

COMMITTEE INFORMATION (required):

	Committee Information:	Committee Name:	-
CAN	IDIDATE INFORMATION (only if filin	g as a candidate comr	mittee):
	Office Sought:	☐ Statewide Office:	
		☐ County Office:	
	Cumulative Report:		
	☐ Check here if this is the car	ndidate committee's fire	st, cumulative report for the election cycle. Also select appropriate Reporting Period below.
	Cumulative reporting period s	tart date (which supers	sedes the start date for the Reporting Period selected below):

REPORTI

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

FINANCIAL SUMMARY (required):

	Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a)	Committee value at the beginning of this reporting period (i.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 <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must be co	mpleted, but only this co	ver page need be filed.



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.

	Deuxler Hater	
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

SUMMARY OF RECEIPTS (Schedule A):

,			
	Receipts	Cash	Equity
1.	Monetary Contributions Received		
-	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
	(c) Candidate Committees		
-	(d) Political Action Committees		
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Monies (Candidate Committees Only)		
	(j) Monetary Contributions Subtotal (add 1(a) through 1(i))		
-	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))		
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) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
	(c) Candidate Committees		
	(d) Political Action Committees		
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12.	Miscellaneous Receipts		
13.	Total Receipts (cash: add 1(l), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)		



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)		
	(j) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made Support Provided to Porty Naminoso (Pulling Parks) October		
9.	Support Provided to Party Nominees (Political Parties Only)		
11.	Joint Fundraising / Shared Expense Payments Made 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	1	
15.	Aggregate of Disbursements - \$250 or Less		
	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)		
\			_



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

SCHEDULE A(1)(a)

	Individual Conti	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
1	Street Address			-		
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	reunc		Date continuation received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP	-		
				-		
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			-		
4	City	State	ZIP	-		
	Occupation	Employer		_		
	Name		Date Contribution Received			
			-			
_	Street Address					
5	City	State	ZIP			
	Occupation	Employer	•			
	Enter total only if last page of schedule	l		l		
1	(transfer the total received this period to "Summary of Receipts,"	line 1(a))			l l	

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

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

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from Individuals - \$50 or Less		
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 \$50 are listed on Schedule A(1)(a), do not include them on Schedule A(1)(b).



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

/	Candidate Committee	e Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
1	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
3	Street Address					
J	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed	_		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	eu			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts					

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

/		n Committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Street Address					
3 3 4 5 5 6						
1	City	State	ZIP			
	Committee ID Number	Date Contribution Rec	eived			
	Committee Name	l .				
	Street Address					
2	City	State	ZIP			
	Committee ID Number Date Contribution Received					
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Rec	ceived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Rec	Date Contribution Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
5	Committee ID Number	Date Contribution Rec	ceived			

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

/						
	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	_		
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u> </u> ed			
	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 Receive	ed			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts."	' line 1(e))				

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

/						
	Partnersh	ip Contributor Informa	tion	Amount Receive	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Reco	eived			
	Partnership Name					
	Street Address					
3						
	Corporation Commission File Number	Date Contribution Reco				
		Date Continuation News				
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Number Date Contribution Received				
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Reco	eived			
_	Enter total only if last page of sch	edule				

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

	Corporation / LL	.C Contributor Inforr	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					·
	Street Address					
1	City	State	ZIP			
	Companies Commission File Number	Data Castribution Bassin				
	Corporation Commission File Number	Date Contribution Receiv	red			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Recei	ved	_		
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Recei	ved			
	Corporation/LLC Name					
	Street Address			_		
4						
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Recei	ved			
	Corporation/LLC Name					
	Street Address			-		
5	01	la	Tain	_		
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Recei	ved			
	Enter total only if last page of schedu					
、└─	(transfer the total received this period to "Summary of Received this period this period the summary of Received this period t	eipts," line 1(g))				

Schedule A(1)(g), page ____ of ___



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

	Labor Organization	Contributor Inform	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	ed			
	Labor Organization Name	1				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name	1				
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	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 "Summary of Receipts.	" line 1(h))				

Schedule A(1)(h), page ____ of ___



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

/					Cumulative	Cumulative
,	Candidate	Information		Amount Received	Amount this Reporting Period	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	I	Date Contribution Received			
	Street Address			_		
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP	_		
	Oity	State	Z.II			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address		1			
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts,"	line 1(i))				

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

,				ı	,	
	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			·
	Street Address		- L			
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			
	Street Address					
5	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	lino 1/k))				

Schedule A(1)(k), 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	L				
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address	I				
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 "Summary of Receipts,"	line 2(a))				
	1				1	

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		Date Forgiveness Received			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	l			
	Lender Name	I	Date Forgiveness Received			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding		-		
	Lender Name		Date Forgiveness Received			
	Street Address			-		
4	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		-		
	Lender Name	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 "Summary of Receipts."					

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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	1	City	State	ZIP			
	-	Original Amount Borrowed	Amount Still Outstanding	L			
		Borrower Name		Date Repayment Received			
	-	Street Address					
2	2	City	State	ZIP			
	-	Original Amount Borrowed	Amount Still Outstanding				
		Borrower Name		Date Repayment Received			
		Street Address					
3	3	City	State	ZIP			
	F	Original Amount Borrowed	Amount Still Outstanding				
		Borrower Name		Date Repayment Received			
	-	Street Address					
4	1	City	State	ZIP			
	-	Original Amount Borrowed	Amount Still Outstanding				
-		Borrower Name		Date Repayment Received			
	-	Street Address					
5	5	City	State	ZIP			
	-	Original Amount Borrowed	Amount Still Outstanding				
L	 	Enter total only if last page of schedule					
L		(transfer the total received this period to "Summary of Receipts."	line 2(c))				

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					
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		<u> </u>			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Enter total only if last page of schedule	F Q(A)				
	(transfer the total received this period to "Summary of Receipts,"	IIIIE Z(U))				

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

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

	Payor Ir	nformation		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/Rebate	9			
	Payor Name	I	Date Rebate/Refund Received			
	Street Address		<u> </u>			
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Payor Name	L	Date Rebate/Refund Received			
	Street Address		<u> </u>			
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Payor Name	l	Date Rebate/Refund Received			
	Street Address		<u> </u>			
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Payor Name		Date Rebate/Refund Received			
	Street Address		<u> </u>			
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts."	line 3)				

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 INDIVIDUALS - MORE THAN \$50 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	l	-		
	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		-		
	Enter total only if last page of schedule					
l	(transfer the total received this period to "Summary of Receipts,"	line 5(a))				

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Schedule A(5), page ____ of

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$50 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

^{*}If contributions of more than \$50 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

Schedule A(5)(b), page ____ of ____



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

	Candidate Committee	e 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 In-Kind Contribution	Received			
	Committee Name	l				
	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			
\vdash	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
_	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts,"					

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

/	Political Action (Committee Contributor	r Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ution Received			
	Committee Name	Committee Name				
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Received			
	Committee Name					
ſ	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ution Received			
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	Date In-Kind Contribution Received			
	Committee Name					
	Street Address					
5	City	State	ZIP		-	
		Date In-Kind Contrib				

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Political Party Co	ntributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name				reporting r enou	Liection Cycle
	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	ı				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 5(a))		l		

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

/						
	Partnership Con	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	y State ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received			
_	Enter total only if last page of schedule					

Schedule A(5)(f), page ____ of ____



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

Corporation / LLC C	Contributor Inform			Cumulathia	\	
Comporation/LLC Name		ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Corporation/LEC Name	Corporation/LLC Name					
Street Address						
City	State	ZIP				
Corporation Commission File Number	Date In-Kind Contribution I	Received				
Corporation/LLC Name						
Street Address						
City	State	ZIP				
Corporation Commission File Number	Date In-Kind Contribution	Received				
Corporation/LLC Name						
Street Address						
City	State	ZIP				
Corporation Commission File Number	Date In-Kind Contribution	Received				
Corporation/LLC Name						
Street Address						
City	State	ZIP				
Corporation Commission File Number	ommission File Number Date In-Kind Contribution Received					
Corporation/LLC Name						
Street Address						
City	State	ZIP				
Corporation Commission File Number	Date In-Kind Contribution	Received				
Enter total only if last page of schedule	l					
	Corporation Commission File Number Corporation/LLC Name Street Address City Corporation/LLC Name Street Address City Corporation Commission File Number Corporation Commission File Number Corporation/LLC Name Street Address City Corporation Commission File Number Corporation/LLC Name Street Address City Corporation Commission File Number Corporation Commission File Number Corporation Commission File Number Corporation Commission File Number Enter total only if last page of schedule	Corporation Commission File Number Date In-Kind Contribution Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Corporation/LLC Name Street Address City State Corporation/LLC Name Date In-Kind Contribution Corporation/LLC Name Street Address City State Corporation/LLC Name	Corporation/LLC Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation/LLC Name Street Address City State ZIP Corporation/LLC Name Date In-Kind Contribution Received Corporation/LLC Name Date In-Kind Contribution Received Corporation/LLC Name Corporation/LLC Name Date In-Kind Contribution Received	Corporation Commission File Number Date In-Kind Contribution Received Corporation LLC Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received	Corporation Commission File Number Date In-Kind Contribution Received Corporation LLC Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received City State City State City State City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received City State ZIP Corporation Commission File Number Date In-Kind Contribution Received City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received	

Schedule A(5)(g), page ____ of ___



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

/	Labor Organization	Contributor Inform	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 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	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				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts.					

Schedule A(5)(h), page ____ of ___



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

SCHEDULE A(5)(i)

_	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Asset or Property Contributed					
	Asset of Froperty Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Asset or Property Contributed					
	Name					
	Name	Date In-Kind Contribution Received				
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address			-		
4						
	City	State	ZIP			
	Asset or Property Contributed	Property Contributed				
	Name		Date In-Kind Contribution Received			
	Street Address	street Address				
5	City					
	Only	State	ZIP			
	sset or Property Contributed					
	Enter total only if last page of schedule		<u> </u>			
	(transfer the total received this period to "Summary of Receipts,"	line 5(i))				



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		<u> </u>			
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		<u> </u>			
4	City	State	ZIP			
	Type of Item Donated	<u> </u>	1			
	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated	<u> </u>				
	Enter total only if last page of schedule			<u> </u>		
ackslash	(transfer the total received this period to "Summary of Receipts,"	line 5(e))				

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



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

Creditor	nformation		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ne					
eet Address					
/	State	ZIP			
vices or Goods Provided on Credit		Date of Extension of Credit			
me					
eet Address					
,	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
ne					
Street Address					
ı	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
eet Address					
1	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
1	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
/ /ice	es or Goods Provided on Credit er total only if last page of schedule	State es or Goods Provided on Credit	State ZIP es or Goods Provided on Credit Date of Extension of Credit er total only if last page of schedule	State ZIP Date of Extension of Credit Principles or Goods Provided on Credit Date of Extension of Credit	State ZIP Date of Extension of Credit Per total only if last page of schedule

Schedule A(7)(a), page___ of ___



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Creditor I	nformation		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					
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address	Street Address				
3		City Custo. 7ID				
	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	Services or Goods Originally Provided on Credit				
	Nome					
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
H	Enter total only if last page of schedule	nter total only if last page of schedule				
, L	(transfer the total received this period to "Summary of Receipts."	line 7(b))				

Schedule A(7)(b), page ____ of ___



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 Cycle
	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	<u> </u>	Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
	Committee Name		Payment Date			
-	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)			
	Enter total only if last page of sche					

Schedule A(8), page ____ of ___



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

Payment Amount Mark Reporting Period Name Stroot Address or Goods Purchased Payment Date Services or Goods Purchased Payment Date Services or Goods Purchased Payment Date Payment Date Total Payment Date Services or Goods Purchased Payment Date Payment Date							
Street Address		Payor I	nformation		Payment Amount	Amount this	Cumulative Amount this
1 City State		Name				Reporting Period	Election Cycle
1 City State		Street Address					
Services or Goods Purchased Payment Date Name Street Address 2 City Services or Goods Purchased Payment Date Name Sized Address 3 City State ZiP Services or Goods Purchased Payment Date Name Sized Address 4 City State ZiP Sized Address 5 Sized Address 4 City State ZiP Sized Address 5 Sized Address 5 Sized Address 4 Sized Address 5 Sized Address 5 Sized Address 5 Sized Address 5 Sized Address							
Name Sitest Address 2 Dily State ZIP Services or Goods Purchased Payment Date Street Address 3 Dily State ZIP Services or Goods Purchased Payment Date Name Sitest Address 4 Dily State ZIP Services or Goods Purchased Payment Date Name Sitest Address 4 Dily State ZIP Services or Goods Purchased Payment Date Name Sitest Address 4 Dily State ZIP Services or Goods Purchased Payment Date		City	State	ZIP			
Street Address		Services or Goods Purchased	<u>l</u>	Payment Date			
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 Street Address 4 City State ZIP Services or Goods Purchased Payment Date Name Street Address 5 Services or Goods Purchased Payment Date		Name					
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 4 City State ZIP Services or Goods Purchased Payment Date		Street Address			_		
Services or Goods Purchased Payment Date Name Street Address ZIP	2						
Name Street Address Ty Services or Goods Purchased Payment Date Name Street Address City Street Address Payment Date Payment Date Payment Date	_	City	State	ZIP			
Street Address City State ZIP Services or Goods Purchased Payment Date Name Street Address City State ZIP Street Address Family State ZIP Services or Goods Purchased Payment Date		Jervices or Goods Purchased		Payment Date	_		
Services or Goods Purchased Payment Date		Name	ame				
Services or Goods Purchased Payment Date Name Street Address 4 City State ZIP Services or Goods Purchased Payment Date Name Street Address Fayment Date		Street Address			_		
Services or Goods Purchased Payment Date Name Street Address 4 City State ZIP Services or Goods Purchased Payment Date Name Street Address Fayment Date	3		State 71D				
Name Street Address 4 City State ZIP Services or Goods Purchased Payment Date Name Street Address		City	State	ZIP			
Street Address 4 City State ZIP Services or Goods Purchased Payment Date Name Street Address		Services or Goods Purchased Payment Date					
A City State ZIP Services or Goods Purchased Payment Date Name Street Address		Name					
City State ZIP Services or Goods Purchased Payment Date Name Street Address		Street Address					
Services or Goods Purchased Payment Date Name Street Address	4	City	State	ZIP			
Name Street Address			Cidio				
Street Address		Services or Goods Purchased Payment Date					
		Name	Name				
5 City State ZIP		Street Address					
1-17	5	sity State		ZIP	_		
Services or Goods Purchased Payment Date		Services or Goods Purchased		Payment Date			
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receiots." line 9)			line (I)				

Schedule A(9), page ____ of ___



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/	Info	rmation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
1	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_	Name					
3	Street Address					
	City State		ZIP			
		Otato	Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
5	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed	<u> </u>	Date that Debt Accrued			
_	Enter total only if last page of schedule					

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)

/				ı	1	
	Source	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name	Name				
-	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
5	City	State	ZIP			
	Receipt Type		Receipt Date			

Schedule A(12), page ____ of ___



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	F	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursement Date				
	Street Address					
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose	e? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
2	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose	e? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address	Street Address				
3	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose	e? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date				
	Street Address					
5	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	e? (PACs and Political Parties Only)	□ Credit		
	Enter total only if last page of schedule					

Schedule B(1), page ____ of ___



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate Committee	e Recipient Inform	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	Street Address				
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
-	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
3	Street Address					
	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address	Street Address				
4	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name	1				
	Street Address					
5	City	State	ZIP	□ Cash □ Credit		
	Committee ID Number	Committee ID Number Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburse	ements," line 2(a))				
		Sche	edule B(2)(a), page of	f		



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/		Committee Recipient Inf	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
	Committee Name					
	Street Address	Street Address				
2	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		□ Casii		
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	Date Contribution Made			
	Committee Name					
	Street Address	Street Address				
4	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
	Committee Name	I				
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
	Enter total only if last page of sche					
\	\		edule B(2)(b), page			/



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Poli	tical Party Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
1	Street Address					
	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Mad	e	□ Credit		
	Committee Name	Committee Name				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Mad	de	☐ Cash☐ Credit		
	Committee Name	Committee Name				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Mad	de	□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Mad	de	□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	State ZIP			
	Committee ID Number	Date Contribution Mad	de	☐ Cash☐ Credit		
	Enter total only if last page					



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partner	ship Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution M	/lade	☐ Credit		
	Partnership Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution !	Made	☐ Credit		
	Partnership Name					
۱ -	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution I	Made	□ Credit		
	Partnership Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	□ Credit		
	Partnership Name	1				
	Street Address					
	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution N	I Made	□ Casn		
_	Enter total only if last page of sc	hedule				



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	Corporation / LLC Recipient Information			Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	de	□ Credit		
	Corporation/LLC Name	Corporation/LLC Name				
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	□ Credit	☐ Credit	
	Corporation/LLC Name	l				
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	□ Credit		
	Corporation/LLC Name	-				
	Street Address	Street Address				
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	□ Credit		
	Corporation/LLC Name	l				
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	ade	□ Credit		
	Enter total only if last page of sch	nedule		<u> </u>		



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

/	lahan Onna	nination Desirient Information	Amount	Cumulative	Cumulative
	Labor Orga	nization Recipient Information	Contributor	Amount this Reporting Period	Amount this Election Cycle
	Labor Organization Name				
	Street Address				
1	City	State ZIP			
	City	State	□ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		
	Labor Organization Name				
	Street Address				
2	City	State ZIP			
	Corporation Commission File Number	Date Contribution Made	☐ Cash☐ Credit		
			2 0.00		
	Labor Organization Name				
	Street Address				
3		City State ZIP			
	City	State	☐ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		
	Labor Organization Name				
	Street Address				
4	City	State ZIP			
	Corporation Commission File Number	Date Contribution Made	☐ Cash☐ Credit		
_	Labor Organization Name				
	Street Address				
5	City				
	City	State ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		
	Futuritatel and if last name of an	hadula			
	Enter total only if last page of sc (transfer the total disbursed this period to "Summan				

Schedule B(2)(f), page ____ of ___



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					
5	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburse	ments," line 2(h))		<u> </u>		

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



LOANS MADE: SCHEDULE B(3)(a)

/	Borrower	Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	L			
	Borrower Name	l				
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made		-		
	Borrower Name					
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	L	7		
	Borrower Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	l			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts."	line 3)				

Schedule B(3)(a), page ____ of ____



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	Street Address					
1	City	State	ZIP				
	Borrower Name	Date Loan Guaranteed	1				
	Guarantor Name						
	Street Address						
2							
	City	State	ZIP				
	Borrower Name	Date Loan Guarantee	d				
	Guarantor Name	Guarantor Name					
	Street Address						
	City	State	ZIP				
	Borrower Name	Date Loan Guarantee	d				
	Guarantor Name						
	Street Address	Street Address					
1	City	State	ZIP				
	Borrower Name	Date Loan Guarantee	d				
_	Guarantor Name						
_	Street Address						
)	City	State	ZIP				
	Borrower Name	Date Loan Guarantee	d				
-	Enter total only if last page of	schedule					
_	(transfer the total received this period to "Sumn	narv of Receipts." line 3(b))					

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



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

			1	i i	
Borrower	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding	<u> </u>			
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding		-		
Borrower Name		Date Forgiveness Made			
Street Address	Street Address				
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
	Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address	Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address	Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made	Borrower Name Date Forgiveness Made Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZiP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZiP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made	Borrover Name Date Forgiveness Made Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address City State ZIP Original Amount of Loan Amount Still Outstanding Sizes Address Siz

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

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

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



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

			1		
Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		Date Interest Accrued			-
Street Address		l	-		
City	State	ZIP	-		
Original Amount Borrowed	Amount Still Outstanding	<u> </u>	-		
Lender Name		Date Interest Accrued			
Street Address			-		
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding		_		
Lender Name		Date Interest Accrued			
Street Address			-		
City	State	ZIP	-		
Original Amount Borrowed	Amount Still Outstanding		-		
Lender Name		Date Interest Accrued			
Street Address			1		
City	State	ZIP	-		
Original Amount Borrowed	Amount Still Outstanding		_		
Lender Name		Date Interest Accrued			
Street Address			1		
City	State	ZIP	1		
Original Amount Borrowed	Amount Still Outstanding		-		
Enter total only if last name of schedule					
	Lender Name Street Address City Original Amount Borrowed Lender Name Street Address City 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	Lender Name City Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Date Interest Accrued Street Address	Certifical Manne Date Interest Accrued Street Address City State ZiP Chignal Amount Start Outstanding Chignal	Lender Information Account the Reporting Period Lender Name Date Interest Account Sition Address City State Zip Disgrat Amount Borrowed Date Interest Account Amount Stat Cutstanding Sition Address Zip Disgrat Amount Borrowed Date Interest Account Lender Name Date Interest Account District Address Zip Disgrat Amount Borrowed Date Interest Account Lender Name Date Interest Account District Address Zip Disgrat Amount Borrowed Date Interest Account Lender Name Date Interest Account District Address Zip Dispris Amount Borrowed Date Interest Account District Address Zip Dispris Amount Borrowed Date Interest Account District Address Zip Dispris Amount Borrowed Date Interest Account District Address Zip Dispris Amount Borrowed Date Interest Account Dispris Amount Borrowed Date Inte

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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	Street Address				
3	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	_		
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
5	City	State	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	_		
	Enter total only if last page of sche (transfer the total disbursed this period to "Summary of					

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IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	e Recipient Inforr	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this
Street Address				Troporting i enou	Election Cycle
		Committee Name			
City	Street Address				
	State	ZIP			
Committee ID Number	Date In-Kind Contribution I	Made			
Committee Name					
Street Address					
Dity	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 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 Committee Name Street Address Committee ID Number Committee Name Street Address City Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee Name Committee Name Committee ID Number Committee ID Number Committee ID Number Committee ID Number	Committee ID Number Date In-Kind Contribution Committee Name Street Address State Committee ID Number Date In-Kind Contribution Committee ID Number Date In-Kind Contribution Committee Name Street Address State Date In-Kind Contribution Committee Name Street Address State Date In-Kind Contribution Date In-Kind Contribution	Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Street ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Street Address State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Street Address Street Address Date In-Kind Contribution Made	State ZIP Committee ID Number Date In-Kind Contribution Made Street Address 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 Committee ID Number State ZIP Committee Name Committee Name Committee Name Committee Name Committee Name Committee Name Committee ID Number Date In-Kind Contribution Made Committee Name 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 Committee Name Committee Name 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 Commi	ttee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			-		
1	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	 Made	-		
	Committee Name	1				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made	-		
	Committee Name					
	Street Address			_		
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address	Street Address				
4	City	State	ZIP	_		
	Committee ID Number	Date In-Kind Contribution Made		_		
	Committee Name					
	Street Address			-		
5	City	State	ZIP	_		
	Committee ID Number	Date In-Kind Contribution	Made	_		
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disburse	ements," line 5(b))				

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party Re	ecipient Informati	on	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	1				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	1				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
	Committee Name	1				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule	ı				

Schedule B(5)(c), page ____ of ____



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	ship Recipient Inform	nation	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 Contri	bution Made			
	Partnership Name	Partnership Name				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			

Schedule B(5)(d), page ____ of ____



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	/ LLC Recipient Inf	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibution Made			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	Date In-Kind Contribution Made			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ribution Made			

Schedule B(5)(e), page ____ of ___



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organization	Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				reporting renea	Licotion Gyold
	Street Address					
1						
•	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	I Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	City	Sidile	ZIF			
	Corporation Commission File Number	Corporation Commission File Number Date In-Kind Contribution Made				
	Labor Organization Name	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 "Summary of Disburse	ments." line 5(f))				_

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INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

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

Schedule B(6), page ____ of ____



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/	Expenditure Recipient Information		rmation	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name	Recipient Name				
	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/Year		□ 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	ır	□ 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/Year		□ Credit		
	Enter total only if last page of schedu	le				

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

Schedule B(8), page ____ of ____



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Benefi	ted 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					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
2	City	State	ZIP	1		
	Type of Benefit Provided			-		
	Notes:			-		
	Candidate Name		Date Benefit Provided			
	Street Address			1		
3	City	State	ZIP			
	Type of Benefit Provided			-		
	Notes:			_		
	Candidate Name		Date Benefit Provided			
	Street Address			1		
4	City	State	ZIP	_		
7	Type of Benefit Provided			-		
	Notes:			_		
	Enter total only if last page of schedul (transfer the total disbursed this period to "Summary of Disbu					

Schedule B(9), page ____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient	Committee Informatio	n	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address		1			
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	☐ Cash☐ Credit		
	Committee Name Payment Date					
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
5	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	☐ Cash☐ Credit		



REIMBURSEMENTS MADE: SCHEDULE B(11)

_	Recipient 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	□ Cash		
	Services or Goods Reimbursed	,	Reimbursement Date	□ Credit		
	Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	□ Credit		
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
5	City	State	ZIP	□ Coch		
	Services or Goods Reimbursed	l .	Reimbursement Date	☐ Cash☐ Credit		

Schedule B(11), page ____ of ___



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

Debt Information			Amount	Cumulative Amount this 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					
ļ	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:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 14)		

Schedule A(13), page ____ of ____



MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

	Recipient	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					
	Street Address					
	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	□ Credit		
	Name		•			
	Street Address					
	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	□ Credit		
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
_	Enter total only if last page of schedule					

Schedule B(12), page ____ of ___