



**CITY OF TUCSON**  
**OFFICE OF THE CITY CLERK**  
**CAMPAIGN FINANCE ADMINISTRATION REPORT**  
**RECEIPT**



Primary Election – August 30, 2011  
 General Election – November 8, 2011

**NAME OF COMMITTEE FILING REPORT**  
 For Jenkins 4 Tucson Exploratory  
 (Committee Name)  
 for \_\_\_\_\_ who is a candidate for the office  
 (Name of Candidate, when applicable)  
 of \_\_\_\_\_ ID# 10-171-CT

**OR**

**CANDIDATE \$500 THRESHOLD EXCEPTION STATEMENT**  
 for \_\_\_\_\_  
 (Name of Candidate)  
 who is a Candidate for the Office of \_\_\_\_\_  
 ID# \_\_\_\_\_

**Check the report received:**

- Political Committee Statement Of Organization # \_\_\_\_\_  Original or
- Request for Public Matching Funds  Amended

**CAMPAIGN FINANCE REPORT:**

- a. Statement Establishing Eligibility
- b. Consolidated City/State Campaign Finance Report (Filed on or before January 31, 2011)
- c. Consolidated City/State Campaign Finance Report (Filed on or before June 30, 2011) ~~x~~
- d. Consolidated City/State Pre – Primary Report (Filed on or before August 18, 2011)
- e. City Post – Primary Report (Filed on or before September 9, 2011)
- f. State Post – Primary Election Report (Filed on or before September 29, 2011)
- g. Consolidated City/State Pre – General Election Report (Filed on or before October 27, 2011)
- h. City Post – General Election Report (Filed on or before November 18, 2011)
- i. State Post – General Election Report (Filed on or before December 8, 2011)
- Termination Statement (Final report must be included if not previously filed)
- Other \_\_\_\_\_  
 (If a No Activity Statement is being filed, indicate the reporting period)

OFFICE OF THE  
 CITY CLERK

11 JUL 11 PM 2:12

CITY OF TUCSON  
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\_\_\_\_\_  
 Signature Deputy City Clerk

Dated: 7/11/11



STATE OF ARIZONA  
POLITICAL COMMITTEE  
**TERMINATION STATEMENT**  
A.R.S. §16-914; A.R.S. § 16-915.01

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CITY OF TUCSON

OFFICE OF THE  
CITY CLERK

11 JUL 11 12:15

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1. Jenkins 4 Tucson Exploratory

Full Name of Committee

8280 E. Nicaragua Dr.

Address

Tucson

85730

520-256-7478

City

Zip Code

Phone #

mjenkins1205@msn.com

2.

Sponsoring Organization or Candidate and Office

E-Mail Address

Fax#

3. ID#

10-171-CT

SELECT THE BOXES THAT APPLY:

- A.  This is to certify that all contributions received and all expenditures made on behalf of the political committee indicated above have been reported as required by A.R.S. § 16-913. We further certify that the political committee will no longer receive any contributions or make any disbursements, that the committee has no outstanding debts or obligations, and that any surplus monies have been disposed of pursuant to A.R.S. § 16-915.01.

Please mark the appropriate statement below to indicate which campaign finance report states the disposition of any surplus monies.

The disposition of surplus monies was submitted on the campaign finance report filed on \_\_\_\_\_.

The disposition of surplus monies is reported on the attached campaign finance report.

- B.  This committee hereby terminates all activity within the jurisdiction of the City of Tucson and asserts that the committee intends to remain active in other jurisdictions and that the committee's remaining monies shall be used for activity in other jurisdictions.

- C.  This committee has transferred the committee's debts and obligations to a subsequent committee.

Please enter the full name and ID# of the committee into which debts and obligations have been transferred.

\_\_\_\_\_  
Name of Committee

\_\_\_\_\_  
ID#

We, Vincent Luongo and Wendy Reuter, certify under penalty

(Name of Chairman and Treasurer - Printed)

of perjury that this statement of termination pursuant to A. R. S. § 16-914 is true and complete.

[Signature]  
Signature of Chairman

[Signature]  
Signature of Treasurer



**POLITICAL COMMITTEE  
STATE OF ARIZONA  
CAMPAIGN FINANCE REPORT**

For Office Use Only  
**CITY OF TUCSON**

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CITY CLERK

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1. Jenkins 4 Tucson Exploratory Campaign  
Full Name of Committee  
8280-E, Nicaragua Dr  
Address  
Tucson 85730 520-256-7478  
City Zip Code Phone Number

2. Sponsoring Organization and Office  
Michael T. Jenkins City Council Ward 4  
Name of Candidate and Office Sought (if applicable)  
mjenkins1205@msn.com  
E-Mail Address Fax #

3A. ID#  
10-171-CT

**4. REPORTING PERIOD** (Please check appropriate box)

**FILING DEADLINE**

- January 31 Report – For Period of  
November 24, 2009 through December 31, 2010 ..... January 31, 2011
- June 30 Report – For Period of  
January 1, 2011 through May 31, 2011 ..... June 30, 2011
- Pre-Primary Election Report – For Period of  
June 1, 2011 through August 10, 2011 ..... August 18, 2011
- Post-Primary Election Report – For Period of  
August 11, 2011 through September 19, 2011 ..... September 29, 2011
- Pre-General Election Report – For Period of  
September 20, 2011 through October 19, 2011 ..... October 27, 2011
- Post-General Election Report – For Period of  
October 20, 2011 through November 28, 2011 ..... December 8, 2011
- January 31, 2011 Report – For Period of  
November 29, 2011 through December 31, 2012 ..... January 31, 2013

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		
5b Cash on Hand at Beginning of this Reporting Period	228.77	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)		
5d Subtotal (add Lines [b] and [c] for Column A and add lines [a] and [c] for Column B)		
6a Total Debts and Obligations from Previous Campaign Committee at beginning of the Election Period (or at time Statement of Organization was filed for the new committee) (Do not add or subtract this line from the other lines)		
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	228.77	
7. Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d - Column A must equal Column B)	-0-	

## DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Jenkins / Tulson Exploratory 3. ID# 10-171-CT  
 2. Report Covering Period From 1-1-11 / ~~6-30-11~~ Thru 5-31-11

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$25 (Total from Schedule A)		
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)		
(d) <b>Subtotal Contributions [add 4(a), 4(b) and 4(c)]</b>		
(e) Refund of Contributions (Total from Schedule F-2)		
(f) <b>Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]</b>		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) <b>Total loans [add 5(a) and 5(b)]</b>		
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. <b>TOTAL Receipts [add 4(f), 5(c), 6, and 7]</b>		
DISBURSEMENTS		
9. Expenditures for Operating Expenses (Total from Schedule D)		
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) <b>Total Loan Repayments [add 13(a) and 13(b)]</b>		
14. Transfers to other political committees (Total from Schedule D-6)	228.77	CITY OF TULSON RECEIVED
15. Any other disbursement (Total from Schedule D-7)		
16. <b>Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]</b>		
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. <b>TOTAL disbursements [ subtract line 17 from line 16]</b>	228.77	
19. Total Outstanding Debts owed by Reporting Candidate or Political Comm. (Schedule F-3)		
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.		
Type or Print Name of Treasurer	<u>Wendy Roub</u>	
Signature of Treasurer or Candidate or Designating Individual:		
		Date <u>7/1/11</u>

**CONTRIBUTIONS FROM INDIVIDUALS\***  
(More than \$25)\*

**SCHEDULE A**

1. Committee Name Jenkins 4 Tucson Exploratory 3. ID # 10-171-CT  
 2. Report Covering Period from 1-1-11/6-30-11 thru 5-31-11

4. CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE												
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR																
a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER				
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OCCUPATION	EMPLOYER															
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CITY	STATE	ZIP														
OCCUPATION	EMPLOYER															
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			<p align="center">OFFICE OF THE CITY CLERK</p>	<p align="center">11 JUL 11 10:21:45 CITY OF TUCSON RECEIVED</p>
LAST	FIRST	MI														
STREET ADDRESS																
CITY	STATE	ZIP														
OCCUPATION	EMPLOYER															
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER				
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e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER				
LAST	FIRST	MI														
STREET ADDRESS																
CITY	STATE	ZIP														
OCCUPATION	EMPLOYER															
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page line 4(a), Column A]															

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

CONTRIBUTIONS of \$25 or Less - AGGREGATE TOTAL\*

SCHEDULE A-1

1. Committee Name Jenkins 4 Tucson Exploratory 3. ID # 10-171-CT  
 2. Report Covering Period from 1-1-11 thru 5-31-11  
 4. Aggregate Total of Contributions of \$25 or Less

Description	Amount Received This Period		Cumulative Total This Campaign To Date
		OFFICE OF THE CITY CLERK 11 JUL 11 11:2:15	CITY OF TUCSON RECEIVED
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4 (b), Column A]		6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	

\*If contributions of \$25 or less are listed with contributors name and address on Schedule A, do not include them on this schedule.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name Jenkins 4/Tucson Exploratory

3. ID# 10-171-CT

2. Report Covering Period from: 1-1-11 thru 5-31-11

CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
ID#, NAME, AND ADDRESS OF CONTRIBUTOR AND DATE RECEIVED			
a.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
b.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
c.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
d.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
e.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
f.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
g.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
h.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
i.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B <small>[If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]</small>		

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 11 JUL 11 12:15  
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CANDIDATE LOANS

SCHEDULE C

1. Committee Name Jenkins 4 Tucson Exploratory  
 2. Report Covering Period from 1-1-11 thru 5-31-11

3. ID# 10-171-CT

4.	LOANS MADE OR GUARANTEED BY CANDIDATE	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS FROM WHOM RECEIVED			
a.	NAME, ADDRESS, CITY, STATE AND ZIP			
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE AND ZIP			
	DESCRIPTION			

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5. ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C  
 [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]

OTHER LOANS

SCHEDULE C1

1. Committee Name Jenkins 4 Tucson Exploratory  
 2. Report Covering Period from 1-1-11 thru 5-31-11

3. ID # 10-171-CT

4.	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
a.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
b.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#		11 JUL 11	CITY OF TUCSON RECEIVED
	DESCRIPTION	OFFICE OF THE CITY CLERK	11 JUL 11 12:15	
c.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
d.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(b), Column A]			

EXPENDITURES FOR OPERATING EXPENSES\*

SCHEDULE D

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID# 10-171-CT  
 3. Report Covering Period from: 1-1-11 thru 5-31-11

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]		

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\*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

INDEPENDENT EXPENDITURES \*

SCHEDULE D-1

1. Committee Name Jenkins 4 Tucson 3. ID# 10-171-CT  
 2. Report Covering Period from 1-1-11 thru 5-31-11

INDEPENDENT EXPENDITURES			DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED				
a.	NAME, ADDRESS, CITY, STATE AND ZIP			
	PURPOSE AND DESCRIPTION OF PURCHASE		Benefited <input type="checkbox"/>	Opposed <input type="checkbox"/>
	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION	
b.	NAME, ADDRESS, CITY, STATE AND ZIP			
	PURPOSE AND DESCRIPTION OF PURCHASE		Benefited <input type="checkbox"/>	Opposed <input type="checkbox"/>
	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION	
c.	NAME, ADDRESS, CITY, STATE AND ZIP			
	PURPOSE AND DESCRIPTION OF PURCHASE		Benefited <input type="checkbox"/>	Opposed <input type="checkbox"/>
	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page, Line 10, Column A]			

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\* SEE A.R.S. STATUTE 16-901(14)

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT

**LOANS MADE BY REPORTING COMMITTEE**

**SCHEDULE D-2**

1. Committee Name Jenkins 4 Tucson Exploratory  
 2. Report Covering Period from 1-1-11 thru 5-31-11

3. ID# 10-171-CT

4. LOANS MADE BY REPORTING COMMITTEE		DATE LOAN MADE	AMOUNT OF THE LOAN
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	OFFICE OF THE CITY CLERK JUL 11 12:15	CITY OF TUCSON RECEIVED
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 <small>[If last page of Schedule D-2, transfer total to Detailed Summary Page, Line 12, Column A]</small>			

OFFSETS TO OPERATING EXPENSES\*

SCHEDULE D-3

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID# 10-171-CT  
 3. Report Covering Period from: 1-1-11 thru 5-31-11

REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
a.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF REFUND	11 JUL 11 12:15 OFFICE OF THE CITY CLERK	CITY OF TUCSON RECEIVED
d.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF REFUND		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [If last page of Schedule D-3, transfer total to Detailed Summary Page, Line 17, Column A]			

\* Includes return of contributions made by reporting committee.

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID# 10-171-CT  
 3. Report Covering Period from: 1-1-11 thru 4-30-11 5-31-11

4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE AND ZIP		
b.	NAME, ADDRESS, CITY, STATE AND ZIP		
c.	NAME, ADDRESS, CITY, STATE AND ZIP		
d.	NAME, ADDRESS, CITY, STATE AND ZIP	OFFICE OF THE CITY CLERK	CITY OF TUCSON RECEIVED
e.	NAME, ADDRESS, CITY, STATE AND ZIP		
f.	NAME, ADDRESS, CITY, STATE AND ZIP		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4		
[Transfer total to Detailed Summary Page, Line 13(a), Column A]			

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID# 10-171-CT  
 3. Report Covering Period from: 1-1-11 thru 5-31-11

4. REPAYMENT OF ALL OTHER LOANS		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	11 JUL 11 OFFICE OF THE CITY CLERK	CITY OF TUCSON RECEIVED
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	PI2:15	
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID# 10-171-CT  
 3. Report Covering Period from 1-1-11 thru 5-31-11

4.	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Jenkins 4 Tucson Campaign</u> <u>PO Box 19021</u> <u>Tucson, AZ 85731</u>	<u>1-20-11</u>	<u>228.77</u>
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	OFFICE OF THE CITY CLERK	CITY OF TUCSON RECEIVED 11 JUN 11 02:15
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [If last page of Schedule D-6, transfer total to Detailed Summary Page, Line 14, Column A]		

ANY OTHER DISBURSEMENTS

SCHEDULE D-7

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID# 10-171-CT  
 3. Report Covering Period from 1-1-11 thru 6-30-11 5-31-11

4. ANY OTHER DISBURSEMENTS		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION	OFFICE OF THE CITY CLERK JUL 11 9:2:15	CITY OF TUCSON RECEIVED
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page, Line 15, Column A]			

IN-KIND CONTRIBUTIONS AND EXPENDITURES

SCHEDULE E

1. Committee Name Jenkins 4 Tucson Exploratory

2. ID # 10-171-CT

3. Report Covering Period from: 1-1-11 thru 5-31-11

IN-KIND CONTRIBUTIONS AND EXPENDITURES		DATE	FAIR MARKET VALUE
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN			
a.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>DESCRIPTION</p> <p>OCCUPATION                      EMPLOYER</p>		
b.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>DESCRIPTION</p> <p>OCCUPATION                      EMPLOYER</p>	<p>OFFICE OF THE CITY CLERK</p> <p>11 JUL 11 12:15</p>	<p>CITY OF TUCSON RECEIVED</p>
c.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>DESCRIPTION</p> <p>OCCUPATION                      EMPLOYER</p>		
d.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>DESCRIPTION</p> <p>OCCUPATION                      EMPLOYER</p>		
5.	<p>ENTER TOTAL OF IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E</p> <p>[If last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A]</p>		
6.	<p>ENTER TOTAL OF IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E</p> <p>[If last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]</p>		

DIVIDENDS, INTEREST AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID# 10-171-CT  
 3. Report Covering Period from: 1-1-11 thru 6-30-11 5-31-11

DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS		DATE RECEIVED	AMOUNT OF THE RECEIPT
4.	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT	11 JUL 11 OFFICE OF THE CITY CLERK	CITY OF TUCSON RECEIVED
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT	02 15	
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page, Line 7, Column A]		

OFFSETS TO CONTRIBUTIONS RECEIVED\*

SCHEDULE F-2

1. Committee Name Jenkins 4 Tucson Exploratory 2. ID # 10-171-CT  
 3. Report Covering Period from: 1-1-11 thru 5-31-11

REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED		DATE REFUND MADE	AMOUNT OF THE REFUND
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND	OFFICE OF THE CITY CLERK	CITY OF TUCSON RECEIVED
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND	11 JUN 11 09:16	
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 <small>[If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(e), Column A]</small>		

\* Includes return of contributions received by reporting committee .

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name Jenkins 4 Tucson Exphactory

2. ID# 10-17-CT

3. Report Covering Period from: 1-1-11 thru 6-30-11 5-31-11

DEBTS AND OBLIGATIONS		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED					
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			OFFICE CITY 11 JUN	CITY OF REQ
	DESCRIPTION OF DEBT				
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			HE 12:15	1011
	DESCRIPTION OF DEBT				
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 (If last page of F-3, transfer total to Detailed Summary Page, Line 19, Column A)				