



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



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

CITY OF TUCSON  
 RECEIVED

<b>NAME OF COMMITTEE FILING REPORT</b>	15 DEC -3 P1:52
For <u>Revitalize Tucson</u> <small>(Name of Political Committee)</small>	
for _____ who is a candidate for the office <small>(Name of Candidate, when applicable)</small>	OFFICE OF THE CITY CLERK
of _____ Political Party _____	ID # 15-244-IE

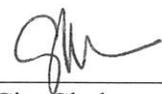
**OR**

<b>CANDIDATE \$500 THRESHOLD EXEMPTION STATEMENT</b>
for _____ <small>(Name of Candidate)</small>
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 \_\_\_\_\_

  
 \_\_\_\_\_  
 Signature Deputy City Clerk  
 Date: 12/3/15



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

For Office Use Only  
**CITY OF TUCSON  
RECEIVED**

15 DEC -3 P1:52

OFFICE OF THE  
CITY CLERK

1. Revitalize Tucson  
Full Name of Committee

120 S. Houghton Rd # 138-177  
Address

Tucson, AZ 85748 520-235-2234  
City Zip Code Phone Number

2. \_\_\_\_\_  
Sponsoring Organization and Office

\_\_\_\_\_  
Name of Candidate and Office Sought (if applicable)

info @ RevitalizeTucson.com  
E-Mail Address Fax #

3. ID# \_\_\_\_\_

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)		Ø
5b Cash on Hand at Beginning of this Reporting Period	1860.26	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	1416.91	54190.82
5d Subtotal (add Lines [b] and [c] for Column A and add lines [a] and [c] for Column B)	3277.17	54190.82
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)		Ø
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	1135.22	52048.65
7. Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d - Column A must equal Column B)	2141.95	2141.95

\*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 Revinize Tucson 3. ID# 15-244-EE  
 2. Report Covering Period From 10/23/15 Thru 11/23/15

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)	1416.50	2140.71
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)		50200.00
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b) and 4(c)]		
(e) Refund of Contributions (Total from Schedule F-2)		
(f) Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		1850.00
(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)	.11	.11
8. TOTAL Receipts [add 4(f), 5(c), 6, and 7]	1416.91	54190.82
<b>DISBURSEMENTS</b>		
9. Expenditures for Operating Expenses (Total from Schedule D)	351.22	902.41
10. Independent Expenditures (Total from Schedule D-1)	1100.00	50796.46
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]		
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. TOTAL disbursements [ subtract line 17 from line 16]	1135.22	52044.87
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>Sean Bailey</u>		
Signature of Treasurer or Candidate or Designating Individual: 		Date <u>12/3/15</u>

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

SCHEDULE A

1. Committee Name Republican Tucson 3. ID# 15-244-EE  
 2. Report Covering Period from 10/23/15 thru 11/23/15

CONTRIBUTIONS				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
a.	LAST Bauserman	FIRST CHARSIME	MI	10/29/15	91.80	91.80
STREET ADDRESS 6987 E. Tanque Verde						
CITY Tucson						
STATE AZ						
ZIP 85749						
OCCUPATION		EMPLOYER				
b.	LAST Ludell	FIRST Gregg	MI	11/2/15	100.00	100.00
STREET ADDRESS 2117 W. Greenway Dr						
CITY Green Valley AZ						
STATE AZ						
ZIP 85672						
OCCUPATION		EMPLOYER				
c.	LAST Bauserman	FIRST CHRISTINA	MI	11/4/15	1225.00	1316.80
STREET ADDRESS 6987 E. Tanque Verde						
CITY Tucson						
STATE AZ						
ZIP 85749						
OCCUPATION		EMPLOYER				
d.	LAST	FIRST	MI			
STREET ADDRESS						
CITY						
STATE						
ZIP						
OCCUPATION		EMPLOYER				
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]				1416.80	

\*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 Reverend Tucson 2. ID# 15-244-EE

3. Report Covering Period from: 10/23/15 thru 11/23/15

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>US Postal Service</u> <u>255 N Rosmar Tucson AZ 85711</u>	<u>10/20/15</u>	<u>20.22</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Postage</u>	CHECK # <u>EFT</u>	
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Bank of America</u> <u>PO BOX 15789 Washington DC 20045-0000</u>	<u>11/2/15</u>	<u>15.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>EFT</u>	
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>35.22</u>

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

INDEPENDENT EXPENDITURES \*

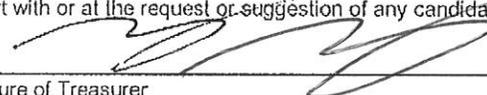
SCHEDULE D-1

1. Committee Name Revolutionary Youth 3. ID# 15-244-213  
 2. Report Covering Period from 10/23/15 thru 11/23/15

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>Successful Strategies</u> <u>6487 E. Temple Verde Tucson AZ 85749</u>		10/26/15	\$500.00
PURPOSE AND DESCRIPTION OF PURCHASE Benefited <input type="checkbox"/> Opposed <input checked="" type="checkbox"/> <u>ProBocall</u>			
CANDIDATE OFFICE SOUGHT YEAR OF ELECTION <u>Scott, Rumer, (Cannibally) City Council 2015</u>			
b. NAME, ADDRESS, CITY, STATE AND ZIP <u>Successful Strategies</u> <u>6487 E. Temple Verde Tucson AZ 85749</u>		10/26/15	\$200.00
PURPOSE AND DESCRIPTION OF PURCHASE Benefited <input type="checkbox"/> Opposed <input checked="" type="checkbox"/> <u>ProBocall</u>			
CANDIDATE OFFICE SOUGHT YEAR OF ELECTION <u>Scott City Council 2015</u>			
c. NAME, ADDRESS, CITY, STATE AND ZIP <u>Successful Strategies</u> <u>6487 E. Temple Verde Tucson AZ 85749</u>		10/28/15	\$400.00
PURPOSE AND DESCRIPTION OF PURCHASE Benefited <input checked="" type="checkbox"/> Opposed <input type="checkbox"/> <u>ProBocall</u>			
CANDIDATE OFFICE SOUGHT YEAR OF ELECTION <u>Burkholder City Council 2015</u>			
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)			\$1100.00

\* 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

DIVIDENDS, INTEREST AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Rever+wife TV1501

2. ID# 15-244-15

3. Report Covering Period from: 10/23/15 thru

11/23/15

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# <u>Bank of America</u> <u>PO BOX 15244 Wilmington DE 19850</u>	<u>11/2/15</u>	<u>\$0.11</u>
	DESCRIPTION OF RECEIPT <u>Bank correction</u>		
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		
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]		<u>\$0.11</u>