# Fw: Reminder

Gerich, Ashley <Ashley.Gerich@mitchellhamline.edu> Mon 7/18/2022 12:16 PM To: Sue Stein <sstein@bullheadcityaz.gov>

1 attachments (5 MB) July 15 22.pdf;

#### Ashley A. Gerich

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

# OFFICE OF THE CITY CLERK CITY OF BULLHEAD CITY

2355 Trane Road Bullhead City, Arizona 86442-5966 (928) 763-9400 FAX (928) 763-0131

July 18, 2022

Ms. Ashley Gerich 1111 Zircon Avenue Bullhead City AZ 86442

Re: Committee to Elect Ashley Gerich

Failure to file a campaign finance report 2022 Quarter 2 report due July 15, 2022

Dear Ms. Gerich:

Pursuant to A.R.S. § 16-937(A), the Attorney for the City of Bullhead City hereby notifies you that the above named political committee has failed to file the noted campaign finance report on time. According to our records, you are the candidate or designating individual responsible for that committee, the chairman, or treasurer. Depending on how you choose to remedy the failure to file on time, the following deadlines and penalties apply:

#### 1. \$10.00 FILING PENALTY FOR EACH DAY LATE

Beginning the day after your campaign finance report was due, a late filing penalty of \$10.00 per day will be assessed by the city attorney for each day the report is late. By the time you receive this notice, the fee is already accumulating. (A.R.S. § 16-937(A)).

# 2. ADDITIONAL PENALTIES FOR FAILING TO FILE WITHIN THE NEXT 15 DAYS

If your committee does not file the campaign finance report within 15 days of the filing deadline, you or your committee is subject to the following additional penalties:

a. For all committees, the City Clerk will apply to the City Attorney for an order charging your committee an increased civil penalty of \$25.00 per day for each day your committee fails to file. Penalties accrue until the late report is filed. (A.R.S. § 16-937 (B)).

#### 3. PAYMENT METHODS

Civil penalties may be paid by cash/check/credit in person at City Hall during regular business hours.

### 4. THIS IS THE ONLY FAILURE TO FILE NOTICE YOU WILL RECEIVE

Each political committee is sent only one notice of failure to file a campaign finance report. Multiple copies of that notice are sent — one to the political committee at its address, a second to the treasurer at his or her address, and a third to the candidate or designating individual or chairman at his or her address. A copy of this notice becomes a part of the public record of your campaign finance report file.

If you or your committee fails to file a complete report within 30 days after the filing deadline and after the Clerk has provided notice within five days of your failure to file, the Clerk may notify the City Attorney or appropriate enforcement officer and take further enforcement action pursuant to A.R.S. § 16-937.

If you believe your committee filed the report on time, please contact me immediately.

Sincerely,

Susan Stein, MMC, CPM

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City Clerk



COMMIT	TEE	INFORM	MOLTAN	(required):
COMMI	I I	HINE CHAIN		neguneur.

REPORTING PERIOD (check one):

-	Committee Information:	Committee Name:	Committe to Elec	t Ashley Gerich
CANI	DIDATE INFORMATION (only if fil	ling as a candidate com	ımittee):	
ſ	Office Sought:	☐ County Office:		☐ Special District Office:
		☑ City/Town Office	.: <u>Mayor</u>	☐ School Board District:
	Cumulative Report:			
	Check here if this is the	acandidate committees	first, cumulative report for	the election cycle. Also select appropriate Reporting Period below.
	Cumulative reporting period	d start date (which sup-	ersedes the start date for th	ne Reporting Period selected below):

	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*
7	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
J	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
	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

#### FINANCIAL SUMMARY (required):

Cash Activity This Reporting Period	Election Cycle to Date

\*Reporting deadline extended to next business day, A.R.S. §§ 1-243(A) and 1-303.

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.

Ashley Gerich	$\sim$	07-15-22
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date



SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100	1200	
	(b) In-State Individuals - \$100 or Less (Aggregate)	340	
	(c) Out-of-State Individuals		
	(d) Candidate Committees	**************************************	
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Monies (Candidate Committees Only)	4540	
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))	1540	
	(I) Refunds Given Back to Contributors	4 = 4 \triangle	
	(m) Net Monetary Contributions (subtract 1(I) from 1(k))	1540	
2.	Loans		
	(a) Loans Received		
	(b) Forgiveness on Loans Received (c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
~			Market Congress Congress of the State of the
3.	Rebates and Refunds Received		
4.	Interest Accrued on Committee Monies		
5.	In-Kind Contributions Received		728.91
	(a) In-State Individuals - More than \$100		120.91
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals (d) Candidate Committees		
	(e) Political Action Committees (f) Political Parties		
	(f) Political Parties (g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)	100 p. 100 p	
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received	Control Control	
	(b) Payments on Extensions of Credit Received	And the second of the second o	
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity asapplicable)	and the second s	
	Miscellaneous Receipts (use cash and/or equity as applicable)		
		1540	728.91
10.	Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)	1070	120.01



#### SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	0	
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))	0	
3.	Loans		
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(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		
	(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))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	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)	The second secon	
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)	0	



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

SCHEDULE A(1)(a)

/					Cumulative	Cumulative
	Individual Contr	ibutor Informatior	1	Amount Received	Amount this Reporting Period	Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address			•		
1	City	State	ZIP	<del>-</del>		
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
_	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
			<b>**</b> 1			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	Name	<u> </u>	Date Contribution Received			
	Street Address		<u></u>			
5	City	State	ZIP	_		
	Occupation	Employer		<b>-</b>		
-	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts."	line 1(a))			

\*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\_\_\_\_ of \_\_\_\_

#### 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	O	728.91
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	1540.00	728.91

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



MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

	Individual Cont	ibutor Information	1	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ŀ	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP		*	
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer	1			
	Name		Date Contribution Received			
	Street Address					
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 schedule (transfer the total received this period to "Su	mmary of Receipts,"	line 1(c))			



#### MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

_	Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Committee Name					
-	Street Address					
1	City	State	ZJP			
-	Committee ID Number	Date Contribution Receiv	ed			
1	Committee Name		<u></u>			
	Street Address					
2	City	State	ZiP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Street Address					
3	City	State	ZiP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Corrunittee ID Number	Date Contribution Received				
	Committee Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Recei	ved			
	Enter total only if last page of schedule (transfer the total received this period to "Sui					

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

	Political Action	Committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ţ	Committee Name					
-	Street Address					
i	City	State	ZIP			
-	Committee ID Number	Date Contribution Re	celved		<b>.</b>	
1	Committee Name		······································			
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution R	ecelved			
+	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
4	Committee Name					
	Street Address					
4	Sueet Address					
7	City	State	ZIP			
	Committee ID Number	Date Contribution R	teceived			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			·
_	Enter total only if last page of s (transfer the total received this period)	chedule				

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

	Political Party	Contributor Informa	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	and the state of t	***************************************			
-	Street Address					
1	City	State	ZIP			
-	Committee ID Number	Date Contribution Receiv	. I zed			
1	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee iD Number	Date Contribution Rece	ived			
	Committee Name				1	
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Rece	lived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Reco	blved			
	Committee Name	1				
	Street Address					
5	City	State	ZIF			
		Date Contribution Rec				

.....

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnersh	ip Contributor Inforr	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
F	Partnership Name					
1	Street Address					
	City	Stale	ZiP		71117	
ŀ	Corporation Commission File Number	Date Contribution F	Received			
	Partnership Name					
-	Street Address	· · · · · · · · · · · · · · · · · · ·				
2	City	State	ZIP			
-	Corporation Commission File Number	Date Contribution	Received			
1	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address			-		
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	n Received			
	Partnership Name					
	Street Address					
ົວ	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	n Received			
	Enter total only if last page of so (transfer the total received this period	hedule				



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LL	C Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
1	CorporationALC Name						
-	Street Address						
  -	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rece	ived			e e e e e e e e e e e e e e e e e e e	
	Corporation/LLC Name						
	Street Address						
	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rec	celved				
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Re	celved				
	Corporation/LLC Name	]					
	Street Address						
4	Сіту	State	ZIP				
	Corporation Commission File Number	Date Contribution Re	ecelved				
	Corporation/LLC Name						
	Street Address						
	City	State	ZIP				
5	City	Corporation Commission File Number Date Contribution Received			•		

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organi	ization Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
-	Street Address					
1	City	State	ZIP		e e e e e e e e e e e e e e e e e e e	
	Corporation Commission File Number	Date Contribution R	Received	,,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
1	Labor Organization Name	I				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution 9	Received			
	Labor Organization Name		····			
	Street Address					
3	City	State	ŽiP			
	Corporation Commission File Number	Date Contribution	Received			
	Labor Organization Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Labor Organization Name	<u> </u>	www.dataddddiwy.v.v.			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Enter total only if last page of so (transfer the total received this period	hedule				

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

		Candidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
ŀ	Street Address					
1	City	State	ZIP			
Ì	Occupation	Employer	***************************************		11.74 11.74	
1	Name		Date Contribution Received			
	Street Address					
2	City	State	Z!P			
	Occupation	Employer				
_	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page (transfer the total received this	of schedule				

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

/	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date Contribution Refunded				
-	Street Address					
\ 	City	State	ZIP			
	D Number (if applicable)	<u></u>	Date of Original Contribution			
+	Name		Date Contribution Refunded			
-	Street Address					
1	City	State	Z(P			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address	***************************************				
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
5	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
_	Enter total only if last page of schedule (transfer the total received this period to "Sum					

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



LOANS RECEIVED: SCHEDULE A(2)(a)

		Lender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative \ Amount this Election Cycle
ļ	Lender Name	Date Loan Received				
-	Street Address					
	City	State	ZiP		<b>:</b>	
-	Guaranton/Endorser Name	Non-Electoral Purpos	se? (PACs and Political Parties Only)			
ļ	Lender Name	Date Loan Receive	d			
-	Street Address			_		
ŀ	City	State	ZIP			
-	Guarantor/Endorser Name	Non-Electoral Purpo	se? (PACs and Political Parties Only)			
Ì	Lender Name	Date Loan Receive	d			
	Streat Address			_	*****	
	City	State	ZIP			
	Guarantor/Endorser Nama		se? (PACs and Political Parties Only)			
	Lender Name	Date Loan Receive	ed			1
	Street Address		, , , , , , , , , , , , , , , , , , ,			
	City	State	ZIP			
	Guarantor/Endorser Name		ose? (PACs and Political Parties Only)			
-	Lender Name	Date Loan Receive	ed			
	Street Address	A CONTRACTOR OF THE CONTRACTOR				
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purp	ose? (PACs and Political Parties Only)	_		
_	Enter total only if last page of s	chedule				
	Enter total only if last page of s (transfer the total received this perion	od to "Summary of Receip	sts," line 2(a))		*	



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

_	Ler	der Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
Ì	Street Address	······································			maxxx	
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstan	ading			
	Lender Name		Date Forgiveness Received			
	Street Address					
2	City	State	ZiP			
	Original Amount of Loan	Amount Still Outsta	nding			
_	Lender Name		Date Forgiveness Received			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsta	nding			
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsize	nding			
	Lender Name		Date Forgiveness Received			1
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Oulst	anding			

Schedule A(2)(b), page\_\_\_\_ of \_\_\_\_

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Borrower Name		Data Repayment Received			
	Street Address		<u></u>			
	City	State	ZIP			: -
-	Original Amount Волоwed	Amount Still Outstanding				
+	Berrower Name		Date Repayment Received			
-	Street Address					
	City	State	ZIP			
-	Original Amount Borrowed	Amount Still Outstanding				
1	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
	iginal Amount Borrowed Amount Still Outstanding					
	Borrower Name		Date Repayment Received			
	Street Address					
ŀ	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Borrower Name		Date Repayment Received			
	Street Address	Street Address				
5	City	State	ZiP			
	Original Amount Borrowed	Amount Still Outstanding	3			
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,	' line 2(c))	1		



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		1			
1	City	State	Z(P			
-	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	<u> </u>	Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	1	Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	1	Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	]			
_	Enter total only if last page of schedule (transfer the total received this period to "Sun					

Schedule A(2)(d), page\_\_\_\_ of \_\_\_\_



REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

_	Pay	or Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Street Address					
	City	State	ZIP			
ŀ	Original Purchase Amount	Reason for Refun	d/Rebate		# # # # # # # # # # # # # # # # # # #	
+	Payor Name		Dale Rebate/Refund Received			
	Street Address					
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refun	d/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	id/Rebata			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
4	City	State	ZiP			
	Original Purchase Amount	Reason for Refur	nd/Rebale			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refu	nd/Rebate			
	Enter total only if last page of scheo (transfer the total received this period to	lule	into Il line (2)			

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
count with Interest Earned (Bank Name / Type of Account)		
Account with Interest Eamed (Bank Name / Type of Account)		Attended
1000m mar marana (		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Benk Name / Type of Account)		All III Park
Total (transfer the total received this period to "Summary of Receipts," line 4)		

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



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

SCHEDULE A(5)(a)

			1	ا منت ا	- · · · ·
Individual Co	ontributor Informa	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Date in-Kind Contribution Received 06/20/22			
			728.91	728.91	728.91
	State AZ	86429	•	1111111	
· ·		edical Center			
Name	<del>,,,,, -, -!</del>	Date In-Kind Contribution Received			
Street Address		1	_		
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					
City	State	ZIP			
Cocupation	Employer				
Name		Date In-Kind Contribution Received			
Streef Address					
City	State	ZIP	1		
Occupation	Employer				
	1				1
	Guilermo Zagarra  Street Address 2881 Gandhill Rd.  City Bullhead City Arizona  Occupation Doctor  Name  Street Address  City  Occupation  Name  Street Address  City  Cocupation  Name	Street Address 2881 Gandhill Rd. City Builhead City Arizona Occupation Doctor Name  Street Address  City State  City State City State  City State  City State  City State  City State  City State  City State  City State  City State  City State  City State  Cocupation Employer  Employer  Employer  Employer  Employer  Street Address  City State  City State  City State  Street Address  City State  Street Address  City State  City State  Street Address	Guilermo Zagarra  Street Address  2881 Gandhill Rd.  City Bullhead City Arizona  Cocupation Doctor  Name  Date In-Kind Contribution Received  Employer  Name  Date In-Kind Contribution Received	Street Address 2881 Gandhill Rd. City State Address 2881 Gandhill Rd. City Arizona AZ 86429  Occupation Doctor Alban Medical Center Name Date b-Xind Contribution Received  Street Address  City State ZIP  Occupation Employer  City State ZIP  Occupation Employer  Name Date in-Xind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date in-Xind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date in-Xind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date in-Xind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date in-Xind Contribution Received  Street Address  City State ZIP  Occupation Employer  Name Date in-Xind Contribution Received  Street Address  City State ZIP	Name Date In-Kind Contribution Received O6/20/22  Table Markers 2881 Gandhill Rd.  City State Markers 2884 Center

\*If in-kind contributions of \$100 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

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



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

	Individual Contr	ibutor Information	1	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
-	Name	Date In-Kind Contribution Received 06/20/22				
	Street Address					
	City	State	ZiP			
	Occupation	Employer		į		
	Name		Date in-Kind Contribution Received			
	Street Address			<b>-</b>		
2	City	State	ZJP	<b>-</b>		
	Оссираtion	Employer				
	Name	<u> </u>	Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP	-		
	Occupation	Employer		_		
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name	<u> </u>	Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Empłoyer				
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,	' line 5(c))	· · · · · · · · · · · · · · · · · · ·		

COMMITTEE	ID NUMBER

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

/	Candidate Commit	tee Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name				İ	
	Street Address					
1	City	State	ZIP		,	
ľ	Committee iD Number	Date In-Kind Contribution	Received	-		
1	Committee Name					
-	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
-	Committee Name					
	Streat Address					
3	City	State	ZIP	1		
	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	an Racelved			
		I		.1		

#### IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

_	Political Action (	Committee Contributor	Information	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 Contribu	illon Received		****	
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Received			
+	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date in-Kind Contrit	oution Received			
	Committee Name					
	Street Address	,				
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	outlon Received			
	Committee Name					
	Street Address					
5	City	State	ZiP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Enter total only if last page of so (transfer the total received this perio					

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

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Political Party Cor	tributor Informati	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
	City	State	ZłP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
	City	State	ΖΊΡ			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	Committee Name				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name	h-				***************************************
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Received			
	Committee Name	Committee Name				
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date in-Kind Contribution	n Received			
_	Enter total only if last page of schedule (transfer the total received this period to "Sun		# r(0)			



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersh	ip Contributor Inforr	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
١	Partnership Name					
ļ	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	) ibution Received		The state of the s	
Ť	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Received			
1	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Conf	tribution Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
	Partnership Name	<u> </u>	www.deldWVVV.4.4			
	Street Address	•				
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	htribution Received			
_	Enter total only if last page of sol (transfer the total received this period	nedule				

## STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation /	LLC Contributor In	formation	Amount Received	Cumulative Amount this	Cumulative Amount this
T	Corporation/LLC Name			Reporting Period	Election Cycle	
-	Street Address				e de la company	
1	City	State	ZIP		77444	
	Corporation Commission File Number	Date In-Kind Contr	bution Received			
+	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	Ifbution Received			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
	Corporation/LLC Name	<u> </u>				
	Streel Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	stribution Received			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Co.	l ntribution Received			
	Enter total only if last page of sci (transfer the total received this period	nedule				

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organization	n Contributor Inform	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name			, торонну т		
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					\$4000 A.S.
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name				**************************************	
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Contribution	l Received			
-	Enter total only if last page of schedul (transfer the total received this period to "Si					

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

SCHEDULE A(5)(j)

	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received		******	<del></del>
-	Street Address			-		
1	City	State	ZIP			
-	Asset or Property Contributed			_		
	Name		Date in-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Asset or Property Contributed			_		
1	Name	·····	Date in-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZiP			
	Asset or Property Contributed					
_	Name		Date In-Kind Contribution Received			
	Street Address					
5		T	No. in	_		
	City	State	ZIP			
	Asset or Property Contributed			1		

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

SCHEDULE A(6)

	Source I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Denation Received			
ľ	Street Address					
	City	State	ZIP	_		
-	Type of item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
}	City	State	ZIP	-		
	Type of Item Donated					
	Name	Date In-Kind Donation Received				
	Street Address					
3	City	State	ZiP	_		
	Type of item Donated					
			Date in-Kind Donation Received			
	Name	lame				
	Street Address	Street Address				
4	City	State	ZiP			
	Type of Item Donated					
_	Name		Date in-Kind Donation Received			
	Street Address	Street Address				
5	City	State State				
	Type of Item Donated	Type of Item Donated				
	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receipts,	" line 6)			



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					
-						
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
	A CONTRACTOR OF THE CONTRACTOR					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
3	City	State	Z₽			
	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				

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

COMMITTEE ID NUMBER

	Creditor	Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
	City	State	ZIP	-	100000	
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services ar Goods Originally Provided on Credit		Date of Original Extension of Credit	-	-	
-	Name					
	Street Address			-		
1	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 of Cradit			
	Enter total only if last page of schedule					

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Co	mmittee Informa	tion	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
7	Committee Name		Payment Date			
5	Street Address					
-	City	State	ZIP			
c	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (# applicable)			
1	Committee Name		Payment Date			
-	Street Address					
2	City	State	ZIP			
1	Date of Joint Fundraising Event (If applicable)	Type of Shared E	xpense (if applicable)			
+	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared I	Expense (if applicable)			
-	Committee Name P.		Payment Date			
	Street Address					
4	City	State	ΖŧΡ			
	Date of Joint Fundralsing Event (if applicable)	Type of Shared	Expense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	Z/P			
	Date of Joint Fundraising Event (if applicable)	Type of Shared	Expense (if applicable)			
	Enter total only if last page of sche	dule				

Schedule A(8), page\_\_\_\_ of \_\_\_\_

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

		Payor Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		**************************************			
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name		L		**************************************	
	Street Address					
2	City	State	ZiP			
	Services or Goods Purchased		Payment Date			
-	Name	***************************************			***************************************	7-1111
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name	***************************************				
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date	111000	***************************************	
	Name			7144		·····
	Street Address					
5	City	State	ZiP			
	Services or Goods Purchased		Payment Date		A PRIMARILA A A A A A A A A A A A A A A A A A A	
	Enter total only if last page of sche (transfer the total received this period t	edule to "Summary of Rece	ipts." line 9)			



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Infor	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ľ	Varne					
ŀ	Street Address				***************************************	
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name		1			
-	Street Address			_		
-	City	State	ZIP			
	Type of Account Receiveble or Debt Owed		Date that Debt Accrued			
_	Name					
	Street Address			<b>-</b>		
	City	State	ZįP	1		
	Type of Account Receivable or Debt Owed Date that Debt Accrued					
	Name					
	Street Address					
١	City	State	ZIP			
	Type of Account Receivable or Debt Owed	<u>.t</u>	Date that Debt Accrued			
1	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed Date that Debt Accound					
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receip	its," line 10)			



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ource of Surplus Monies / Recipient of Transferred Debt		
ource of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		. 11.50-11.00
Source of Surplus Morries / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Total (transfer the total received this period to "Summary of Receipts," line 11)		

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Source I	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
T	Name					
ŀ	Street Address					
	City	State	ZIP			
F	Receipt Typa		Receipt Date			
	Name					
	Street Address					
-	City	State	ZIP			
	Receipt Type		Receipt Date			
+	Name					
	Street Address					
	City	State	ZiP			
	Receipt Type	Receipt Date				
	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
,	City	State	ZIP			
	Receipt Type	Receipt Date				
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receints	i." line 12)			

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipier	nt Information	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ì	Name Disbursement Date					
ŀ	Streel Address					
1	City	State	ZIP	-		
				☐ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	? (PACs and Political Parties Only)	☐ Credit		
1	Name	Disbursement Date				
	Street Address					
2	City	State	ZIP	-		
	Type of Operating Expense Paid	Non-Electoral Purpose	)? (PACs and Political Parties Only)	☐ Cash☐ Credit		
_						
	Name	Disbursement Date				
	Street Address					
3	City	State	ZiP	T Cook	and the state of t	
	Type of Operating Expense Paid	Non-Electoral Purpose	e? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpos	e? (PACs and Political Parties Only)	□ Cash □ Credit		*
	Name	Disbursement Date				
_	Street Address	_				
5	City	State	ZIP	☐ Cash ☐ Credit		
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 1)					
					]	

COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

<u>_</u>	Candidate Committe	e Recipient Inforr	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address				milete NATA	
	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Cash	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street 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		□ Cash □ Credit		
-	Committee Name					
	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 "Summary of Disbursements," line 2(a))					***************************************
		,	,		ı	



COMMITTEE	ID NUMBER	

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Commi	ttee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	-			<b></b>	
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name	<u> </u>				
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
	City	State	ZIP			
***************************************	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number Date Contribution Made		☐ Cash☐ Credit			
1	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disbursen	nents," line 2(b))			
_						



COMMITTEE	ID NUMBER

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party Ro	ecipient Informatio	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Committee Name Street Address					
					1	
ŀ	City		ZIP			
	Committee ID Number	Date Contribution Made	The state of the s	□ Cash □ Credit		
+	Committee Name					
	reet Address					
-	City	State				
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
-	Convnittee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	1				
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	2 ID Number Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Si	ımmary of Disburse	ments," line 2(c))	<u> </u>		

## MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnersl	nip Recipient Informatio	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
F	Partnership Name					
	Street Address					
-	City State ZIP  Corporation Commission File Number Date Contribution Made		ZiP			
-			☐ Cash☐ Credit			
	Partnership Name					
	Street Address					
1	City	State	ZíP	□ Cash		
-	Corporation Commission File Number	Date Contribution Made	e	☐ Cash		
	Partnership Name					
	Street Address					
1	City	State	ΖIP	□ Cash		
	Corporation Commission File Number Date Contribution Made			□ Casii		
	Partnership Name					
	Street Address					
1	City	State	ZiP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	le	☐ Credit		
+	Partnership Name					
	Street Address					
5	City	State ZiP		☐ Cash		
	Corporation Commission File Number Date Contribution Made		☐ Credit			
-	Enter total only if last page of sol (transfer the total disbursed this perio	hedule ad to "Summary of Disburs	sements," line 2(d))	11		

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
T	Corporation/LLC Name					_
	Street Address				***************************************	
	State ZIP		□ Cash			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Credit		
	Corporation/LLC Name					
	treat Address					
2	City State ZIP		☐ Cash			
	Corporation Commission File Number Date Contribution Made			□ Credit		
1	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution N	Asde	☐ Credit		
-	Corporation/LLC Name					
	Street Address					
4	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 I	Made	□ Credit		
	Enter total only if last page of sc (transfer the total disbursed this perio	hedule od to "Summary of Disbu	ursements," line 2(e))			

COMMITTEE	ID NUMBI	ΞR

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	nization Recipient Inf	formation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	abor Organization Name					
-	Street Address		and the state of t			
	City State ZIP		☐ Cash			
Ì	Corporation Commission File Number	Date Contribution &	łade	☐ Credit		
	.ebor Organization Name					
	Street Address					
	City State ZIP					
	Corporation Commission File Number Date Contribution Made			☐ Cash ☐ Credit		
	Labor Organization Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	☐ Credit		
	Labor Organization Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	☐ Credit		
	Labor Organization Name	1				
	Street Address					
5	City	State ZIP		TI Oach		
	Corporation Commission File Number	Date Contribution	Made	☐ Cash☐ Credit		
-	Enter total only if last page of so (transfer the total disbursed this perio	hedule od to "Summary of Dist	oursements," line 2(f))			



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contribute	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
ļ	Committee ID Number		Date of Original Contribution			
	Committee Name	entent	Date Refund Received			
	Street Address					
	City State		ZIP			
	Committee ID Number		Date of Original Contribution			
1	Committee Name		Date Refund Received			
	Street Address		1			
3	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
4	City	State	ZiP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
5	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Si	ummary of Disburs	ements,* line 2(h))	<u> </u>		

LOANS MADE:

SCHEDULE B(3)(a)

		Borrower Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ī	Borrower Name					
ļ	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	Date Loan Made			
1	Borrower Name					
	reet Address					
3	City	State	State ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	Date Loan Made			
	Borrower Name	1				
	Street Address					
5	City	State	State ZiP			
	Guarantor/Endorser Name	Date Loan Made				
	Enter total only if last page o (transfer the total received this p	f schedule	**************************************			

Schedule B(3)(a), page\_\_\_of \_\_\_



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

	Guaranto	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				:	
	treet Address					
2	City State ZIP		ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	<u> </u>			
	Guarantor Name	<u> </u>				
	Street Address					
4	City	State	ΖŀΡ			
	Borrower Name	Date Loan Guaranteed	<u> </u>			
	Guarantor Name					
	Street Address					
5	City	State	ZIP			
	Borrower Name	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))			
					·	

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

				1	1 1	
/	Borrower	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name	Date Forgiveness Made				
1	Street Address					
۱ <u> </u>	City	State	ZIP	, , , , , , , , , , , , , , , , , , ,		
-	Original Amount of Loan	Amount Still Outstanding				
+	Borrower Name		Date Forgiveness Made			
-	Street Address		1			
2	City	State	ZIP			
-	Original Amount of Loan Amount Still Outs		1			
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
_	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address		1			
5	City	Stale	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 "Si					

Schedule B(3)(c), page\_\_\_\_ of \_\_\_\_

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name Street Address		Date Repayment Made			
ľ					-	
	City	State	ZIP			
}	Original Amount Borrowed	Amount Still Outstandin	ng		-	
	Lender Name		Date Repayment Made			
	Street Address					
	City Slate		ZIP	_		
	Original Amount Волгоwed	Amount Still Outstandi	ng			
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding		ing			
	Lender Name	Date Repayment Made				
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ting			
	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ding			
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	l ummary of Disbur	sements," line 3(d))			

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

Len	der Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
nder Name		Date Interest Accrued			
eet Address					
у	State	ZIP			
iginal Amount Borrowed	Amount Still Outstan	ding			:
nder Name		Date Interest Accrued			
reet Address					
ty	State	ZIP			
Original Amount Borrowed Amount Still Outstand		nding			
ender Name		Date Interest Accrued			
rreet Address					
ily	Slate	ZIP			
riginal Amount Borrowed	Amount Still Outsta	nding			
ender Name	'	Date Interest Accrued			
treet Address					
ity	State	ZIP			
original Amount Borrowed	Amount Still Outsta	anding			
ender Name		Date Interest Accrued			
lreet Address					
aity	State	ZIP			
Original Amount Borrowed	Amount Still Outst	anding			
	page of sche		Amount Still Outstanding  page of schedule sed this period to "Summary of Disbursements," line 3(e))	Amount Still Outstanding  page of schedule sed this period to "Summary of Disbursements," line 3(e))	

Schedule B(3)(e), page\_\_\_\_ of \_\_\_\_

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
	Name of Original Payor		Date Rebate/Refund Made			
ŀ	Street Address	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	City	State	ZIP			
ŀ	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
1	Name of Original Payor		Date Rebate/Refund Mede			
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
-	Name of Original Payor		Date Rebale/Refund Made			
	Street Address					
3	City	State	ZiP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor		Date Repate/Refund Made			
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor		Date Rebale/Refund Made			
	Street Address					
5	City	Stale	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
			1			

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



## IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate	Committee Recipient I	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
-	Street Address					
ı  -	City	State	ZIP			
ŀ	Committee ID Number	Date in-Kind Cont	sibution Made		a in Aven	1
	Committee Name	1				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Cor	ntribution Made			
	Committee Name					
	Street Address					
4	City	State	ZiP			
	Committee ID Number	Date In-Kind Col	ntribution Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
		Date In-Kind Co				

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Action Commit	tee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address	- ( - 1 - 1) - ( - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 - 1) - ( - 1 -				
4	City	State	ZIP		***	
	Committee ID Number	Date In-Kind Contribution I	Made	_		
	Committee Name					
2	Street Address	<b>J</b>				
_	Committee ID Number	State  Date in-Kind Contribution	ZIP			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
4	Street Address  City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution				
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburser	ments," line 5(b))			



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party Ro	ecipient Informatio	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
ŀ	Street Address			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
-	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	 Made			,
	Committee Name		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
-	Street Address					
-	City	Slate	ΖiP			
1	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
	City	State	ZIP			
1	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
-	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	i Made			
+	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
1	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	ımmarv of Disburser	ments." line 5(c))	<u></u>		



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	hip Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
ŀ	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
1	Partnership Name		1.11.00			
	Street Address			National Comments		
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Conf	ribution Made			
1	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	Inbution Made			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Con	tribution Made			
	Partnership Name	1				
	Street Address					
5	City	State ZIP				
	Corporation Commission File Number	Date in-Kind Con	tribution Made			
	Enter total only if last page of sch	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 5(d))				



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	/ LLC Recipient Inf	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation&LC Name					
}	Street Address				***	
	City	State	ZIP			***
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
1	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Corporation/LLC Name					
	Street Address	Street Address				
3	City	State	ZiP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date in-Kind Cor	ntribution Made			
	Corporation/LLC Name	<u> </u>				
	Street Address					
5	City	State	State ZIP			
	Corporation Commission File Number	Date In-Kind Cor	1ntribution Made			
	Enter total only if last page of scl (transfer the total disbursed this perio	nedule d to "Summary of Disl	bursements," line 5(e))			

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organi	zation Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
ł	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	ution Made		***	
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZiP			
	Corporation Commission File Number	Date in-Kind Contrib	oution Made			
1	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission Fite Number	Date In-Kind Contrib	bution Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contril	bution Made			
_	Enter total only if last page of sch (transfer the total disbursed this period	edule	roomonto " lino E/f\\			



COMMITTEE	۱D	NUMBER	

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure I	Recipient Informa	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZiP	_		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (ii	ncklding % apposed)	_ □ 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			-		
l	City	State	ZiP			
I	Candidate(s) Supported (including % supported)  Candidate(s) Opposed		ncluding % opposed)	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	Credit		
1	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	PPP MALLEN CONTRACTOR OF THE PPP MALLEN CONTRACTOR OF THE PP		1		
	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (h	l naluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
1	Recipient Name		Node of Advertising (TV, mail, etc)			
	Street Address		1			
	City	State	ZiP			
	Candidate(s) Supported (including % supported)	rg % supported) Candidate(s) Opposed (including % opposed)		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 6)					

COMMITTEE	ID NUMBER	

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure I	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					
	City	State	ZIP	The state of the s		
	Beliot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	i (including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	3-3-44-5-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4	- □ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)	<u> </u>		
	Street Address					
2	City	State	Ζ¦P	-		
	Ballot Measure(s) Supported (including % supported)  Ballot Measure(s) Opported		I (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)		Andrew	<del>146.04.46.16.0</del>
	Street Address			-	***************************************	
3	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		j			
4	City	State	ZIP			
	Bailot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	 	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	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 "	. I le Summary of Disburse	ments," line 7)	1		****



COMMITTEE	ID NUMI	3ER

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

	Expenditure F	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP	-		
-	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		
1	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	State	Z≱P			
Ì	Supporting or Opposing Issuance of Recall Order?  Candidate Sought to be Re		zajkad	☐ Cash☐ Credit	and the same of th	
	Date of First Publication, Display, Delivery, or Broadcast Office Held			Creuk		
	Recipient Name	·	Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Re		called	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
_	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZiP			esession.
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re		☐ Cash	1	
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ ☐ Credit		
_	Enter total only if last page of schedul (transfer the total disbursed this period to "	ie Summary of Disburse	ments," line 8)			



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

_	Ben	efitted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
-	Street Address					
1	City	State	ZIP			:
1	Type of Benefit Provided		,			
Ī	Nates:		_			
	Candidate Name		Date Benefit Provided			
	Street Address			****		
2	City	State	ZIP			
ļ	Typa of Benefit Provided					
-	Notes:			***		
	Candidate Name	Date Benefit Provided				
ļ	Street Address		I.			
3	City	State	ΖĮP	***************************************		
Ì	Type of Benefit Provided					
	Notes:				***************************************	
	Candidate Name	Date Benefit Provided				
	Street Address					
4	City	State	2IP		H	\$
	Type of Benefit Provided					
	Notes:	•••				
-	Enter total only if last page of sche (transfer the total disbursed this period	edule to "Summary of Disburs	ements," (ine 9)	<u> </u>		



COMMITTEE ID NUMBER	

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient 0	Committee Inforr	nation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Streel Address					
1	City	Stale	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	ixpense (if applicable)	□ Cash □ Credit		
	Committee Name	1	Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	☐ Cash☐ Credit		
_	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	☐ Cash		
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense		Expense (if applicable)	☐ Credit		
	Committee Name Payment Date					
	Street Address					
4	City	State	ZIP	☐ Cash		
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)		Expense (if applicable)	□ Credit		
_	Committee Name	1	Payment Date	1		
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)		□ Cash □ Credit			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," 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	State	zie	□ Cash		
-	Services or Goods Reimbursed	<u> </u>	Reimbursement Date	☐ Credit	***************************************	
	Name		<del>-</del> -			
	Street Address					
2	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	1	Reimbursement Date	☐ Credit		
	Name .					
	Street Address					
3	City	State	Z∤P	☐ Cash		
	Services or Goods Reimbursed	Reimbursement Date	☐ Credit			
-	Name					
	Street Address					
4	City	Slate	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
5	City	State	ZIP	Cash		
	Services or Goods Relimbursed Reimbursement Date			☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 11)			, , , , , , , , , , , , , , , , , , ,		

COMMITTEE	ID NUMBER
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OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

_		Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
İ	Street Address					
Ì	City	State	ZIP			
Ì	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
1	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed Date that Debt Accrued					
	Enter total only if last page of schedul (transfer the total received this period to "S	e ummary of Receipt	s," line 12)	1		<del></del>



## 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		
Reciplent of Surplus Monles / Source of Transferred Debt		
Recipient 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 \_\_\_\_

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	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name		•			
	Street Address					
2	City	State	ZIP	☐ Cash		
	Disbursement Type	Disbursement Date	□ Credit			
	Name					
	Street Addreas					
3	City	State	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit			
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
	Street Address	Street Address				
5	City	Stale	ZIP	☐ Cash		
	Disbursement Type Disbursement Date			☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur					



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 \_\_\_\_