient Co	ommittee Informatio	n	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 Expense	(if applicable)	□ Credit		
	Committee Name	1	Payment Date			
	Street Address		1			
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address	1				
3	City	State	ZIP	II Cook		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address		1			
4	City	State	ZIP	II Cook		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address		1			
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
_	Enter total only if last page of schedu	e Summon, of Dishuss	mente " line 40)			
	(transfer the total disbursed this period to "	Summary of Disburser	ments," line 10)			

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



REIMBURSEMENTS MADE: SCHEDULE B(11)

	Recipi	ent Information	1	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	1	Reimbursement Date	□ Credit		
	Name		•			
	Street Address					
2	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	□ Casii		
	Name	Name				
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
ļ	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Reimbursed Reimbursement Date			□ Cash □ Credit		
_	Enter total only if last page of schedu					



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt In	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed	Date that Debt Accrued				
	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	l	Date that Debt Accrued			
	Enter total only if last page of schedule (transfer the total received this period to "Sum			I		
	(transfer the total received this period to "Sum	mary of Receipts," I	ine 12)			

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

COMMITTEE ID NUMBER

## TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

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

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



MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

		Recipient Information	1	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			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type	I	Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
4	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Enter total only if last page (transfer the total disbursed this	of schedule				

Schedule B(14), page\_\_\_\_ of \_\_\_\_

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