

CITY OF TUCSON POLITICAL ACTION COMMITTEE CAMPAIGN FINANCE REPORT

17-279-CT

COMMITTEE INFORMATION (required):

Offi	ce Sought.	Mayor	Council Mem	ber, Ward :		
ING P	ERIOD (check one):					
		REPORTING F	PERIOD		R	EPORT DUE
O	November 24, 201	15 to December 31, 2016			Januar	y 15, 2017
O	2017 1st Quarter F	Report: January 1, 2017 to	March 31, 2017		April 1	5, 2017
O	2017 May Pre-Ele	ction Report: April 1, 2017	to April 29, 2017		May 6,	2017
O	2017 Post-Election	n Report: April 30, 2017 to	June 30, 2017		July 15	, 2017
	2017 August Pre-l	Election Report: July 1, 201	17 to August 12, 2017		August	19, 2017
O	2017 Post-Election	n Report: August 13, 2017	to September 30, 2017		Octobe	er 15, 2017
O	2017 October Pre-	-Election Report: October 1	I, 2017 to October 21, 20)17	Octobe	er 28, 2017
O		n Report: October 22, 2017			Januar	y 15, 2018
0		inance Report Prior to Con the previous report through		ee)	<u></u>	0FF
O	Other Report: For		through		.end	
						20 00
AL SU	MMARY (required):					P P
				Cash Ac	1	Election Çýcle
		Activity		This Repo		to Date
	ending balance fro	t the beginning of this reporting p	eriod)	\$ 39,06	7.59	
(b)	+ Total receipts (fro for this reporting pe	om "Summary of Receipts, eriod)	" line 13 (cash column)	\$ 100	.00	
(c)		nts (from "Summary of Dis his reporting period)	bursements," line 16	\$ 2,05	9.29	
(d)	d) = Balance at close of reporting period \$37,108			8.30		
	Check here if <u>no</u> fir this cover page ne	nancial activity during the read be filed.	eporting period. Lines (a))-(d) still mus	t be cor	npleted, but only
•	ees with financial a the cover page, summary of receip summary of disbur	ts,		en er en		

All reports are deemed to be filed under penalty of perjury by the committee treasurer fall committees) and candidate (candidate committees only).

SUMMARY OF RECEIPTS (Schedule A):

Receipts	Cash	Equity
1. Monetary Contributions Received		
(a) Individuals - More than \$50	\$ 100.00	4.7 - 1
(b) Individuals - \$50 or Less (Aggregate)		
(c) Candidate Committees		
(d) Political Action Committees		
(e) Political Parties		
(f) Partnerships		
(g) Corporations & Limited Liability Companies (PACs 8	3 Political Parties Only)	
(h) Labor Organizations (PACs & Political Parties Only)		
(i) Candidate's Personal Monies (Candidate Committees Or	nly)	
(j) Monetary Contributions Subtotal (add 1(a) through 1(i))		
(k) Refunds Given Back to Contributors		
(I) Net Monetary Contributions (subtract 1(k) from 1(j))	\$ 100.00	
2. Loans	V 100.00	
(a) Loans Received		
(b) Forgiveness on Loans Received		
(c) Repayment on Loans Made	N N	
(d) Interest Accrued on Loans Made		
(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	\$ 0.00	
Rebates and Refunds Received		
Interest Accrued on Committee Monies		
5. In-Kind Contributions Received		
(a) Individuals - More than \$50		
(b) Individuals - \$50 or Less (Aggregate)		
(c) Candidate Committees		
(d) Political Action Committees		
(e) Political Parties		
(f) Partnerships		
(g) Corporations & Limited Liability Companies (PACs 8	Political Parties Only)	
(h) Labor Organizations (PACs & Political Parties Only)		
(i) Candidate's Personal Assets or Property (Candidate	Committees Only)	
(j) In-Kind Contributions Subtotal (equity: add 5(a) through	5(i))	\$ 0.00
 In-Kind Donations Received (Non-Contributions) (Political Partie 	as Only)	
7. Extensions of Credit		
(a) Extensions of Credit Received		
(b) Payments on Extensions of Credit Received		2.35
(c) Net Extensions of Credit (subtract 7(b) from 7(a))		\$ 0.00
 Joint Fundraising / Shared Expense Payments Received 	ed	
Payments Received for Goods / Services		
0. Outstanding Accounts Receivable / Debts Owed to Cor	nmittee	
1. Transfer In Surplus Monies / Transfer Out Debt (use cash	and/or equity as applicable)	
2. Miscellaneous Receipts		
3. Total Receipts (cash: add 1(l), 2(e), 3-4, 8-9, 11-12; equity: add 2(b),	. 5(i), 6-7, 10-12) \$ 100.00	

SUMMARY OF DISBURSEMENTS (Schedule B):

Disbursements	Cash	Equity
Disbursements for Operating Expenses	\$ 59.29	
2. Contributions Made		
(a) Candidate Committees		
(b) Political Action Committees	\$ 2,000.00	
(c) Political Parties	7 - 11 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -	
(e) Corporations & Limited Liability Companies (PAC & Po	olitical Parties Only)	
(f) Labor Organizations (PAC & Political Parties Only)		
(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	\$ 2,000.00	
(h) Contribution Refunds Provided to the Reporting Cor	mmittee	
(i) Monetary Contributions Total (subtract 2(h) from 2(g))	\$ 2,000.00	10 10 10 10 10 10 10 10 10 10 10 10 10 1
3. Loans		V
(a) Loans Made		
(b) Loan Guarantees Made		
(c) Forgiveness on Loans Made		10
(d) Repayment of Loans Received		1
(e) Accrued Interest on Loans Received		
(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))	\$ 0.00	\$ 0.00
Rebates and Refunds Made (Non-Contributions)		
Value of In-Kind Contributions Provided		_
(a) Candidate Committees		
(b) Political Action Committees		
(c) Political Parties		
(d) Partnerships		
(e) Corporations & Limited Liability Companies (PAC & Po	olitical Parties Only)	
(f) Labor Organizations (PAC & Political Parties Only)		
(j) Contributions Subtotal (add 5(a) through 5(f))	H A	\$ 0.00
Independent Expenditures Made		
Ballot Measure Expenditures Made		
Recall Expenditures Made		
9. Support Provided to Party Nominees (Political Parties Only)		
10. Joint Fundraising / Shared Expense Payments Made		
11. Reimbursements Made		
12. Outstanding Accounts Payable / Debts Owed by Commit	tee	
13. Transfer Out Surplus Monies / Transfer In Debt (use cash a	nd/or equity as applicable)	
14. Miscellaneous Disbursements		
15. Aggregate of Disbursements - \$250 or Less		
16. Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: ad	d 3(f), 5(j), & 12-15) \$ 2,059.29	\$ 0.00

MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(1)(a)

Name	ontributor Inform	nation	Amount Received	Cumulative Amount this	Cumulative Amount this
				Reporting Period	Election Cycle
Kristina Hogan		Date Contribution Received 07/12/2017			
250 W. Juniper Ave. Unit	e 63		* 100 00		
city Gilbert	State AZ	85233	\$ 100.00	\$ 100.00	\$ 500.00
Joint Venture Partner	Outbac	k Steakhouse			
Name		Date Contribution Received			ı
Street Address					
City	State	ZIP			
Occupation	Employer				
Name		Date Contribution Received			
Street Address	*				
City	State	ZIP			1
Occupation	Employer		1		
Name		Date Contribution Received			
Street Address			-		
City	State	ZIP	-		
Occupation	Employer		-		
Name		Date Contribution Received			
Street Address			-	,32	
Dity	State	ZIP	_		
Decupation	Employer		-		
	Occupation	Gilbert Occupation Joint Venture Partner Outbac Name Street Address City State City State	Gilbert AZ 85233 Occupation Joint Venture Partner Outback Steakhouse Name Street Address City State ZIP Occupation Employer Occupation Employer City State ZIP Occupation Employer City Date Contribution Received Street Address City State ZIP Occupation Employer Employer City State ZIP Occupation Employer Street Address City State ZIP Cocupation Employer State ZIP Cocupation Date Contribution Received	Gilbert AZ 85233 Occupation Joint Venture Partner Date Contribution Received Street Address City State ZIP Occupation Employer Occupation Employer Date Contribution Received Street Address City State ZIP Occupation Employer Street Address City State ZIP Occupation Employer Date Contribution Received Street Address City State ZIP Occupation Employer Date Contribution Received Street Address City State ZIP Occupation Employer Street Address City State ZIP Occupation Street Address City State ZIP	Gilbert AZ 85233 Cocupation Joint Venture Partner City

 * If contributions of \$50 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

Schedule A(1)(a), page 1 of 1

MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from Individuals - \$50 or Less	\$ 0.00	\$ 0.00
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

^{*}If contributions of more than \$50 are listed on Schedule A(1)(a), do not include them on Schedule A(1)(b).

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

/	Candidate	Committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name				, and a second	, , , , , , , , , , , , , , , , , , , ,
	Street Address			-		
1	City	State	ZIP			
	Committee ID Number	Date Contribution I	Received			
	Committee Name				<u></u>	2110
	Street Address					
2	City	State	ZIP			_
	Committee ID Number	Date Contribution F				
		Suc Osimisation	, courted			
	Committee Name					
_	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			
ì	Committee Name	100000				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			
	Committee Name		0.00			1-2-1-4
	Street Address					
5	Сіту	State	ZIP			
	Committee ID Number	Date Contribution R	Received			
	Enter total only if last page of s	schedule	=			
	(transfer the total received this period to "Summar		l.			

MONETARY	CONTRIBUTIONS	FROM POLITICAL	ACTION COMMITTEES

SCHEDULE A(1)(d)

_	Political Action Committ	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
Street Address						
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
72	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
2	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
5	City	State	ZIP			İ
	Committee ID Number	Date Contribution Receive	rd			
┪	Enter total only if last page of schedule					

/					2	
/	Politica	l Party Contributor Inform	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
2	City State ZIP		ZIP			
	Committee ID Number	Date Contribution Re	ceived			
_	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name	,				
	Street Address	110				
4	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Re-	ceived			
	Enter total only if last page of s	chedule				

MONETARY CONTRIBUTIONS FROM PARTNERSHIP:			

SCHEDULE A(1)(f)

	Partnership Co	ntributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name				Troporting F chock	Election Cycle
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Streel Address	13		_		
2	City	Slate	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed		1	
	Partnership Name					
	Street Address					
3	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receive	ed	_		
_	Partnership Name					
	Street Address			_		
1	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receive	ed .	_		
4	Partnership Name					
	Street Address					
	City State ZIP					
	Corporation Commission File Number	Date Contribution Receive				
	- Author	24/0 COMMODURAL L'ECGIVE	· · · · · · · · · · · · · · · · · · ·		100	

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

/	Corporation / LL	_C Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				, noponing roma	
	Street Address			1		
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	<u>l</u>		-	
	Corporation/LLC Name	L				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	L ed			
	Corporation/LLC Name					
	Street Address	1				
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed]		
	Corporation/LLC Name					
	Street Address			1		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receive	d			
_	Enter total only if last page of schedul	le				

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

/	Labor Organizat	ion Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				, ,	,
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Labor Organization Name					
	Street Address					
2	2 City	State ZIP				
	Corporation Commission File Number	Date Contribution Receiv	ved			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number					
	Labor Organization Name			1		
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Labor Organization Name					
	Street Address					
5	City	State ZIP		-6		
	Corporation Commission File Number					
	Enter total only if last page of schedu					

MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

	Ca	ndidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer	I			
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	•	Date Contribution Received			
- P	Street Address)	5
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
_	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of sche					

₹	FFI	INDS	GIVEN	BACK	TO	CON	TRIBL	TORS

SCHEDULE A(1)(j)

_	Contribut	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			
	Street Address	2000				
1	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
1	Name		Date Contribution Refunded			
	Street Address					
2	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address			1		
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution	-		
1	Name		Date Contribution Refunded			
	Street Address					
1	City	State	ZIP	-		
	ID Number (if applicable)		Date of Original Contribution	-		
	Name		Date Contribution Refunded			
	Street Address					
;	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
+	Enter total only if last page of schedule			1		

Schedule A(1)(k), page ____ of

OAN	10	\sim	1 / / _	η.

SCHEDULE A(2)(a)

/	Lender	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received			, ,	
	Street Address	_				
1	City	State	ZIP			
	Guaranter/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address	Ø				
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	L (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
3	City					
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address	8				
5	City	State	ZIP			
	Guarantor/Endorser Name		PACs and Political Parties Only)			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts,"	line 2(a))				

FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

/_	/		Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Lender Name		Date Forgiveness Received			
ı,		Street Address					
1	1	City	State	ZIP			
		Original Amount of Loan	Amount Still Outstanding				
		Lender Name		Date Forgiveness Received			
		Street Address					
2	2	City	State	ZIP			
		Original Amount of Loan	Amount Still Outstanding				
		Lender Name	l	Date Forgiveness Received			
		Street Address					
3	3	City	State	ZIP			
		Original Amount of Loan	Amount Still Outstanding				
		Lender Name		Date Forgiveness Received			
		Street Address					
4	1	City	State	ZIP			
		Original Amount of Loan	Amount Still Outstanding				
	1	Lender Name		Date Forgiveness Received			
	ľ	Street Address					
5	1	City	State	ZIP			
		Original Amount of Loan	L				
		Enter total only if last page of schedule transfer the total received this period to "Summary of Receipts," is	ne 2(b))				
_							/
/			Sche	dule A(2)(b), page of			

_	_				Carrier a		
≀⊢	PA	١Y	M⊢ľ	J T	ON	LOANS	MADE:

SCHEDULE A(2)(c)

/	22	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Borrower Name	Date Repayment Received				
		Street Address					
1	1	City	State	ZIP			
	-	Original Amount Borrowed	Amount Still Outstanding				
		Original Amount corrowed	Amount Still Outstanding				
		Borrower Name		Date Repayment Received			
		Street Address					
2	2	City	State	ZIP	-		
		Original Amount Borrowed		_			
		Ongmar Amount Borrowed	Amount Still Outstanding				
	ľ	Borrower Name		Date Repayment Received			
		Street Address					
3	3	City	State	ZIP	-		
		Original Amount Borrowed	Amount Still Outstanding				
				r.			
	E	Borrower Name		Date Repayment Received			
	*	Street Address					
4		City	State	ZIP	1		
	-	Original Amount Borrowed	Amount Still Outstanding		-		
_							
	E	Borrower Name		Date Repayment Received		20	
	00	Street Address			7		
5	-	Dity	State	ZIP	1		
		Original Amount Borrowed	Amount Still Outstanding		-		
			om en en 2000 de 2008 de 2007				
		Enter total only if last page of schedule ransfer the total received this period to "Summary of Receipts," I		*			

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

					,	
/	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address				2	
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding			ř.	
	Borrower Name	Date Interest Accrued				
ı	Street Address	-				
3	City	State	ZIP			
ı	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address	1111-1				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	J.			
1	Borrower Name		Date Interest Accrued			
1	Street Address					
5	City	State	ZIP			
(Original Amount Borrowed	Amount Still Outstanding				
_	Enter total only if last page of schedule					

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

	Payor I	nformation		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name	Date Rebate/Refund Received				
	Street Address	03-5				
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebat	e			
	Borrower Name		Date Rebate/Refund Received			
	Street Address			-		
2	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refund/Rebate	e ·	-		
	Borrower Name	Date Rebate/Refund Received				
	Street Address			-		
3	City	State	ZIP	-		
	Original Purchase Amount	Reason for Refund/Rebale	•	-		
	Borrower Name		Date Rebate/Refund Received			
	Street Address			-		
4	City	State	ZIP	-		
	Original Purchase Amount	Reason for Refund/Rebate		-		
	Borrower Name		Date Rebate/Refund Received			
	Street Address			-		
	City	State	ZIP			
		Reason for Refund/Rebate				
	Chyman i dividac Attivunt	reson to retind/repale				

Schedule A(3), page ___ of

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)		

Schedule A(4), page ___ of ___

IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(5)(a)

/_		Individual Contributor Information	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address		1			
1	Сну	State	ZIP			
	Occupation	Employer				
	Name	<u> </u>	Date In-Kind Contribution Received			
	Street Address					
2	2 city	State	ZIP			
	Occupation	Employer				
r	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
r	Name		Date In-Kind Contribution Received		-	-
	Street Address		1			
4	City	State	ZIP			
	Occupation	Employer	1			
	Name	1	Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer		*		
r	Enter total only if last p					
_	(transfer the total received this period	to "Summary of Receipts," line 5(a))				

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Schedule A(5), page ____ of

IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$50 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

*If contributions of more than \$50 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

Schedule A(5)(b), page ___ of ___

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

	,				i .		
/	_	Candidate Committee	Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name					
		Street Address					
1	1	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Received			
		Committee Name		v			
		Street Address					
2	2	City	State	ZIP			
	ŀ	Committee ID Number	Date In-Kind Contribution	Received			
	1	Committee Name					
		Street Address					
3	1	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Received			
	1	Committee Name					
		Street Address					
4	ŀ	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Received			
	,	Committee Name			_		
		Street Address					
5	-	City	State	ZIP			
	-	Committee ID Number	Date In-Kind Contribution F	Received			
	E	Enter total only if last page of schedule					
		transfer the total received this period to "Summary of Receipts," li	ne 5(c))				

IN-KI
IND
CONT
CRIBUTIONS
FROM POLITICAL
ACTION (
COMMITTEES

SCHEDULE A(5)(d)

	Political Action Com	mittee Contributor Ir	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		,			
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name					
	Street Address				,	
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			

	NTRIBUTIONS FROM POLITICAL					SCHEDU
,						
/ _	Political Pa	rty Contributor Informa	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			1		
1	City	State ZIP		<u>-</u>		
	Committee ID Number Date In-Kind Contribution Received		-			
	Committee Name					
	Street Address					
2	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					ik
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name) Y	
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of sche					
	The state of the state of the period to Summing U. K.		edule A(5)(e), page of			S

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

	Partners	nip Contributor Inforr	Amount Receive	Cumulative ed Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name		Troporting Fortion			
	Street Address		i de la companya de l			u F
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contril	bution Received			
	Partnership Name	1				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contril	bution Received			
	Partnership Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contril	oution Received			
	Partnership Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Received			
1	Enter total only if last page of sch	adula .				

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

	Corporation	/ LLC Contributor I	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
	Corporation/LLC Name		NF3			
	Street Address					
2	City	State	ŽΙΡ			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
	Corporation/LLC Name					T-
2	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
	Corporation/LLC Name	l .				
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	I iribution Received			
	Corporation/LLC Name					
	Street Address					
	City	State	ZIP	2		
	Corporation Commission File Number	Date In-Kind Cont	ribution Received	- P		
1	Enter total only if last page of sch	nedule f Receipts," line 5(g))				

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

/	/ Labor Organization	Contributor Inforr	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	/
	Labor Organization Name				у торош ба		$ \ $
	Street Address		ě				
1	1 City	Stale	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received				
r	Labor Organization Name					<u> </u>	
	Street Address						
2	2 _{City}	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received				
	Labor Organization Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received				
	Labor Organization Name			_			
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received				
	Labor Organization Name				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received	2			
	Enter total only if last page of schedule	line 5(h))					
/	\					/	/
		Sche	edule A(5)(h), page of				

IN-KIND CONTRIBUTIONS FROM CANDIDATE'S PERSONAL ASSETS OR PROPERTY:

SCHEDULE A(5)(i)

/	Candida	te Information		Amount Received	Cumulative Amount this	Cumulative Amount this
	Name		Date In-Kind Contribution Received		Reporting Period	Election Cycle
	Street Address			1		
1	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Asset or Property Contributed					
_	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	Stale	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address	4				
4	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address	street Address				
5	City	State	ZIP			
	Asset or Property Contributed	d				
	Enter total only if last page of schedule	* line 5(i))				
_	, , , , , , , , , , , , , , , , , , , ,					

IN-KIND DONATIONS RECEIVED (NON-CONTRIBUTIONS) (PACs AND POLITICAL PARTIES ONLY):

SCHEDULE A(6)

/	Source	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Donation Received		1 5		
	Street Address			1		
1	City	State	ZIP	1		
	Type of Item Donated	1				
	Name		Date In-Kind Donation Received			
	Street Address		1			
2	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
3	City	State	ZIP			
	Type of Item Donated	1	·			
	Name		Date In-Kind Donation Received			
	Street Address					
4	City	State	ZIP			
	Type of Item Donated		I.			
\dashv	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
-	Type of Item Donaled				8	
	Enter total only if last page of schedule	line 6)				
	qualities are total received and period to Summary of Receipts.	and of		-1W -2		
/		Scl	nedule A(6), page of	<u> </u>		

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

/	Credito	r Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name				reporting renou	Liection Cycle
	Street Address	1				
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name				ÿ)	
	Street Address			-		
2	City	State	ZIP	-		
	Services or Goods Provided on Credit		Date of Extension of Credit	_		
	Name					
	Street Address					
3	City	State	ZIP	-		
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit	-		
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Enter total only if last page of schedule					
	transfer the total received this period to "Summary of Receipts,	* line 7(a))				

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Creditor	Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name					, reperming a conse	
	Street Address					
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	City State		ZIP			
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
	Name	***				
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Originally Provided on Credit Date of Original Extension					
- 1	Enter total only if last page of schedule					
	transfer the total received this period to "Summary of Receipts,"	line 7(b))				

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Committee Name Street Address City		Payment Date			Election Cycle
				Reporting Period	
City					
	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			
Committee Name	Payment Date				
Streel Address					
City	State	ZIP	- E		
Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			
Committee Name	Payment Date				
Street Address					
Sity	State	ZIP			
ate of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)			
Committee Name	Payment Date				
Street Address					
Sity	State	ZIP			
Date of Joint Fundraising Event (if applicable) Type of Shared Expense (I if applicable)			
Committee Name		Payment Date			
Street Address					
iity	State	ZIP			
ate of Joint Fundraising Event (if applicable)	Type of Shared Expense (I if applicable)			
Inter total only if last page of schedule	5." line 8)				
	ate of Joint Fundraising Event (if applicable) committee Name street Address sity ate of Joint Fundraising Event (if applicable) committee Name treet Address sity site of Joint Fundraising Event (if applicable) committee Name treet Address sity site of Joint Fundraising Event (if applicable) momittee Name treet Address sity site of Joint Fundraising Event (if applicable) nter total only if last page of schedule	ate of Joint Fundraising Event (if applicable) Type of Shared Expense Type of Shared Expense State State Type of Shared Expense It eat Address It was at a of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)	State ZIP ate of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)	state of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) It est Address State ZIP State ZIP Type of Shared Expense (if applicable) State 2IP atte of Joint Fundralating Event (if applicable) Type of Shared Expense (if applicable) Payment Date Payment Date Payment Date Payment Date Payment Date Payment Date Type of Shared Expense (if applicable)	

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor I	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased	<u>.</u>	Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased	1	Payment Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased	Payment Date				
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
+	Name					
	Street Address					
5	City	State	ZIP	-		
	Services or Goods Purchased		Payment Date	-		
- 1	Enter total only if last page of schedule					
_	transfer the total received this period to "Summary of Receipts," [ine 9)				

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

_	[nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
	Name						
	Street Address						
1	City	State	ZIP	1		<i>!</i>	
	Type of Account Receivable or Debt Owed	1	Date that Debt Accrued	7			
	Name						
	Street Address		-				
2	City	State	ZIP	1			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-			
	Name						
	Street Address						
3	City	State	ZIP	-	i		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued				
	Name						
	Street Address						
4	City	State	ZIP		2		
	Type of Account Receivable or Debt Owed	<i>a</i>	Date that Debt Accrued	1			
	Name						
	Street Address						
5	City	State	ZIP	1			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-			
	Enter total only if last page of schedu						
	(transfer the total received this period to "Summary of Rece	pts," line 10)					,

TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Fotal transfer the total received this period to "Summary of Receipts," line 11)		

Schedule A(11), page ___ of ___

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

/	/	Source	Information		Amount	Cumulative Amount this	Cumulative Amount this	\
′_					Amount	Reporting Period	Election Cycle	\backslash
		Name				\		
	Street Address							
	1	City	State	ZIP				
		Receipt Type		Receipt Date				
r		Name		ů.			Ċ	
		Street Address						
1	2	City	State	ZIP				
l		Receipt Type	Receipt Date	:				
r	1	Name		-				
		Street Address						
3	3	City	State	ZIP				
i		Receipt Type		Receipt Date				
H	1	Name						
	ŀ	Street Address						
4	1	City	State	ZIP				
		Receipt Type		Receipt Date				
-	1	Name						
	200	Street Address						
5	,	City	Stale	ZIP				
	F	Receipt Type		Receipt Date				
-	-	Enter total only if last page of schedule						
Ĺ		Enter total only if last page of scriedule transfer the total received this period to "Summary of Receipts," li	ne 12)					
/	\	,		edule A(12), page of _				/

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	**************************************	t Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Heartland Payment Systems	07/03/201	7			
	Street Address 1437 Youngtown Center, H					
1	Jeffersonville	State	47130			
	Type of Operating Expense Paid Credit Card Processing	Non-Electoral Purpose? (PAGs and Political Parties Only)		□ Cash □ Credit		
	Name Heartland Payment Systems 08/01/2017					
	Street Address 1437 Youngtown Center, H					
2	Jeffersonville	State IN	ZIP 47130			
	Type of Operating Expense Paid Credit Card Processing	(314.1 - 28	(PACs and Political Parties Only)	☐ Cash ☐ Credit		
	Name Disbursement Date Arizona Restaurant Association 07/11/2017					
3	Street Address 3333 E. Camelback Rd. S	te. 285				
J	^{City} Phoenix	AZ	85018	■ Cash		
	Type of Operating Expense Paid Postage	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Credit		
	Name	Disbursement Date				
	Street Address	l.				
4	City	State	ZIP	_		
	Type of Operating Expense Paid	Non-Electoral Purpose?	PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
5	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)			☐ Credit		
	Enter total only if last page of schedule					/

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/		mmittee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	0	☐ Credit		
	Committee Name	<u>'</u>				
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name	ı				
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	e e	□ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	El Cont		
	Committee ID Number	Date Contribution Made	e j	□ Cash □ Credit		
	Committee Name					
	Street Address	*				
5	City	State	ZIP	□ Cash		
	Committee ID Number	Committee ID Number Date Contribution Made				
	Enter total only if last page of sche					
	(transfer the total disbursed this period to "Summary of	Disbursements," line 2(a))				

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/	Political Action Comm	ittee Recipient Inf	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	BizPAC					
	Street Address 101 W. Route 66		\$ 2,000.00			
1	Flagstaff	AZ	86001	■ Cash		
	Committee D Number	07/21/201	7	☐ Credit		
	Committee Name					
	Street Address		1			
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address			1		
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made		_ □ Cash □ Credit		
	Committee Name					::
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address			1		
5	City	State	ZIP	-		
	Committee ID Number	Date Contribution Made	<u> </u>	☐ Cash☐ Credit		
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disburse	ments, line 2(b))	-			

/				1	f z = i		\
		Party Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	_/
	Committee Name						
	Street Address		***************************************				
1	City	State	ZIP				
	Committee ID Number	Date Contribution Ma	ade	□ Cash □ Credit			
	Committee Name	1					1
	Street Address						
2	City	State	ZIP				ŀ
	Committee ID Number	Date Contribution Ma	ade	□ Cash □ Credit			
V	Committee Name						$\frac{1}{2}$
	Street Address						
Control of the Contro	City	State	ZIP				
	Committee ID Number			□ Cash □ Credit			
	Committee Name						
	Street Address						
1	City	State	ZIP	□ Cash			
	Committee ID Number	Date Contribution Ma	ide	☐ Credit			
1	Committee Name	21					
	Street Address						
ŀ	City	State	ZIP	100 DH 140			
	Committee ID Number	Date Contribution Ma	nde	□ Cash □ Credit			
	Enter total only if last page of sche						
k	transfer the total disbursed this period to "Summary o		chedule B(2)(c), pag				1/

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partner	ship Recipient Inform	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution M	ade	□ Credit		
	Partnership Name					
	Street Address					
2	City State ZIP		ZIP			
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit		
	Partnership Name					
	Street Address	×40				
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution M	ade	☐ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP	El Carb		
	Corporation Commission File Number	Date Contribution M	ade	□ Cash □ Credit		
	Partnership Name					
	Street Address					
5	City	State	ZIP	II Cook		
	Corporation Commission File Number	Date Contribution Ma	ade	☐ Cash☐ Credit		
- 1	Enter total only if last page of sch					

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/ LLC Recipient Info	rmation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	de	□ Credit		
	Corporation/LLC Name					
	Street Address		-			
2	City State ZIP		ZIP			
	Corporation Commission File Number Date Contribution Made		ade	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	ber Date Contribution Made		□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	□ Cash □ Credit		
	Enter total only if last page of sche					

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orga	ınization Recipient Info	rmation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	le	□ Credit		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
3	City	State	ZIP	70.4		
	Corporation Commission File Number	Date Contribution Mac	de	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
1	City	State	ZIP	T Out		
	Corporation Commission File Number	Date Contribution Mad	e	□ Cash □ Credit		
1	Labor Organization Name					
	Street Address					050
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	e	☐ Cash☐ Credit		
	Enter total only if last page of sch					
_	transfer the total disbursed this period to "Summary	of Disbursements," line 2(f))				

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Comm	ittee Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date of Original Contribu	lion	-		120
	Committee Name		Date Refund Received			
	Street Address			1		
2	City	State	ZIP	1		
	Committee ID Number	Date of Original Contribu	ition	7		
	Committee Name		Date Refund Received			
	Street Address			1		,
3	City	State	ZIP	7		
	Committee ID Number	Date of Original Contribu	tion	1		
	Committee Name		Date Refund Received			
	Street Address					
4	City	State	ZIP	-		
	Committee ID Number	Date of Original Contribu	tion	1		
	Committee Name	1	Date Refund Received			
	Street Address		J			
;	City	State	ZIP			
	Committee ID Number	Date of Original Contribut	ion	-		
4	Enter total only if last page of schedule					

Schedule B(2)(h), page ____ of

LOANS MADE: SCHEDULE B(3)(a)

_	T _n	Borrower Information	1	Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address		-			
3	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
1	Borrower Name		w-11/4 - 12			
	Streel Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
+	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Enter total only if last page of					
_11	(transfer the total disbursed this period to "Sum	mary of Dispursements, line 3)			l	

	CANI	CIL	A [] A A	ITEEC	MADE:
L	CAN	GU	AKAI	VIELO	MADE:

SCHEDULE B(3)(b)

_	Guaranto	r Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
2	City State		ZIP			
	Borrower Name Date Loan Guaran			1		
	Guarantor Name	l				
	Street Address					
3	City	State	ZIP	-		
	Borrower Name	Date Loan Guaranteed		-		
	Guarantor Name	L				
	Street Address			-		je.
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address			-		
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed		- 0		
- 1	Enter total only if last page of schedule	a 1780a (* 1700)				
	(transfer the total disbursed this period to "Summary of Disbursen	ents," line 3(b))				

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/	Born	ower Information	18	Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made	,		
1	Street Address	~				
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outs	standing			
	Borrower Name	Date Forgiveness Made				
_	Street Address				5	
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outs	standing			
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	Stale	ZIP			
	Original Amount of Loan	Amount Still Outs	tanding			
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outs	landing			
	Borrower Name	/III	Date Forgiveness Made			
	Street Address	Street Address				
5	City	State	ZIP			
- Internation	Original Amount of Loan Amount Still Outstanding					
_	Enter total only if last page of sched	ule				

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP	7		
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			£4
	Street Address					
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name	L	Date Repayment Made			
	Street Address			-		
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address		h			
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		_		
	Lender Name	ı	Date Repayment Made			
	Street Address	1950	l .			
5	City	State	ZIP			
9	Original Amount Borrowed	Amount Still Outstanding	I.	1		
	Enter total only if last page of schedule	monte * line 3(d))		1		

INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

Lender	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		Date Interest Accrued			
Street Address		7			
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Lender Name	ı	Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
Lender Name		Date Interest Accrued			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding				
	Lender Name Street Address City Original Amount Borrowed Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State	Lander Name Date Inferest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP	Lender Name Date Interest Accrued	Lender Information Anount to Interest Accound Street Address Stree	

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	/		ipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name of Original Payor		Date Rebate/Refund Made	Sa .		
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	1	Name of Original Payor		Date Rebate/Refund Made			
		Street Address			1		
2	2	City	State	ZIP	+		
		Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	-		
-	1	Name of Original Payor		Date Rebate/Refund Made			
		Street Address			-		
3	3	City	State	ZIP	-		
		Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	-		
	+	Name of Original Payor		Date Rebate/Refund Made			
		Street Address					
4							
		City	State	ZIP			
	0	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	,	Name of Original Payor		Date Rebate/Refund Made			
		Street Address					
5		City	State	ZIP	1		
	c	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			39
_		Enter total only if last page of sche			1		
_	10	ransfer the total disbursed this period to *Summary of	Disbursements," line 4)				

Schedule B(4), page ____ of

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committee	e Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State				
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address	-				
4	City	State	ZIP			
ŀ	Committee ID Number	Date In-Kind Contribution	Made			
ı	Committee Name					
	Street Address		2:			
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	Made			
	Enter total only if last page of schedule	7 E 5(-))				

/		ction Committee Recipie	nt Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Made			
r	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	ribution Made			
	Committee Name					
3	Street Address					
١	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Made			
Г	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ibution Made			
	Committee Name					
	Street Address	· · · · · · · · · · · · · · · · · · ·				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr				
	Enter total only if last page o					
_	(transfer the total disbursed this period to "Su	mmary of Disbursements," line 5(b))				

NTRIBUTIONS TO POLITICAL PART					SCHEDU	JEE B(3)
	y Recipient Informa	tion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Committee Name						
Street Address						
City	State	ZIP				
Committee ID Number	Date In-Kind Contribution	n Made				
Committee Name						$ \cdot $
Street Address						
City	Siala	710				
	Date in-Kind Contributio	n Made				
Committee Name						
Street Address						
City	State	ZIP				
Committee ID Number	Date In-Kind Contribution	n Made				
Committee Name						1
Street Address						
City	State	ZIP	1	, a		
Committee ID Number	Date In-Kind Contribution	n Made		8)		
Committee Name						
Street Address						
City	State	ZIP				
Committee ID Number	Date In-Kind Contribution	n Made				
]]
] /
×	Sch	edule B(5)(c), page _	of		/	
	Political Part Committee Name Street Address City Committee ID Number Street Address City Committee ID Number Committee Name Street Address City Committee ID Number Political Party Recipient Informa Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Committee ID Number Date In-Kind Contribution Committee Name Street Address City State Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Street Address City State Committee ID Number Date In-Kind Contribution Political Party Recipient Information Committee Name Street Address City Siste ZIP Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Enter total only if last page of schedule Political Party Recipient Information Amount Contributed Committee Name Description of State 2IP Committee Name Social Address City State 2IP Committee Name Social Address 2IP Committee Name Street Address 2IP Committee Name 2IP State 2IP Committee Name 2IP Committee Name 2IP State 2IP Committee Name 2IP Committee Name 2IP State 2IP Committee Name 2I	Political Party Recipient Information Amount Contributed Reporting Period Contributed State Description of	Political Party Recipient Information Amount Contributed Amount this Reporting Period Committee Name Store Address One 15-500 Committee 1D Number One 15-			

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

ı	N.	KIND	CONTRIBI	ITIONS	TO PAR	TNERSHIPS
ı	11.	-IVIIVD	CONTRICT		IUFAR	LINEROLLEO

SCHEDULE B(5)(d)

	Partnership F	Recipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name	1818				
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made		ē	
Partnership Name						
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Partnership Name					
3	Street Address					
	City	State	ZIP	\dashv		
	Corporation Commission File Number	Date In-Kind Centribution	n Made			
1	Partnership Name					
	Street Address		5.8			
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Partnership Name				and the second s	
	Street Address					
	City	State				
	Corporation Commission File Number	Date In-Kind Contribution				
+	Enter total only if last page of schedule	L				

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

/	Corporation / L	LC Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				, ropening remark	
	Street Address		-			
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Corporation/LLC Name					
	Street Address			-		
2	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Corporation/LLC Name		<u>()</u>			3:
	Street Address		-			
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	ı Made	-		
	Corporation/LLC Name					
	Street Address			(40)		
4	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation/LLC Name					
	Street Address		-			
5	City	State	ZIP	-		
	Corporation Commission File Number	Dale In-Kind Contribution	Made	-		
_	Enter total only if last page of schedul	e				

Schedule B(5)(e), page ___ of ___

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	/	Labor Organization	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
		Labor Organization Name					
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Labor Organization Name					
	_	Street Address					
	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Labor Organization Name					
		Street Address					
'	3	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Made			
		Labor Organization Name	-				
		Street Address					
4	4	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution I	Made	к		
Γ		Labor Organization Name					
	1	Street Address					
5		City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution I	Made			
	- 1	Enter total only if last page of schedule	nents," line 5(f))				
/	\						
	•		Sche				

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure	Recipient Informa	ation	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	.,		1		
1	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (i	including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (i	ncluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address			1		
3	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	ncluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)	9		
	Street Address					
	City	State	ZIP	-		
-	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
-1	Enter total only if last page of schedule					
	Dispu	mic v)				

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SCHEDULE B(7)

/	/	Expenditure	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Recipient Name Mode of Advertising					
		Street Address					
	1	City	State	ZIP			
		Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	□ Cash		
		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
		Recipient Name		Mode of Advertising (TV, mail, etc)			
		Street Address					
	2	City	State	ZIP			
		Ballot Measure(s) Supported (including % supported)	including % opposed)	□ Cash			
		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
1		Recipient Name		Mode of Advertising (TV, mail, etc)			
		Street Address					
	3	City	State	ZIP	1		
		Ballot Measure(s) Supported (including % supported)	l including % opposed)	□ Cash			
		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
		Recipient Name		Mode of Advertising (TV, mail, etc)			
		Street Address					
	4	City	State	ZIP	-		
	İ	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (i	I ncluding % opposed)	□ Cash		
		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
	- 1	Enter total only if last page of schedule					
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,	/		Sci	edule B(7), page of			

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SCHEDULE B(8)

	Expenditure	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle
	Recipient Name	Mode of Advertising (TV, mail, etc)				
	Street Address					
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reco	alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
City State		State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reca	l alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name	ll .	Mode of Advertising (TV, mail, etc)			
I	Street Address			1	i;	
ŀ	City	State	ZIP	1		
ŀ	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reca	lled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
t	Recipient Name		Mode of Advertising (TV, mail, etc)			
1	Street Address		l			
-	City	State	ZIP			
200-2	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		□ Cash		
-	Date of First Publication, Display, Delivery, or Broadcast	r, Delivery, or Broadcast Office Held				
	Enter total only if last page of schedule		Ē			
Ŋ	transfer the total disbursed this period to "Summary of Disbu	sements, line 6)				

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Candidate Name	Date Benefit Provided				
Street Address			1		
City	State	ZIP	-		
Type of Benefit Provided	J.				
Notes:			1		
Candidate Name		Date Benefit Provided			
Street Address		1			
City	State	ZIP	1		
Type of Benefit Provided		_			
Notes:			1		
Candidate Name	Date Benefit Provided				
Street Address		1			
City	State	ZIP	1		
Type of Benefit Provided	L				
votes;	ž				
Candidate Name	Date Benefit Provided				
Street Address		<u>I</u>	1		
City	State	ZIP			
Type of Benefit Provided		-			
lotes:		-			
Enter total only if last page of schedule					
	Candidate Name Street Address City Type of Benefit Provided Notes: Candidate Name Street Address City Type of Benefit Provided Notes: Candidate Name Street Address City Type of Benefit Provided Street Address City Type of Benefit Provided Street Address City Type of Benefit Provided	Street Address City State Type of Benefit Provided Notes: Candidate Name Street Address City State Type of Benefit Provided Street Address Candidate Name Street Address City State Type of Benefit Provided Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Notes: City State ZIP Street Address City State ZIP Type of Benefit Provided Street Address City State ZIP Type of Benefit Provided Street Address City State ZIP Type of Benefit Provided Street Address City State ZIP Type of Benefit Provided Street Address City State ZIP Type of Benefit Provided Street Address Clandidate Name Date Benefit Provided Street Address Clandidate Name ZIP Type of Benefit Provided	Candidate Name Date Benefit Provided Street Address City State ZIP Type of Benefit Provided State Address Clay State ZIP Candidate Name Date Benefit Provided State Address City State ZIP Type of Benefit Provided State ZIP Type of Benefit Provided State ZIP Type of Benefit Provided City State ZIP Type of Benefit Provided State Address City State ZIP Type of Benefit Provided State Address City State ZIP Type of Benefit Provided State Address City State ZIP Type of Benefit Provided State ZIP Type of Benefit Provided State ZIP Type of Benefit Provided	Benefitted Candidate Benefit Provided Candidate Name Date Benefit Provided Street Address City State City State Date Benefit Provided Street Address City State ZIP Type of Benefit Provided Street Address City State ZIP Type of Benefit Provided Street Address City State ZIP Type of Benefit Provided	

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient	Committee Information	on	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Payment Date				
	Street Address					
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)	☐ Credit		
	Committee Name	*1	Payment Date			
	Street Address					
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)	□ Cash □ Credit		
	Committee Name	Payment Date				
	Street Address					
3	City	State	ZIP	E Cash		
	Date of Joint Fundraising Event (if applicable)	(if applicable)	□ Cash □ Credit			
	Committee Name		Payment Date			
ì	Street Address	2.11				
4	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Credit		
-	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP	II Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	☐ Cash☐ Credit		
	Enter total only if last page of sched					
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REIMBURSEMENTS MADE:

SCHEDULE B(11)

rvices or Goods Reimbursed ime reet Address	State	ZIP Reimbursement Date	☐ Cash☐ Credit				
rvices or Goods Reimbursed ame reet Address by rvices or Goods Reimbursed		Reimbursement Date					
rvices or Goods Reimbursed reet Address ty rvices or Goods Reimbursed		Reimbursement Date					
reet Address Ty rvices or Goods Reimbursed	State						
reet Address by rvices or Goods Reimbursed	State	ZIP					
rvices or Goods Reimbursed	State	ZIP					
rvices or Goods Reimbursed	State	ZIP					
4			□ Cash				
ime	Services or Goods Reimbursed						
reet Address							
у	State	ZIP					
vices or Goods Reimbursed	Reimbursement Date	☐ Cash	☐ Credit				
me							
eet Address							
y	State	ZIP	- Cook				
Services or Goods Reimbursed		Reimbursement Date	☐ Cash				
me							
eet Address							
,	State	ZIP	- Cort				
vices or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit				
nter total only if last page of schedule	ante "lina 11)	L					
vi m	ces or Goods Reimbursed et Address ces or Goods Reimbursed et Address ces or Goods Reimbursed ces or Goods Reimbursed	st Address State ces or Goods Reimbursed e et Address State State ces or Goods Reimbursed er total only if last page of schedule fer the total disbursed this period to "Summary of Disbursements," line 11)	Reimbursement Date Reimbursement Date Reimbursement Date State ZIP Ces or Goods Reimbursed Reimbursement Date Reimbursement Date Reimbursement Date Reimbursement Date Reimbursement Date Ces or Goods Reimbursed Reimbursed Reimbursement Date Ces or Goods Reimbursed Reimbursement Date	Cash Credit	ces or Goods Reimbursed Reimbursement Date Reimbursement Date Cash Credit Credit Credit		

OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	formation		Amount	Amount this Reporting Period	Amount this Election Cycle
Name					
Street Address					
City	State	ZIP	-		
Type of Account Payable or Debt Owed		Date that Debt Accrued			
Name					
Street Address			_		
City	State	ZIP	1		
Type of Account Payable or Debt Owed		Date that Debt Accrued	1		
Name					
Street Address					
City	State	ZIP	1		1
Type of Account Payable or Debt Owed		Date that Debt Accrued	7		
Name					
Street Address	150				
City	State	ZIP			
ype of Account Payable or Debt Owed		Date that Debt Accrued			
Name					
Street Address					
City	State	ZIP	1		
ype of Account Payable or Debt Owed		Date that Debt Accrued			
Enter total only if last page of schedule	line 12)		T.		
	Type of Account Payable or Debt Owed Name Street Address City Type of Account Payable or Debt Owed Name Street Address City Type of Account Payable or Debt Owed Name Street Address City Type of Account Payable or Debt Owed Name Street Address City Type of Account Payable or Debt Owed Name Street Address City Type of Account Payable or Debt Owed Type of Account Payable or Debt Owed City Type of Account Payable or Debt Owed	Type of Account Payable or Debt Owed Name Street Address City State Type of Account Payable or Debt Owed Name Street Address City State State Street Address City State State Street Address City State	Type of Account Payable or Debt Owed Name Street Address City State ZIP Type of Account Payable or Debt Owed Date that Debt Accrued Date that Debt Accrued Date that Debt Accrued Street Address City State ZIP Street Address City State ZIP Date that Debt Accrued Date that Debt Accrued Date that Debt Accrued Street Address City State ZIP Date that Debt Accrued Street Address City State ZIP Date that Debt Accrued Type of Account Payable or Debt Owed Date that Debt Accrued	Type of Account Payable or Debt Owed Date that Debt Accrued Street Address City State Zip State Date that Debt Accrued Date that Debt Accrued State Street Address City State Zip State Date that Debt Accrued Date that Debt Accrued Street Address Sity State Zip State Date that Debt Accrued Date that Debt Accrued State State Zip State Date that Debt Accrued Date that Debt Accrued	

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
tecipient of Surplus Monies / Source of Transferred Debt		
tecipient of Surplus Monies / Source of Transferred Debt		
otal		

Schedule B(13), page ___ of ___

MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

_		t Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
1	Street Address					
	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Disbursement Type	Disbursement Date	□ Cash □ Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name		I.			
	Street Address					
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule					
_1	(transfer the total disbursed this period to "Summary of Disburse	ments," line 14)				