



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



Primary Election – August 25, 2015
 General Election – November 3, 2015

NAME OF COMMITTEE FILING REPORT
 For Jobs for Tucson II
(Name of Political Committee)
 for _____ who is a candidate for the office
(Name of Candidate, when applicable)
 of _____ Political Party _____ ID # 15-238-IE

OR

CANDIDATE \$500 THRESHOLD EXEMPTION STATEMENT
 for _____
(Name of Candidate)
 who is a Candidate for the Office of _____
 Political Party _____ ID# _____

- Political Committee Statement of Organization # _____ Original or Amended
- Request for Public Matching Funds Contract# _____ **(PMF Candidates Only)**

CAMPAIGN FINANCE REPORT:

- a. Statement Establishing Eligibility – **PMF Candidates Only**
- b. Consolidated City/State Campaign Finance Report (Filed on or before February 2, 2015)
- c. Consolidated City/State Campaign Finance Report (Filed on or before June 30, 2015)
- d. Consolidated City/State Pre – Primary Report (Filed on or before August 21, 2015)
- e. City Post – Primary Report (Filed on or before September 4, 2015) – **PMF Candidates Only**
- f. State Post – Primary Election Report (Filed on or before September 24, 2015)
- g. Consolidated City/State Pre – General Election Report (Filed on or before October 30, 2015)
- h. City Post – General Election Report (Filed on or before November 13, 2015) – **PMF Candidates Only**
- i. State Post – General Election Report (Filed on or before December 3, 2015)
- j. Termination Statement (Filed on or before March 2, 2016) – **PMF Candidates Only**
must include Final report if not previously filed
- Political Committee No Activity Statement (Report date of: _____)
- Other Late fees per ARS 16-918 (20 days x \$10/day) \$200.00

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[Signature]
 Signature Deputy City Clerk
 Date: 7/29/15

X-CFA
 O-File
 181621
[Signature]



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

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CITY OF TUCSON

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15 JUL 29 PM 12:29
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3. ID#
15-238-IE

1. Full Name of Committee: Jobs for Tucson II
 Address: 444 E-University
 City: Tucson Zip Code: AZ 85705 Phone Number: 520-884-8843
 2. Sponsoring Organization and Office: _____
 Name of Candidate and Office Sought (if applicable): _____
 E-Mail Address: _____ Fax #: _____

4. REPORTING PERIOD (Please check appropriate box) FILING DEADLINE

- January 31 Report – For Period of
November 26, 2013 through December 31, 2014 *February 2, 2015
- June 30 Report – For Period of
January 1, 2015 through May 31, 2015 June 30, 2015
- Pre-Primary Election Report – For Period of
June 1, 2015 through August 13, 2015 August 21, 2015
- Post-Primary Election Report – For Period of
August 14, 2015 through September 14, 2015 September 24, 2015
- Pre-General Election Report – For Period of
September 15, 2015 through October 22, 2015 October 30, 2015
- Post-General Election Report – For Period of
October 23, 2015 through November 23, 2015 December 3, 2015
- January 31, 2017 Report – For Period of
November 24, 2015 through December 31, 2016 January 31, 2017

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)	0	0
5b Cash on Hand at Beginning of this Reporting Period	0	0
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$ 100.00	\$ 100.00
5d Subtotal (add Lines [b] and [c] for Column A and add lines [a] and [c] for Column B)	\$ 100.00	\$ 100.00
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)	0	0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$ 24.91	\$ 24.91
7. Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d - Column A must equal Column B)	\$ 75.09	\$ 75.09

*Per A.R.S. §16-916(D) if the date for filing any Campaign Finance Report is a Saturday, a Sunday or another legal holiday, the filing deadline is the next day that is not a Saturday, a Sunday, or another legal holiday.

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Jobs for Tucson II 3. ID# 15-238-FE
 2. Report Covering Period From Jan 1 - May 31, 2015 Thru _____

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	\$100.00	\$100.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	0	0
(c) Political Committees (Total from Schedule B)	0	0
(d) Subtotal Contributions [add 4(a), 4(b) and 4(c)]		
(e) Refund of Contributions (Total from Schedule F-2)	0	0
(f) Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	\$100.00	\$100.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0	0
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)	0	0
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	0
8. TOTAL Receipts [add 4(f), 5(c), 6, and 7]	\$100.00	\$100.00
DISBURSEMENTS		
9. Expenditures for Operating Expenses (Total from Schedule D)	\$24.91	\$24.91
10. Independent Expenditures (Total from Schedule D-1)	0	0
11. Value of In-kind expenditures (Total from Schedule E)	0	0
12. Loans made by reporting committee (Total from Schedule D-2)	0	0
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	0
(b) Repayment of all other loans (Total from Schedule D-5)	0	0
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)	0	0
15. Any other disbursement (Total from Schedule D-7)	0	0
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	\$24.91	\$24.91
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	0
18. TOTAL disbursements [subtract line 17 from line 16]	\$24.91	\$24.91
19. Total Outstanding Debts owed by Reporting Candidate or Political Comm. (Schedule F-3)	0	0
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>Deborah Bringhorst</u>	
Signature of Treasurer or Candidate or Designating Individual:	<u>Deborah Bringhorst</u>	Date <u>7/29/15</u>

CONTRIBUTIONS FROM INDIVIDUALS*
(More than \$50)*

SCHEDULE A

1. Committee Name Jobs For Tucson # 3. ID # 15-238-IE
 2. Report Covering Period from Jan 1, 2015 thru May 31, 2015

4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	LAST <u>Warne</u> FIRST <u>Thomas</u> MI <u>W.</u> STREET ADDRESS <u>70 W. Cushing Street</u> CITY <u>Tucson</u> STATE <u>AZ</u> ZIP <u>85701</u> OCCUPATION <u>Developer</u> EMPLOYER <u>Self-employed</u>	<u>4/1/15</u>	<u>\$100.00</u>	<u>\$100.00</u>
b.	LAST _____ FIRST _____ MI _____ STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____ OCCUPATION _____ EMPLOYER _____			
c.	LAST _____ FIRST _____ MI _____ STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____ OCCUPATION _____ EMPLOYER _____			
d.	LAST _____ FIRST _____ MI _____ STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____ OCCUPATION _____ EMPLOYER _____			OFFICE OF THE CITY CLERK 15 JUL 29 PM 2:29 CITY OF TUCSON RECEIVED
e.	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]		<u>100.00</u>	

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Jobs for Tucson II 2. ID# 15-238-IE

3. Report Covering Period from: Jan 1, 2015 thru May 31, 2015

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo Bank</u> <u>P.O. Box 6995 / Portland, OR 97228-6995</u>	<u>4/1/15</u>	<u>\$24.91</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>checks</u>	CHECK # <u>/</u>	
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]		<u>\$24.91</u>

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

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