



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

For Office Use Only
CITY OF TUCSON

1. Arizona Republican Party
Full Name of Committee

3501 N. 24th Street
Address

Phoenix 85016 602-957-7770
City Zip Code Phone Number

2. Sponsoring Organization and Office

Name of Candidate and Office Sought (if applicable)
Info@az90p.org

E-Mail Address Fax # 602-224-0932

CITY OF TUCSON
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12 JAN 11 P4:00

3A. OFFICE OF THE
CITY CLERK
11-205-CT

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

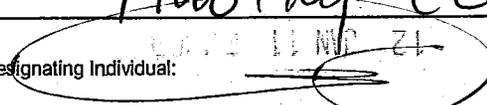
FILING DEADLINE

- 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)	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)	50,550.00	191,398.50
5d Subtotal (add Lines [b] and [c] for Column A and add lines [a] and [c] for Column B)	50,550.00	191,398.50
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)	50,550.00	191,398.50
7. Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d - Column A must equal Column B)	0	0

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Arizona Republican Party 3. ID# 11-205-CT
 2. Report Covering Period From 10/20/11 Thru 11/28/11

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)	50,550.00	191,948.50
(d) Subtotal Contributions [add 4(a), 4(b) and 4(c)]	50,550.00	191,948.50
(e) Refund of Contributions (Total from Schedule F-2)		
(f) Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	50,550.00	191,948.50
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) Total loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. TOTAL Receipts [add 4(f), 5(c), 6, and 7]	50,550.00	191,948.50
DISBURSEMENTS		
9. Expenditures for Operating Expenses (Total from Schedule D)		
10. Independent Expenditures (Total from Schedule D-1)	50,550.00	191,948.50
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) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	50,550.00	191,948.50
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. TOTAL disbursements [subtract line 17 from line 16]	50,550.00	191,948.50
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>Timothy Lee</u>	
Signature of Treasurer or Candidate or Designating Individual:		
	Date <u>11/28/11</u>	

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CITY OF TUCSON

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

SCHEDULE A

1. Committee Name _____ 3. ID # _____

2. Report Covering Period from _____ thru _____

4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE												
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				
LAST	FIRST	MI														
STREET ADDRESS																
CITY	STATE	ZIP														
OCCUPATION	EMPLOYER															
b.	<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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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				
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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		<p align="center">OFFICE OF THE CITY CLERK 12 JAN 11 11:00</p>		
LAST	FIRST	MI														
STREET ADDRESS																
CITY	STATE	ZIP														
OCCUPATION	EMPLOYER															
5.	<p>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]</p>	<p align="center">CITY OF TUCSON RECEIVED</p>														

*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 _____
- 2. Report Covering Period from _____ thru _____
- 3. ID # _____
- 4. Aggregate Total of Contributions of \$25 or Less _____

Description	Amount Received This Period		Cumulative Total This Campaign To Date
<p style="text-align: center;">OFFICE OF THE CITY CLERK</p> <p style="text-align: center;">2 JAN 11 4:00</p>			
<p>5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4 (b), Column A]</p>		<p>6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]</p>	

*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 Arizona Republican Party 3. ID# 11-205-CT
 2. Report Covering Period from: 10/20/11 thru 11/28/11

4. CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
ID#, NAME, AND ADDRESS OF CONTRIBUTOR AND DATE RECEIVED			
a.	ID # <u>1535</u> DATE RECEIVED <u>10/20/11</u> NAME, ADDRESS, CITY, STATE AND ZIP <u>Arizona Republican Party</u> <u>3501 N. 24th Street</u> <u>Phoenix, AZ 85016</u>	<u>26,910.00</u>	<u>168,308.50</u>
b.	ID # <u>1535</u> DATE RECEIVED <u>10/25/11</u> NAME, ADDRESS, CITY, STATE AND ZIP <u>Arizona Republican Party</u> <u>3501 N. 24th Street</u> <u>Phoenix AZ 85016</u>	<u>23,640.00</u>	<u>191,948.50</u>
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		<u>12 JAN 11</u>
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>	<u>50,550.00</u>	

CITY OF TUCSON RECEIVED

* Note: All above contributions were from Arizona Republican Party Non-Federal account.

CANDIDATE LOANS

SCHEDULE C

1. Committee Name _____

3. ID # _____

2. Report Covering Period from _____ thru _____

	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			
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)			

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12 JAN 11 PM 3:01

CITY OF LOS ANGELES RECEIVED

OTHER LOANS

SCHEDULE C1

3. ID #

1. Committee Name _____

2. Report Covering Period from _____ thru _____

	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#			
	DESCRIPTION			
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]			

OFFICE OF THE CITY CLERK

12 JAN 11 P 4:01

CITY OF TUCSON RECEIVED

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name _____

2. ID# _____

3. Report Covering Period from: _____ thru _____

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]		

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

CITY OF TUCSON RECEIVED

INDEPENDENT EXPENDITURES *

SCHEDULE D-1

1. Committee Name Arizona Republican Party 3. ID# 11-205-CT
 2. Report Covering Period from 10/20/11 thru 11/28/11

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 <u>Lincoln Strategy Group</u> <u>80 E Rio Salado Pkwy</u> <u>Tempe, Az 85281</u>	<u>10/21/11</u>	<u>26,910.00</u>
PURPOSE AND DESCRIPTION OF PURCHASE <u>Design, Print, Postage, Mail Services</u>		Benefited <input checked="" type="checkbox"/> Opposed <input type="checkbox"/>	
CANDIDATE <u>Rapson & Vogt</u> <u>Grinnell</u>		OFFICE SOUGHT <u>Tucson City Council</u> <u>Tucson Mayor</u>	YEAR OF ELECTION <u>2011</u> <u>2011</u>
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Lincoln Strategy Group</u> <u>80 E Rio Salado Pkwy</u> <u>Tempe, Az 85281</u>	<u>10/26/11</u>	<u>23,640.00</u>
PURPOSE AND DESCRIPTION OF PURCHASE <u>Phone Hours</u>		Benefited <input checked="" type="checkbox"/> Opposed <input type="checkbox"/>	
CANDIDATE <u>Rapson & Vogt</u> <u>Grinnell</u>		OFFICE SOUGHT <u>Tucson City Council</u> <u>Tucson Mayor</u>	YEAR OF ELECTION <u>2011</u> <u>2011</u>
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]		<u>50,550.00</u>

* 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
12 JAN 11 P4:01 OFFICE OF THE CITY CLERK CITY OF TUCSON	

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name _____

3. ID# _____

2. Report Covering Period from _____ thru _____

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#		
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>		

CITY OF TUCSON RECEIVED

OFFSETS TO OPERATING EXPENSES*

SCHEDULE D-3

1. Committee Name _____

2. ID# _____

3. Report Covering Period from: _____ thru _____

4. 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		
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.

CITY OF TUCSON
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CITY CLERK

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name _____

2. ID# _____

3. Report Covering Period from: _____ thru _____

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		
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]		

CITY CLERK
OFFICE OF THE
12 JAN 11 PM 4:01

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

1. Committee Name _____

2. ID#

3. Report Covering Period from: _____ thru _____

	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#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
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]		

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CITY CLERK

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CITY OF TUCSON
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TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name _____ 2. ID# _____
3. Report Covering Period from _____ thru _____

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#		
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#		
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]		

OFFICE OF THE CITY CLERK

12 JAN 11 P4:01

CITY OF TUCSON RECEIVED

ANY OTHER DISBURSEMENTS

SCHEDULE D-7

1. Committee Name _____ 2. ID# _____
 3. Report Covering Period from _____ thru _____

4. ANY OTHER DISBURSEMENTS NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
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		
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]		

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IN-KIND CONTRIBUTIONS AND EXPENDITURES

SCHEDULE E

1. Committee Name _____ 2. ID # _____

3. Report Covering Period from: _____ thru _____

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. NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/>			
	EXPENDITURE <input type="checkbox"/>			
	DESCRIPTION			
	OCCUPATION			EMPLOYER
b. NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/>			
	EXPENDITURE <input type="checkbox"/>			
	DESCRIPTION			
	OCCUPATION			EMPLOYER
c. NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/>			
	EXPENDITURE <input type="checkbox"/>			
	DESCRIPTION			
	OCCUPATION			EMPLOYER
d. NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/>			
	EXPENDITURE <input type="checkbox"/>			
	DESCRIPTION			
	OCCUPATION			EMPLOYER
5.	ENTER TOTAL OF IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E <small>(If last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A)</small>			
6.	ENTER TOTAL OF IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E <small>(If last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A)</small>			

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DIVIDENDS, INTEREST AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name _____

2. ID# _____

3. Report Covering Period from: _____ thru _____

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		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT	12 JAN 11 4:07 PM OFFICE OF THE CITY CLERK	
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 _____

2. ID # _____

3. Report Covering Period from: _____ thru _____

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		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
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 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(e), Column A]		

* Includes return of contributions received by reporting committee .

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Schedule F-2 Page _____ of _____
12 JAN 11 4:02

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name _____

2. ID#

3. Report Covering Period from: _____ thru _____

4. 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#				
	DESCRIPTION OF DEBT				
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	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				
	<small>[If last page of F-3, transfer total to Detailed Summary Page, Line 19, Column A]</small>				

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