



**CITY OF TUCSON  
POLITICAL COMMITTEE  
CAMPAIGN FINANCE REPORT**

COMMITTEE ID NUMBER  
22-338-CT

COMMITTEE INFORMATION (required):

Committee Information Committee Name: HELENA OWENS CITY COUNSEL

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought:  City Office: WARD 2

Cumulative Report:

Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.  
Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below): \_\_\_\_\_

REPORTING PERIOD (check one):

REPORTING PERIOD	REPORT DUE
2022 Quarter 4 Report: October 1, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
<input checked="" type="checkbox"/> 2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
Other Report: For Period of _____ through _____	As needed
<b>ADDITIONAL REPORTS FOR PETITION DRIVE POLITICAL COMMITTEES, per Tucson Code, Chapter 12, Article XI:</b>	
DUE: 60 days after the date of issuance of the petition serial number, or on the date of filing the petition, whichever is earlier	
DUE: At the time of filing the petition, if filed more than 60 days after issuance	
DUE: 30 days after the filing of the petition	
<input checked="" type="checkbox"/> Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

\*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§§ 1-243(A), 1-301 and 1-303.

23 MAY - 1 01:17

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)	\$ 730.00	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 0.00	
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 730.00	
(d) = Balance at close of reporting period	\$ 0.00	
<input type="checkbox"/> Check here if filing <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page and the following page need to be filed.		

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity.

223214 28  
O-file X-CFA



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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.

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\_\_\_\_\_  
Printed Name of Committee Treasurer

\_\_\_\_\_  
Signature of Committee Treasurer

05/01/2023

\_\_\_\_\_  
Date



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DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information				Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name HELENA OWENS	Disbursement Date 04/28/2023		<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit	530	
	Street Address 8225 E SPEEDWAY APT 304					
	City TUCSON	State AZ	ZIP 85710			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
2	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
3	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
4	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
5	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 1)					530	



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REIMBURSEMENTS MADE:

SCHEDULE B(11)

Recipient Information				Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name HELENA OWENS			<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit	530	
	Street Address 8225 E SPEEDWAY APT 304					
	City TUCSON	State AZ	ZIP 85710			
	Services or Goods Reimbursed MILEAGE, GAS , MEALS		Reimbursement Date 04/28/2023			
2	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 11)					530	



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AGGREGATE OF DISBURSEMENTS – \$250 OR LESS.

SCHEDULE B(15)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative of Disbursements - \$250 or Less	200	
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 15)	200	

\*If disbursement(s) of \$250 or less is listed on another disbursement schedule, do not include them on Schedule B(15).