## **Re: Finance Report**

Gerich, Ashley <Ashley.Gerich@mitchellhamline.edu> Fri 4/15/2022 5:07 PM

To: Sue Stein <sstein@bullheadcityaz.gov>

1 2 attachments (5 MB)

April 15th report.pdf; STATE OF ARIZONA.pdf;

Attached is my file. Thank you.

### Ashley A. Gerich

Mitchell Hamline School of Law Class of 2022 | *Juris Doctor Candidate* #217311 (Cohort 6)

COMMITTEE	INFORMATION	(required):
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	Committee Information:	Committee Name:	Committe to Elect	t Ashley Gerich
CANDI	DATE INFORMATION (only if fi	ling as a candidate con	nmittee):	
	Office Sought.	☐ County Office: ☑ City/Town Office	∍: <mark>Mayor</mark>	☐ Special District Office: ☐ School Board District:
	Cumulative Report:			
	Check here if this is th	e candidate committees	s first, cumulative report for t	the election cycle. Also select appropriate Reporting Period below.
	. • ,	d start date (which sup	ersedes the start date for the	e Reporting Period selected below):
REPOR	RTING PERIOD (check one):			

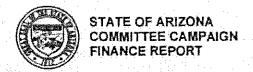
	REPORTING PERIOD	REPORT DUE
	2020 4th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 2021
	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 2022
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
1	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
	2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	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, A.R.S. §§ 1-243(A) and 1-303.

### 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)		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	4780	
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	527.16	
(d) = Balance at close of reporting period	4252.84	

<sup>□</sup> Check here if filing no 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.



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.

Ashle	y Geric	h	i - Line Madi			
Printed	Name c	of Co	nma	tee T	reasu	rer

Signature of Committee Treasurer

04-15-22

Date

SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100	3640.00	
	(b) In-State Individuals - \$100 or Less (Aggregate)	1140.00	
	(c) Out-of-State Individuals		
	(d) Candidate Committees		
	(e) Political Action Committees		
*******	(f) Political Parties		
	(g) Partnerships		The second secon
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		Alexander and the second and the sec
	(j) Candidate's Personal Monies (Candidate Committees Only)	//////////////////////////////////////	The second secon
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		
	(I) Refunds Given Back to Contributors	4700	
	(m) Net Monetary Contributions (subtract 1(I) from 1(k))	4780	
	Loans (a) Loans Received		Control of the contro
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		Prog. 1 - According to 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	(d) Interest Accrued on Loans Made	——————————————————————————————————————	Committee of the commit
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
	Rebates and Refunds Received		American State of the Control of the
	Interest Accrued on Committee Monies		
	In-Kind Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals	A STATE OF THE STA	
_	(d) Candidate Committees		
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)	The second secon	
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
_	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
	Joint Fundraising / Shared Expense Payments Received		
_	Payments Received for Goods / Services		
) <u>.</u>			7-1
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
2.	Miscellaneous Receipts (use cash and/or equity as applicable)	1	



### SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	527.16	
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))	527.16	
3.	Loans		
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		1710 (1) (1717 (2) 1717 (2) (2) (2) (2) (2) (2) (2)
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4.	Rebates and Refunds Made (Non-Contributions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties	The state of the s	
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Contributions Subtotal (add 5(a) through 5(f))		
ò.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
3.	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 Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/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: add 3(f), 5(g), & 12-15)	527.16	



MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:\*

SCHEDULE A(1)(a)

Indiv	idual Contributor Inform	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc	
Donna Ramirez		Date Contribution Received 03-15-22			
3570 Gloria Ave			500.00	Name of the state	
Bullhead City	State AZ	86442	500.00		
Occupation Retired	Retired				
Rose Jacobs		Date Contribution Received 03-22-22			
Street Address 2958 Los Pueblos D	)rive		E00.00		
Bullhead City	State AZ	<sup>ZIP</sup> 86642	500.00		
Occupation Retired	Employer Retired				
Name Dennis R De Dosiei	Dennis R De Dosier  Dennis R De Dosier  Date Contribution Received 03-22-22				
Street Address 1851 Surf and Sand			200.00		
Bullhead City	State AZ	86442	200.00		
Occupation Retired	Employer Retired	·			
Name Guilermo Zegarra		Date Contribution Received 1-20-22			
Street Address 2182 Highway 95			4000 00		
Bullhead City	State AZ	86442	1000.00		
Occupation Doctor	Employer Self				
Name Dave Lords		Date Contribution Received			
			1000.00		
Bullhead City	State AZ	<sup>ZIP</sup> 86442	1000.00		
Occupation Development	Employer Self				

\*If in-state individual contributions of \$100 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 IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):\*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from In-State Individuals - \$100 or Less	1140.00	
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

Schedule A(1)(b), page\_\_\_\_ of \_\_\_\_

<sup>\*</sup>If in-state individual contributions of more than \$100 are listed on Schedule A(1)(a), do not include them.



# STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

#### MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

_	Individual Cont	ributor Information	1	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
7	Name		Date Contribution Received			
	Street Address			<b>-</b>	1111	
1	City	State	ZIP			:
ļ	Occupation	Employer	<u> </u>			
	Name	<u> </u>	Date Contribution Received	<u> </u>		
	Street Address		<u> </u>			
2	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	Name	<u> </u>	Date Contribution Received			
	Street Address			<b>-</b>		
3	City	State	ZIP			
	Occupation	Employer				
	Name	<u> </u>	Date Contribution Received			
	Streel Address	<u>.</u>				
4	City	State	ΖŧΡ			
	Occupation	Employer	<u> </u>			
	Name	<u> </u>	Date Contribution Received			
	Street Address	et Address				
5	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receipts,"	line 1(c))			



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/	Candidate C	Committee Contributor	Information	Amount Receive	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					}
1	City	State	ZIP			
	Committee ID Number	Date Contribution	Received			
	Committee Name		<del>77</del>			
	Street Address		<u> </u>			
2	City	State	ZIP			
	Committee ID Number	Date Contribution	Received			
-	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZiP			
	Committee ID Number Date Contribution Received					
-	Committee Name		<del></del>			
	Street Address					
5	City	State	ZIP			

Schedule A(1)(d), page\_\_\_\_ of \_\_\_\_



COMMITTEE	ID	NUMBER

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

	Political Action Commi	tee 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	ad .			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name			***************************************		
	Street Address					1
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name	<u> </u>				
	Street Address					
4	City	State	ZIP	1		
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number			: 		
	Enter total only if last page of schedule (transfer the total received this period to "Su	nmary of Receipts,"	line 1(e))			



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

	Political Party Co	ntributor Informat	ion	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					
	Street Address	reet Address				: 
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
1	Committee Name	<u> </u>				W <sub>0,1,1</sub>
	Street Address					
,	City	Stale	ZIP			
	Committee ID Number	Date Contribution Receiv	ed .			
1	Committee Name	<u> </u>				
	Street Address					
1	City	State	ZIP			
	Committee iD Number	Date Contribution Receiv	red		1	
	Committee Name			<u> </u>		
	Street Address					
5	City	State	ZiP			
	Committee ID Number	Date Contribution Receiv	ned			
-	Enter total only if last page of schedule (transfer the total received this period to "Sum					



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name				<u> </u>	
ŀ	Street Address					
-	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	d .			
1	Partnership Name					
	Street Address					
2	City	State	ZIP			:
	Corporation Commission File Number	Date Contribution Receive	ed .			
	Partnership Name	<u> </u>	400-0-			
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Parinership Name	<u>.                                    </u>				
	Streel Address					
4	City	State	ZiP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Partnership Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved			
	Enter total only if last page of schedule (transfer the total received this period to "Sun					



### MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC	Contributor Inform	ation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name						
	Street Address	· · · · · · · · · · · · · · · · · · ·					
-	City	State	ZIP	-			
	Corporation Commission File Number	Date Contribution Receive	l d		1		
1	Corporation/LLC Name					,, 7 <sub>911</sub> ,	
	Street Address						
	City	State	ZIP				
	Carporation Commission File Number	Date Contribution Receive	ed .				
1	Corporation/LLC Name				\\		
	Straet Address	<u> </u>					
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Receive	ed				
1	Corporation/LLC Name						
1	Street Address						
,	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Receiv	ed .				
	Corporation/LLC Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Receiv	vad				
4	Enter total only if last page of schedule						

Schedule A(1)(h), page\_\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organi	zation Contributor In	nformation	Amount Received	Amount this Reporting Period	Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
1	Сну	State	Z∦P			
	Corporation Commission File Number					
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
-	Labor Organization Name				<u>[                                    </u>	
	Street Address					
3	City	State	ZIP		1	
	Corporation Commission File Number	Date Contribution	Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZiP			
	Corporation Commission File Number	Date Contribution	Received			
_	Labor Organization Name	1				
	Streel Address					
5	City	State	ZIP			
	Corporation Commission File Number	Corporation Commission File Number Date Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(I))					



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

	Candida	ate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
ļ	Occupation	Employer				
	Name	<u></u>	Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	lame		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	Date Contribution Received				
	Street Address	<u> </u>				
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP		<b>*</b>	
	Occupation	Employer				
	Enter total only if last page of schedul (transfer the total received this period to "S	e ummary of Receip	ots," line 1(j))			
					1	<u></u>



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	Contributo	r Information		Amount Refunded	Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			
ľ	Street Address					
Ī	City	State	ZiP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
2	City	State	Z!P	-		
	ID Number (if applicable)		Date of Original Contribution	-		
	Name		Date Contribution Refunded			
	Street Address			_	:	
	City	State	ZIP	-		
	) Number (if applicable)		Date of Original Contribution	_		
	ame		Date Contribution Refunded			
	Street Address			_		
	City	State	ZIP	-		
	ID Number (if applicable)		Date of Original Contribution	-		
-	Name		Date Contribution Refunded			*****
	Street Address	· · · · · · · · · · · · · · · · · · ·		-		
	City	State	ZIP	1		
	iD Number (if applicable)		Date of Original Contribution	1		
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(I))					



LOANS RECEIVED: SCHEDULE A(2)(a)

		Amount Received	Amount this Reporting Period	Amount this `Election Cycle
Lender Name Date Loan Received  Street Address				
ate	ZIP			
n-Electoral Purpose?	L (PACs and Political Parties Only)		T I A A A A A A A A A A A A A A A A A A	
ate Loan Received				
Street Address				
ate	ZIP			
Non-Electoral Purpose? (PACs and Political Parties Only)				
ate Loan Received				
		•••		
ate	ZIP			
Non-Electoral Purpose? (PACs and Political Parties Only)				
Date Loan Received				
	and the state of t			
ate	ZIP			
	(PACs and Political Parties Only)		The state of the s	
Date Loan Received				
ate	ZiP	-	v.	
on-Electoral Purpose?	(PACs and Political Parties Only)			
ary of Receipts,"	line 2(a))		1	
	of Receipts,"	of Receipts," line 2(a))	of Receipts," line 2(a))	of Receipts," line 2(a))





FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

	Lende	er Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Lender Name		Date Forgiveness Received		<u> </u>	
-	Street Address					
ŀ	City	State	ZIP			
-	Original Amount of Loan	Amount Still Outstan	ding			
	Lender Name		Date Forgiveness Received			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan Amount Still Outstandin		ding	_		
+	Lender Name		Date Forgiveness Received			***
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstan	ding	_		
1	Lender Name	der Name				
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstan	iding			
1	Lender Name		Date Forgiveness Received			
	Streel Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstar	nding			
	Enter total only if last page of schedu (transfer the total received this period to "S	le				



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borro	wer Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ng			
	Borrower Name		Date Repayment Received			
	Street Address					
2	City	State	ZiP			
	Original Amount Borrowed	Amount Still Outstand	ng			
	Воггоwer Name		Date Repayment Received			
	Street Address					
3	City	State	ZiP			
	Original Amount Borrowed	Amount Still Outstand	ing			
	Borrower Name		Date Repayment Received			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ing			
_	Borrower Name		Date Repayment Received			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ing			
	Enter total only if last page of scheduler total only if last page of scheduler (transfer the total received this period to "	l ule Summary of Receipts	s," line 2(c))			



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		7 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	
	Street Address	Street Address				
1	City	State	ZiP			
	Original Amount Borrowed	Amount Still Outstanding			3	
	Borrower Name	L	Date interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Βοποινιεά .	Amount Still Outstanding	L			
	Borrower Name	Barrower Name				<u> </u>
	Street Address	<u></u>	<u> </u>			
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Sorrower Name	Date interest Accrued				
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Barrower Name		Date interest Accrued			
!	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Original Amount Borrowed Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 2(d))			
			edule A(2)(d), page			

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

	Payor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Payor Name		Date Rebate/Refund Received			
3570 Gloria Ave			<u></u>		
Bullhead Clty	AZ	86442			
Original Purchase Amount Reason for Refund/Reba		d/Rebate	·		
Payor Name		Date Rebate/Refund Received			
Street Address 2958 Los Pueblos E	Drive				
Bullhead City	State AZ	86642			
Reason for Refund/Rebate		d/Rebate			
Payor Name	<u> </u>	Date Rebate/Refund Received			
Street Address 1851 Surf and Sand	1				
Bullhead City	State AZ	<sup>zip</sup> 86442	_]		
Original Purchase Amount Reason for Refund/Rebi		d/Rebøle		!	
Payor Name	Payor Name				
Street Address 2182 Highway 95					
Bullhead City	State AZ	<sup>ZIP</sup> 86442			
Original Purchase Amount	Reason for Refur	d/Rebate		-	
Payor Name		Date Rebate/Refund Received			
Street Address 7333 Chaparral Rd	Apt.201				
Bullhead City	State AZ	<sup>Zip</sup> 86442			
Original Purchase Amount Reason for Refund/Rebate					
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 3)					



INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ccount with Interest Earned (Bank Name / Type of Account)		
ccount with Interest Earned (Bank Name / Type of Account)		
sccount with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)	11000	
account with Interest Earned (Bank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)		Allow to

Schedule A(4), page\_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:\*

SCHEDULE A(5)(a)

Individual Contributor Information			nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
]	Name		Date In-Kind Contribution Received			1
	Street Address			-		
	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP	_	-	
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address			<u>-</u>		
	City	State	ZIP	1		
	Occupation	Employer				
1	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address			_		
	City	State	ZiP	<b>-</b>		
	Occupation	Employer				
-	Enter total only if last pag (transfer the total received th	ge of schedule lis period to "Summary of Recei	ipts," line 5(a))	<u> </u>		

Schedule A(5)(a), page\_\_\_\_ of \_\_\_



COMMITTEE	ID NUMBER

### IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 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))		

<sup>\*</sup>If contributions of more than \$100 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).



IN-KIND CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(5)(c)

/	Individe	ual Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Donna Ramirez		Date In-Kind Contribution Received			
	Street Address 3570 Gloria Ave			-		
1	Bullhead City	State AZ	<sup>ZIP</sup> 86442			
	Occupation	Retired				
	Rose Jacobs		Date In-Kind Contribution Received			****
	2958 Los Pueblos Dr	ive				
2	Bullhead Clty	State AZ	<sup>2IP</sup> 86642			
	Occupation	Retired				
	Dennis R De Dosier	Date In-Kind Contribution Received				
	Street Address 1851 Surf and Sand					
3	Bullhead City	State AZ	86442			
	Occupation	Retired				
	Guilermo Zegarra		Date In-Klind Contribution Received			
	Street Address 2182 Highway 95					
4	Bullhead City	State AZ	zip 86442			
	Occupation	Employer Self				
	Name Dave Lords		Date In-Kind Contribution Received			
	Street Address 7333 Chaparral Rd A	.pt.201				
5	Bullhead City	State AZ	<sup>ZIP</sup> 86442			
	Occupation	Employer Self				
					<del> </del>	

Schedule A(5)(c), page\_\_\_ of \_



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

_	Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address				!	
1	City	State	ZiP	1		
	Committee ID Number	Date In-Kind Contribution	Received	<u> </u>		
	Committee Name	<u> </u>				
	Street Address			-		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
_	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
-	Committee Name					
	Street Address					
4	City	State	ZIP			A CALLEST AND A
	Committee ID Number	Date in-Kind Contribution	Received	4		
	Committee Name	I	Auros			
	Street Address					
5	City	State	ZiP			44
	Committee ID Number	Date in-Kind Contribution	) Received			4444
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(d))			
_		Sch			***************************************	



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

	Political Action Committe	ee Contributor Inf	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
-	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	<u> </u>				
	Street Address			-		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
3	City	State	ZIP	4		
	Committee ID Number	Date In-Kind Contribution	Received	4	:	
	Committee Name	<u> </u>				
	Street Address	Street Address				
1	City	State	ZiP	<b>-</b>		
-	Committee iD Number	Date In-Kind Contribution	Received	-		
	Committee Name	1				
	Street Address			_		
5	City	State	ZIP	1		
	Committee ID Number	Date In-Kind Contribution	n Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(e))	<u> </u>		



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Political F	arty Contributor Infor	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 In-Kind Contrik	oution Received			i
	Committee Name	. <u></u>				
	Street Address	Street Address				
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	button Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
_	Committee Name					
	Street Address					
4	City	State	ZiP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name	<u></u> .	.407			
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Received			
_	Enter total only if last page of so (transfer the total received this period	hedule	uts " line 5/fl\			



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersh	nip Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name	HITISA, ANTISA,				
	Street Address			,		
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Received			
1	Partnership Name		-Masses			
	Street Address	Street Address				
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contril	bution Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contril	bution Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibution Received			
-	Enter total only if last page of sch (transfer the total received this period	nedule	4- N.E C/. \\			



COMMITTEE	ID	NUMBER	

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation /	LLC Contributor Inf	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative ` Amount this Election Cycle
Ī	Corporation/LLC Name					
ŀ	Street Address					
,	City State ZIP					
	Corporation Commission File Number	Date In-Kind Contrib	Aution Received			j
	Corporation/LLC Name	<u> </u>				
	Street Address					
1	City	State	ZiP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibution Received			
	Corporation/LLC Name					
	Street Address					
,	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contri	bution Received			
	Corporation/LLC Name					
Street Address						
,	City	State	ZiP			
	Corporation Commission File Number	Date In-Kind Contri	l ibution Received			
-	Enter total only if last page of sch (transfer the total received this period	edule	ats " line 5/h)\			<u> </u>



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organiza	tion Contributor I	nformation	Amount Received	Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address			\$ 		
1	City	State	ZIP			
ŀ	Corporation Commission File Number Date in-Kind Contribution Received					
1	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	Inbution Received			
1	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	Inbution Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Con	tribution Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZłP			
	Corporation Commission File Number					
	Enter total only if last page of scheo (transfer the total received this period to					



COMMIT	TEE	lD	NUMBER

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

SCHEDULE A(5)(j)

/						
	Candidate	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address		{			
1	City	State	ZIP	Ì		
ļ	Asset of Property Contributed					
1	Name	<del></del>	Date in-Kind Contribution Received			
Ì	Street Address		1			
2	City	State	ZIP		;	
	Asset or Property Contributed					
	Name	Date In-Kind Contribution Received			<del></del>	
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name			***		
	Street Address					
4	City	State	ZIP			
	Anator Danah Carlindad		<u> </u>			
	Asset or Property Contributed					
	Name Date In-Kind Contribution Recei					
	Street Address	Street Address				
5	City	State	ZIP			
	Asset or Property Contributed	Assal or Property Contributed				
_						
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,"	line 5(j))			



COMMITTEE	ID	NUMBER

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

SCHEDULE A(6)

	Source	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
7	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP		3	
	Type of Item Donated			-		
1	Name	···········	Date In-Kind Donation Received		Massur, 14.49%	
	Street Address	<u> </u>				
2	City	Stale	ZIP	_		
	Type of item Donated					
	Name	AHIV-	Date In-Kind Donation Received			
	Street Address					
3	City	State	ZIP			
	Type of item Donated					
	Neme		Date In-Kind Donation Received			· · · · · · · · · · · · · · · · · · ·
	Street Address					
4	City	State	ZiP			
	Type of Item Donated					
_	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated	1	_			
-	Enter total only if last page of schedu (transfer the total received this period to "S	e	inte " line 6)			1-1
_	functioner the total received this period to "S	ummary of Rece	ipia, mie oj			



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

	Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address			İ		
1	City	State	ZIP			
8	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit				
$\dagger$	Name					
	Street Address					
3	City	State	ZIP			
,	Services or Goods Provided on Credit		Date of Extension of Credit			
1	Name					
	Street Address	-				
4	City	State	ZIP			
	Services or Goods Provided on Credit	<u></u>	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 "Sun	<u></u> _				



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					
j	Street Address				; }	
1	City	State	ZIP			:
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	!		
	Name	- <del></del>				
	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		ı	
	Name					
	Streat Address		-			
5	City	State	ZiP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receints	<u> </u>			
_	<u> </u>	····			<u> </u>	L



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Co	mmittee Informat	ion	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Committee Name	Payment Date				
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address	,				
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
+	Committee Name		Payment Date			
	Streel Address					
,	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
1	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)			
-	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 8)					



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

,	Payor Ir	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address		to the second se			
1	City	State	ZIP		:	
	Services or Goods Purchased		Payment Date			i İ
	Name	·				
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased	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		<b>T</b>	
	Services or Goods Purchased Payment Date					
-	Enter total only if last page of schedule (transfer the total received this period to "Surr	mary of Receipts	," line 9)			
	<del>//</del>				·	<del>'</del>



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Inf	Information			Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address		and the second s			
1	City	State	ZĮP	_		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_	Name					
	Street Address			<b></b>		
2	City	State	ZiP	_		i
	Type of Account Receivable or Debt Owed	Date that Debt Accrued			l	
	Name	H44, 480.				
	Sireel Address				; •	
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP	_		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address	<u></u>				
5	City	State	ZIP	_		
	Type of Account Receivable or Debt Owed	Date that Debt Accrued	_			
	Enter total only if last page of schedul (transfer the total received this period to "Si	e ummary of Receipt	ts," (ine 10)			
_	<u> </u>					



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

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

Schedule A(11), page\_\_\_\_ of \_\_\_



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

		nformation		Amount	Amount this Reporting Period	Amount this Election Cycle
1	Name					
	Street Address				3	
1   7	City	State	ZIP			
R	leceipt Type		Receipt Date			
Ī	¥ame					
٤	Street Address					
2	City	State	ZIP			
R	Receipt Type		Receipt Date			
†	Name		<u> </u>			
1	Street Address					
3 -	City	State	ZIP			
F	Receipt Type		Receipt Date			
	Name					
ţ	Street Address					
4 -	City	State	ZIP			
F	Receipt Type		Receipt Date			
-	Name	· · · · · · · · · · · · · · · · · · ·				
	Street Address					
5	City	State	ZIP			
F	Receipt Type	Receipt Date				
E (	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	]			



COMMITTEE ID NUM	BER

## DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

_	F	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address				)	
	City	State	ZIP	<del> </del>		
	Type of Operating Expense Paid	Non-Electoral Purp	ose? (PACs and Political Parties Only)	□ Cash □ Credit		
1	Name Disbursement Date					·
	Street Address					
,	City	State	ZIP			
ļ	Type of Operating Expense Paid	Non-Electoral Purp	Non-Electoral Purpose? (PACs and Political Parties Only)			· !
1	Name	Disbursement Dat	<u>le</u>			
	Street Address					
3	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	1	Non-Electoral Purpose? (PACs and Political Parties Only)			
-	Name	Disbursement Dat	te		***************************************	
	Street Address	_				
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Cash □ Credit		
1	Name	Disbursement Date	te			
	Street Address			_		ļ
5	City	State	ZIP	□ Cash		3
	Type of Operating Expense Paid	Non-Electoral Purp	oose? (PACs and Poštical Parties Only)	☐ Credit		
	Enter total only if last page of so	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □				
	(transfer the total disbursed this peri	od to "Summary of Disbu	ursements," line 1)			



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/ <del> </del>	Candidate Committe	Recipient Inform	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Street Address					
	Street Augress					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	☐ Credit			
1	Committee Name	<del></del>				
5	Street Address					
2	City	State	ZIP			
ŀ	Committee ID Number	☐ Cash☐ Credit		,		
1	Committee Name					
-	Streel Address					
3	City	State	ZIP			
-	Committee ID Number Date Contribution Made		□ Cash □ Credit			
+	Committee Name					
	Street Address					
4	City	State	ZIP			
-	Committee ID Number	Date Contribution Made	<u> </u>	☐ Cash☐ Credit		
+	Committee Name	<u></u>				
	Street Address					
5	City	State	ZIP			
	Committee ID Number Date Contribution Made			☐ Cash☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sui					
			edule B(2)(a), page_			<u> </u>

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Comm	ittee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
7	Committee Name			-		
	Street Address					
1	City	State	ZIP	□ Cash		
Ì	Committee ID Nureber	Date Contribution Made	•	☐ Credit		ľ
	Committee Name	<u></u>				
	Street Address					
2	City	State	ZIP	☐ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	☐ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
_	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
_	Street Address					
5	City	State	ZIP	☐ Cash	The same same same same same same same sam	
_	Committee ID Number Date Contribution Made			☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	ummary of Disburse	ments," line 2(b))			
			edule B(2)(b), page			



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

Political Party Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
7	Committee Name	****				
	Street Address					
1	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution M	ade	☐ Credit		
	Committee Name			V		
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			□ Credit		
	Committee Name					
3	Street Address					
	City	State	ZIP	□ Cash		:
	Committee ID Number	Date Contribution	Made	☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution N	kade	☐ Credit		
_	Committee Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Enter total only if last page of (transfer the total disbursed this p	schedule erlod to "Summary of Disbu	ursements," line 2(c))			



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnersl	nip Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
-	Street Address					
1	City	State	ZIP	□ Cash		
ļ	Corporation Commission File Number	Date Contribution Ma	de	☐ Credit	!	
1	Partnership Name			17,		
	Street Address					
2	City	State	Zip			
	Corporation Commission File Number	Date Contribution M	ade	☐ Cash ☐ Credit		
+	Partnership Name					
	Street Address					
3	City	State	ZIP	□ Cash		
Ì	Corporation Commission File Number Date Contribution Made			☐ Credit		
1	Partnership Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution M	lade	☐ Credit		
1	Partnership Name	<u></u>			_	
	Street Address					
5	City State ZIP		□ Cash			
	Corporation Commission File Number Date Contribution Made			☐ Cash		
_	Enter total only if last page of sch (transfer the total disbursed this period	edule d to "Summary of Disbu	rsements," line 2(d))			



COMMITTEE ID NUMBER	1

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/LLC Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Straet Address				2	
	City	State	ZIP	T Cook		
}	Corporation Commission File Number	Date Contribution M	ade	☐ Cash☐ Credit		
	Corporation/LLC Name					<u> </u>
	Street Address		<u> </u>			
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution &	Ande	☐ Credit	-	
1	Corporation/LLC Name					
	Street Address	Street Address				
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution N	Aade	☐ Credit		
	Corporation/LLC Name			<u></u>		
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution N	Made	□ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State ZIP		□ Cash		
	Corporation Commission File Number Date Contribution Made			□ Credit		
	Enter total only if last page of sch (transfer the total disbursed this period	edule I to "Summary of Disbu	rsements," line 2(e))			



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	ization Recipient Info	ormation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
ļ	Street Address					
1	City State ZiP					
	Corporation Commission File Number	Date Contribution Ma	de	☐ Cash☐ Credit	!	É
+	Labor Organization Name					
	Street Address	······································				
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	ade	☐ Cash☐ Credit		
1	Labor Organization Name					
	Street Address					Marie 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	ade	☐ Cash☐ Credit		
	Labor Organization Name					
	Street Address			-		
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	ade	□ Cash □ Credit		The state of the s
	Labor Organization Name	<u> </u>				
	Street Address					
5	City	State	ZIP	- Cook		
	Corporation Commission File Number Date Contribution Made		☐ Cash☐ Credit			
	Enter total only if last page of sch (transfer the total disbursed this period	i nedule d to "Summary of Disbui	rsements," line 2(f))			



CONTRIBUTION REFUNDS RECEIVED: SCHEDULE B(2)(h)

_	Contributor Information			Amount Refunded	Amount this Reporting Period	Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number	<u> </u>	Date of Original Contribution		}	
	Committee Name		Date Refund Received			
	Street Address		1			
2	City	State	ZiP			I
	Committee ID Number		Date of Original Contribution			:
	Committee Name		Date Refund Received			
	Street Address					
	State		ZIP			:
	Committee ID Number	1	Date of Original Contribution			
_	Committee Name		Date Refund Received			
-	Street Address					
1	City	State	ZIP			
	Committee ID Number	<u> </u>	Date of Original Contribution			
-	Committee Name		Date Refund Received			
	Street Address	<u>,</u>		-		
	City	State	ZIP	_		
	Committee (D Number		Date of Original Contribution	_		
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	This is a second of the second	To a sta 7 line 20/20			
-	(transier the total dispursed this period to Su	munary of Dispurse	inents, line Z(n))			Ĺ



LOANS MADE: SCHEDULE B(3)(a)

-	Borrower Information			Amount Loaned	Amount this Reporting Period	Amount this Election Cycle
	Street Address					
1	City	State	ZIP			
	Guarentar/Endorser Name	Date Loan Made			j j	3
	Borrower Name					
	Street Address					
2	City	State	Ζ¦P			
	Guarantor/Endorser Name	Date Loan Made	1			
	Borrower Name					
	Street Address					
3	City	State	ZiP			-
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
4	Street Address					
+	City	State	ZiP			
	Guarantor/Endorser Name	Date Loan Made	and the same of th			
	Borrower Name		(m)			
5	Street Address					
	City	State	ZIP			: 
	Guarantor/Endorser Name	Date Loan Made				
	Enter total only if last page of sche (transfer the total received this period	edule to "Summary of Disburs	ements," line 3(a))			



COMMITTEE	iD	NUMBER	

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

_	Guarantor	Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address					
1	City	State	ZIP			j
	Borrower Name	Date Loan Guaranteed	J,			
	Guarantor Name	<u> </u>				
	Street Address					
2	City	State	ZP			
	Borrower Name	Date Loan Guaranteed	<u> </u>			
	Guarantor Name	<u> </u>		V,		
	Street Address					
3	City	State	ZIP			
!	Borrower Name	Date Loan Guaranteed	<u> </u>			
	Guarantor Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
_	Guarantor Name	<u> </u>				
	Street Address	·· <u>··</u>				
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Disburseme	ents," line 3(b))			
	<del></del>				<del></del>	



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

	Borrower	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ĺ	Вопоwer Name		Date Forgiveness Made			
	Street Address				<u>.                                    </u>	
ļ	City	State	ZIP			
<u> </u>	Original Amount of Loan	Amount Still Outstanding	3			
	Borrower Name		Date Forgiveness Made			
	Street Address		<u> </u>			
	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstanding	3			
-	Barrower Nam e	L	Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	<u> </u>	Date Forgiveness Made			
Street Address						
	City	State	ZIP			
	Original Amount of Loan Amount Still Cutstandin		3			
	Borrower Name	<u> </u>	Date Forgiveness Made			
	Street Address		<u> </u>			
	City	State	ZiP			
	Original Amount of Loan Amount Still Outstanding		<u>)                                    </u>			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburse	ements," line 3(c))	<u></u> _		



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		**************************************	
	Original Amount Borrowed	Amount Still Outstanding				!
	Lender Name	··········	Date Repayment Made			<u> </u>
	Street Address		<u> </u>			
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
1	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Lender Name		Date Repayment Made			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	ımma <del>r</del> y of Disburser	ments," line 3(d))	****		



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lend	der Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address				1	
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandin	99			
-	Lender Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandin	lg			
7	Lender Name		Date Interest Accrued			
-	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandir	ng			·
	Lender Name	<u></u>	Date Interest Accrued			
ļ	Street Address		_1			
4	City	State	ZiP			
	Original Amount Borrowed	Amount Still Outstandin	ng			
_	Lender Name		Date Interest Accrued		!	
	Street Address					
5	City	State	ZiP			
	Original Amount Borrowed	Amount Still Outstandii	ng			
	Enter total only if last page of sched (transfer the total disbursed this period to	ule "Summary of Disburs	ements." (ine 3(e))			



COMMITTEE ID NUMBER	

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Rec	ipient Information	Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle	
1	Name of Original Payor		Date Rebate/Refund Made		<u> </u>	
}	Street Address			_		
}	City	State	ZJP		<u> </u>	:
ŀ	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			j
1	Name of Original Payor	<u> </u>	Date Rebale/Refund Made			
	Street Address					!
2	City	Siale	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	<del>-  </del>		
	Name of Original Payor		Date Rebate/Refund Made		<u> </u>	
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
1	Name of Original Payor		Date Rebate/Refund Made			
	Streel Address			100 mm		
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			-
1	Name of Original Payor	L	Date Rebate/Refund Made			
	Streel Address					
5	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
-	Enter total only if last page of sche (transfer the total disbursed this period	dule to "Summary of Disburs	ements," line 4)			



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committee	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name					
	Street Address					
1	City	State	ZIP			1
Ì	Committee ID Number	Date in-Kind Contribution I	Made	}		
7	Committee Name					
	Street Address		· · · · · · · · · · · · · · · · · · ·			
2	City	State	ZIP			
	Committee ID Number	Dete in-Kind Contribution Made				
	Committee Name	L				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date in-Kind Contribution	Made			
	Committee Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date in-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number Date In-Kind Contribution Made					
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburser	nents," line 5(a))			



COMMITTE	E ID	NUMBER

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

_	Political Action Commit	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name					
	Street Address					
1	City	State	ZĮP			
	Committee ID Number	Date in-Kind Contribution (	Made		}	
	Committee Name	<u></u>				
	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			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	**************************************				
	Street Address					
5	City	State	ZIP			
i	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sui	mmary of Disbursen	nents," line 5(b))			
\		Sche	edule B(5)(b), page of	f		



COMMITTEE	ID	NUMBER	

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party F	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name	<del></del>			 	<del>"''                                   </del>
	Street Address			<u> </u>		
1	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
!	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	l Made			
	Committee Name	<u> </u>				
	Street Address	Street Address				
3	City	State	ZIP			
	Committee (D Number					
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made		!	
	Committee Name					
	Street Address					
	]	<del></del>	ZIP	1		
5	City	State				ŧ
5	City Committee ID Number	State  Date In-Kind Contribution				



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partnership Rec	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
Ţ	Parinership Name	··· <del>·</del>				<del></del>
-	Street Address					•
	City	State	ZIP			
-	Corporation Commission File Number	Date In-Kind Contribution	) Made	_		
	Partnership Name	<u>l</u>				
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made	<del>-</del>		
+	Partnership Name					
-	Street Address					
	City	State	ZiP	-	1	
	Corporation Commission File Number	Date in-Kind Contribution	Made			
1	Partnership Name	<u> </u>	-1112 AIF			
	Street Address	<u> </u>	<u> </u>			
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	) Made	_		
	Partnership Neme	<u> </u>				
	Street Address					E C
5	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	1 Made			
1	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	<u> </u>				

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation / LLC	Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative ` Amount this Election Cycle
	Corporation/LLC Name	•				
ŀ	Streel Address					
}	City	State	ZIP	_		
	·	Size				
Ì	Corporation Commission File Number	Date In-Kind Contribution	) Made			
	Corporation/LLC Name					
	Street Address	-				
l	City	Stale	ZIP :			
	Corporation Commission File Number	Date In-Kind Contributio				
	Corporation/LLC Name					
ļ	Street Address			_		
	City	State	ZIP	_		
				_		
	Corporation Commission File Number	Date In-Kind Contributio	n Made			
İ	Corporation/LLC Name					
	Street Address			_		
		T		_		
	City	State	ZIP			
Ì	Corporation Commission File Number	Date in-Kind Contribution	n Made	<b>-</b>		
	Corporation/LLC Name	<u> </u>				
	Character Address			_		
	Street Address					
	City	State	ZiP			
Corporation Commission File Number Date in-h		Date in-Kind Contribution	on Made	_		
	Enter total only if last page of schedule			<u> </u>		
Į	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburse	ments," line 5(e))			



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organiza	tion Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
}	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contributio	n Made			
1	Labor Organization Name					
	Street Address	<u> </u>				
2	City	State	ZiP			
	Corporation Commission File Number	Date in-Kind Contribution	on Made			
1	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	on Made			
	Labor Organization Name			1		
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	on Made			
	Labor Organization Name			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
!	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	on Made			
	Enter total only if last page of sched (transfer the total disbursed this period to	ule "Summary of Disburs	ements," line 5(f))			



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure F	Expenditure Amount	Amount this Reporting Perlod	Amount this ` Election Cycle		
Ţ	Recipient Name		Mode of Advertising (TV, mail, etc)			
-	Street Address					
1	City	State	ZIP	<b>-</b>		
-	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	ckiding % opposed)	- □ Cash		
1	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 (in		cluding % 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	1				
3	City	State	ZiP	<u>.</u>		
-	Candidate(s) Supported (including % supported)  Candidate(s) Opposed (in		cluding % opposed)	☐ Cash		;
-	Date of First Publication, Display, Dalivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
-	Recipient Name		Mode of Advertising (TV, mail, etc)			
-	Street Address					
4	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "	le Summary of Disburs	ements," line 6)	<u> </u>		

COMMITTEE	ID NUMBER

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure f	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				į.	
	City	State	ZIP	<u> </u>	,   	
	Ballot Measure(s) Supported (including % supported)	Bailot 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)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Racipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
3	Clty	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	The state of the s	☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP	1		
7	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		
	Enter total only if last page of schedul (transfer the total disbursed this period to "t	e Summary of Disburser	ments,* line 7)	<u></u>		



COMMITTEE ID NUMBER	

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

	Expenditure F	Recipient Information	on 	Expenditure Amount	Amount this Reporting Period	Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
Ì	Street Address					ı
	City	State	ZIP			
ļ	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	-				
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalle		called	☐ Cash	10	
Ì	Date of First Publication, Display, Delivery, or Broadcast Office Held		☐ Credit			
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZiP	1		
	Supporting or Opposing Issuance of Recall Order?	? Candidate Sought to be Recalled		☐ Cash	2	
	Date of First Publication, Display, Delivery, or Broadcast	ication, Display, Delivery, or Broadcast Office Held		_ ☐ Credit		
-	Recipient Name		Mode of Advertising (TV, mail, etc)			***************************************
	Street Address			1		
4	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	acalled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit	1	
	Enter total only if last page of schedul (transfer the total disbursed this period to "	le Summary of Disburse	ements," line 8)	<u> </u>		



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Bene	fitted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address					
1	City	State	ZiP			
ļ	Type of Benefit Provided				!	
	Notes:		<del></del>			j
1	Candidate Name		Date Benefit Provided			
	Street Address			<del></del>		
2	City	State	ZIP			
}	Type of Benefit Provided					
	Notes:					
-	Candidate Name		Date Benefit Provided			
	Street Address	rin rin rin rin rin rin rin rin rin rin				
3	City	State	ZłP			
	Type of Benefit Provided					
	Notes:			_		
-	Candidate Name		Date Benefit Provided			
	Street Address					177
4	City	State	ZiP			1
	Type of Benefit Provided					
	Notes:					[
	Enter total only if last page of scheo (transfer the total disbursed this period to	lule	shursements " line 9)			



COMMITTEE ID NUMBER	

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient	Committee Inform	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name		Payment Date			
	Street Address					
1	City State		ZIP	□ Cash		ı
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address	Street Address				
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)	☐ Cash☐ Credit		l
	Committee Name		Payment Date		<u> </u>	
	Street Address					
3	City	State	ZIP			l
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)	☐ Cash☐ Credit		
	Committee Name Pa		Payment Date			· · · · · · · · · · · · · · · · · · ·
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)	☐ Cash☐ Credit		
_	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	pense (if applicable)	☐ Cash☐ Credit		
	Enter total only if last page of sche	dule				
	(transfer the total disbursed this period t	to "Summary of Disb	ursements," line 10)			



COMMITTEE	ID	NUMBER	

REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City	Slate	ZIP		***************************************	
•	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					1
	Street Address					
4	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
_	Name					
	Street Address					
5	City	State	ZiP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 11)					



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt In	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address				i	
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address	reet Address				
2	City	State	ZįP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
-	Name					
	Streat Address					
3	City	State	ΖĮΡ	_		
	Type of Account Payable or Dabt Owed		Date that Debt Accrued			
	Name					
	Street Address			_		
1	City	State	ZIP	1		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name		<u></u>			
	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule (transfer the total received this period to "Sur	many of Receipts "	line 12)			
_	The second of th	mary of receipts,				! 



TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ecipient of Surplus Monies / Source of Transferred Debt		***************************************
ciplent of Surplus Monles / Source of Transferred Debt		
eciplent of Surplus Montes / Source of Transferred Debt		: 
ecipient of Surplus Monies / Source of Transferred Debt		
eciplent of Surplus Monies / Source of Transferred Debt		
Total transfer the total disbursed this period to "Summary of Disbursements," line 13)		

Schedule A(13), page\_\_\_\_ of \_\_\_\_



COMMITTEE	ID NUMBER

MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipient	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
1	Name					<u> </u>
	Street Address					
2	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name					
ļ	Street Address					
4	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	, , , , , , , , , , , , , , , , , , ,				
_	transier the total dispursed this period to "Su	minary of Disbui	sements, line 14)			

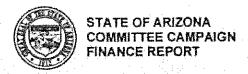


AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

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

Schedule B(15), page\_\_\_\_ of \_\_\_\_



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 penury, you have examined the contents of this report, and the contents are true and correct.

			4.				1
Ashley Gerich					04-	15-22	•
Printed Name of Co	ommittee Treasurer	Signature of Com	mittee Treasure	r	Date	3	