

Initial Application
 Amended Application
 Date: _____



**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
PAC 24-05

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): _____
 (first or last name & office)

Candidate Information: Candidate's Name (required): _____
 Candidate's mailing address (required): _____
 Candidate's email address (required): _____
 Candidate's phone number (required): _____
 Candidate's website (if any): _____

Office Sought (choose one): County Office: _____ District (if applicable): _____
 City/Town Office: _____ District (if applicable): _____
 School Board Office: _____ District (if applicable): _____
 Special District Board: _____ District (if applicable): _____

Election Cycle for Office Sought (year the election will take place) (required): _____

Party Affiliation: Democrat Green Libertarian Republican Other: _____
 (required for partisan offices)

Political Action Committee (PAC)

Committee Name (required): Government Lies to You BHC
 (if sponsored, must include sponsor's name)

Political Function (optional): Contributions Candidate-Related Independent Expenditures
 (select any that apply) Ballot Measure Expenditures Recall Expenditures

Sponsorship Information: Sponsor's name or nickname (required): Wm. H. "Scotty" McClure
 (if applicable) Sponsor's mailing address (required): 1702 E Aztec Rd Ft. Mohave AZ 86426
 Sponsor's email address (required): scotty4district2@gmail.com
 Sponsor's phone number (if any): 303 319-1817
 Sponsor's website (if any): _____

Special Status (if applicable) Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
 Standing Committee (must also complete separate standing committee registration)
 Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)

Political Party

Committee Name (required): _____
 (must include party affiliation)

Jurisdiction: State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
 County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)
 Legislative District Party (must include proof of organization pursuant to A.R.S. § 16-823)
 City or Town Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)

Special Status (if applicable) Standing Committee (must also complete separate standing committee registration)

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**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 1702 E Aztec Rd Ft Mohave AZ 86426
 Committee's email address (required): scotty4district2@gmail.com
 Committee's phone number (if any): 303-319-1817
 Committee's website (if any): _____

Chairperson's Information: Chairperson's name (required): Wm. H. "Scotty" McClure
 Chairperson's physical address (required): 2120 Santa Cruz BHC AZ 86442
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): scotty4district2@gmail.com
 Chairperson's phone number (required): 707-382-5453
 Chairperson's employer (required): retired
 Chairperson's occupation (required): retired

Treasurer's Information: Treasurer's name (required): Valerie Medina
 Treasurer's physical address (required): 1702 E Aztec Rd Ft. Mohave AZ 86426
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): scotty4district2@gmail.com
 Treasurer's phone number (required): 303-319-1817
 Treasurer's employer (required): Mohave County BOS DS
 Treasurer's occupation (required): Exec. Assistant

Bank or Financial Institution: Bank name (required): Foothills Bank
 (do not list acct numbers) Additional bank name (if applicable): _____
 Additional bank name (if applicable): _____

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.

Chairperson's signature: Wm. H. McClure Date: 6/14/24
 Treasurer's signature: Valerie Medina Date: 6/14/24
 Candidate's signature (if applicable): N/A Date: _____



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER

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COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Government Lies to You BHC PAC

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

Office Sought: County Office: _____ Special District Office: _____
 City/Town Office: _____ School Board District: _____

Cumulative Report:

Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.

Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below): _____

REPORTING PERIOD (check one):

REPORTING PERIOD	REPORT DUE
<input type="checkbox"/> 2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023	February 26, 2023 to March 4, 2023
<input type="checkbox"/> 2023 March Post-Election (Q1) Report (Local Only): February 26 to March 31, 2023	April 1, 2023 to April 15, 2023
<input type="checkbox"/> 2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
<input type="checkbox"/> 2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
<input type="checkbox"/> 2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 15, 2023
<input type="checkbox"/> 2023 Quarter 2 Report: April 1, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
<input type="checkbox"/> 2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
<input type="checkbox"/> 2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
<input type="checkbox"/> 2023 Quarter 3 Report: July 1, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
<input type="checkbox"/> 2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
<input type="checkbox"/> 2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
<input type="checkbox"/> 2023 Quarter 4 Report: October 1, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
<input type="checkbox"/> 2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024	February 25, 2024 to March 2, 2024
<input type="checkbox"/> 2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
<input type="checkbox"/> 2024 Quarter 1 Report: January 1, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
<input type="checkbox"/> 2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024	May 5, 2024 to May 11, 2024
<input type="checkbox"/> 2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
<input checked="" type="checkbox"/> 2024 Quarter 2 Report: April 1, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
<input type="checkbox"/> 2024 August Pre-Primary Election Report: July 1, 2024 to July 20, 2024	July 21, 2024 to July 27, 2024
<input type="checkbox"/> 2024 Quarter 3 Report (Local Only): July 1, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
<input type="checkbox"/> 2024 August Post-Primary Election (Q3) Report: July 21, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
<input type="checkbox"/> 2024 November Pre-General Election Report: October 1, 2024 to October 19, 2024	October 20, 2024 to October 26, 2024
<input type="checkbox"/> 2024 November Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024	January 1, 2025 to January 15, 2025
<input type="checkbox"/> Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

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

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)	0	0
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	490.00	490.00
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	490.00	490.00
(d) = Balance at close of reporting period	0	0
<input type="checkbox"/> Check here if filing <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page and the following page need to be filed.		

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



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Under A.R.S. § 16-926(B)(5), a campaign finance report must be certified by the committee treasurer under penalty of perjury that the contents of the report are true and correct.

By filing this report, you certify that, under penalty of perjury, you have examined the contents of this report, and the contents are true and correct.

Valerie Medina
Printed Name of Committee Treasurer

[Signature]
Signature of Committee Treasurer

7/1/24
Date



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER

SUMMARY OF RECEIPTS (Schedule A):

Receipts	Cash	Equity
1. Monetary Contributions Received		
(a) In-State Individuals - More than \$100	490.00	
(b) In-State Individuals - \$100 or Less (Aggregate)		
(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)		
(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		
(l) Refunds Given Back to Contributors		
(m) Net Monetary Contributions (subtract 1(l) from 1(k))	490.00	
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))		
3. Rebates and Refunds Received		
4. Interest Accrued on Committee Monies		
5. In-Kind Contributions Received		
(a) In-State Individuals - More than \$100		
(b) In-State Individuals - \$100 or Less (Aggregate)		
(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 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		
(b) Payments on Extensions of Credit Received		
(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		
11. Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12. Miscellaneous Receipts (use cash and/or equity as applicable)		
13. 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)	490.00	



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

SUMMARY OF DISBURSEMENTS (Schedule B):

Disbursements	Cash	Equity
1. Disbursements for Operating Expenses	490.00	
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))		
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)		
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)	490.00	



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

SCHEDULE A(1)(a)

Individual Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name WM. H. "Scotty" McClure		Date Contribution Received 06/01/24	490.00		490.00
	Street Address 2120 Santa Cruz					
	City Bullhead City	State AZ	ZIP 86442			
	Occupation Retired	Employer Retired				
2	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule (transfer the total received this period to "Summary 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 1 of 1



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DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information				Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name RIVER ROCK SIG	Disbursement Date 6/1/24		<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit	490.00	490.00
	Street Address 5593 Hwy 95, Suite 6					
	City Fort Mohave	State AZ	ZIP 86426			
	Type of Operating Expense Paid SIGNS	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
2	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
3	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
4	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
5	Name	Disbursement Date		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/>				
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 1)					490.00	490.00