



COMMITTEE ID NUMBER (office use only)

COMMITTEE TYPE (choose one):

MAY 10 2024 AM11:20 PECD BY CITY CLERKS DPT

	RECD BY CITY CLERKS					
☐ Candidate	Committee to clost Karan Dallman					
Committee Name (required): first or last name & office)	Committee to elect Karen Dallman					
Candidate Information:	Candidate's Name (required): Karen Dallman					
	Candidate's mailing address (required): 2024 Cactus Court Bullnead City AZ 86442					
	Candidate's email address (required): Fovargue_k@hotmail.com					
	Candidate's phone number (required): 928-607-3871					
	Candidate's website (if any):					
Office Sought (choose one):	☐ Governor ☐ Secretary of State ☐ Attorney General ☐ State Treasurer					
onice Sough (choose one).	☐ Superintendent of Public Instruction ☐ State Mine Inspector ☐ Corporation Commissioner					
	☐ State Senate ☐ State House of Representatives ☐ District (required):					
	☐ County Office: ☐ District (if applicable): ☐					
	City/Town Office: Bullhead City Council					
Election Cycle for Office Soug	ght (year the election will take place) (required):					
Party Affiliation: (required for partisan offices)	□ Democrat □ Green □ Libertarian ★ Republican □ Other:					
Political Action Comr	nittee (PAC)					
Committee Name (required): (if sponsored, must include sponsor's name)						
Political Function (optional):	☐ Contributions ☐ Candidate-Related Independent Expenditures					
(select any that apply)	☐ Ballot Measure Expenditures ☐ Recall Expenditures					
	a de la constanción de la cons					
Sponsorship Information:	Sponsor's name or nickname (required):  Sponsor's malling address (required):					
(If applicable)	Sponsor's email address (required):					
	Sponsor's phone number (if any):					
	Sponsor's website (if any):					
0 2-1 04-1	☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union					
Special Status						
(if applicable)	☐ Standing Committee (must also complete separate standing committee registration)					
*						
*	☐ Standing Committee (must also complete separate standing committee registration)					
(if applicable)	☐ Standing Committee (must also complete separate standing committee registration)					
(if applicable)  Political Party	☐ Standing Committee (must also complete separate standing committee registration) ☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)					
(if applicable)	□ Standing Committee (must also complete separate standing committee registration) □ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)					
(if applicable)  Political Party  Committee Name (required)	□ Standing Committee (must also complete separate standing committee registration) □ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)  □ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)					
(if applicable)  Political Party  Committee Name (required) (must include party affiliation	□ Standing Committee (must also complete separate standing committee registration) □ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)  □ 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)					
(if applicable)  Political Party  Committee Name (required) (must include party affiliation	□ Standing Committee (must also complete separate standing committee registration) □ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)  □ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)					

🕱 Initial Application ☐ Amended Application Date: 05/10/2024



COMMITTEE ID NUMBER (office use only)

#### COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required): 2024 Cactus Court Bullhead City AZ 86442
	Committee's email address (required); Fovargue_k@hotmail.com
	Committee's phone number (if any): 928-607-3871
	Committee's website (if any):
Chairperson's Information:	Chairperson's лате (required): Karen Dallman
	Chairperson's physical address (required): 2024 Cactus Court Bullhead City AZ 86442
	Chairperson's mailing address (if different):
	Chairperson's email address (required): Fovargue_k@hotmail.com
	Chairperson's phone number (required): 928-607-3871
	Chairperson's employer (required): retired
	Chairperson's occupation (required): retired medical assistant / practice manager
Treasurer's Information:	Treasurer's name (required); Karen Dallman
	Treasurer's physical address (required): 2024 Cactus Court Bullhead City AZ 86442
	Treasurer's mailing address (If different):
	Treasurer's email address (required); Fovargue_k@hotmail.com
	Treasurer's phone number (required): 928-607-3871
	Treasurer's employer (required): retired
	Treasurer's occupation (required): retired medical assistant / practice manager
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: <u>Karen Dallman</u>

Date: <u>05/10/2024</u>

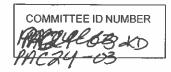
Treasurer's signature: <u>Karen Dallman</u>

Date: <u>05/10/2024</u>

Candidate's signature (if applicable): <u>Karen Dallman</u>

Date: <u>05/10/2024</u>





CON	BALTER	CE INC	CODIA	ATION	/)	١.
	IVII I EI	CC IIN		RIUN	(required)	١.

	Committee Information:	Committee Name:	Committee To Elect Karen Dallman	
AND	DIDATE INFORMATION (only if filing	as a candidate com	mittee):	
	Office Sought.	☐ County Office: ☐ City/Town Offic	e: Bullhead City Council	□ Special District 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): March 10, 2024

REPORTING PERIOD (check one):

	REPORTING PERIOD	REPORT DUE
	2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023	February 26, 2023 to March 4, 2023
	2023 March Post-Election (Q1) Report (Local Only): February 26, 2023 to March 31, 2023	April 1, 2023 to April 15, 2023
	2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
	2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
4	2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 15, 2023
	2023 Quarter 2 Report: April 1, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
	2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
	2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
	2023 Quarter 3 Report: July 1, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023*
	2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
	2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
	2023 Quarter 4 Report: October 1, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
	2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024	February 25, 2024 to March 2, 2024
	2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
	2024 Quarter 1 Report: January 1, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
	2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024	May 5, 2024 to May 11, 2024
	2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
	2024 Quarter 2 Report: April 1, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
7	2024 July Pre-Primary Election Report: July 1, 2024 to July 13, 2024	July 14, 2024 to July 20, 2024
	2024 July Post-Primary Election (Q3) Report: July 14, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
	2024 Quarter 3 Report: July 1, 2024 to September 30, 2024	October 1, 2024 to October 15, 2024
	2024 November Pre-General Election Report: October 1, 2024 to October 19, 2024	October 20, 2024 to October 26, 2024
	2024 November Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024	January 1, 2025 to January 15, 2025
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

## INANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$5148.98	\$5148.98
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$21,48.98	52148.98
(d) = Balance at close of reporting period	\$2900.00	
☐ Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must following page need to be filed.	be completed, but only this	COVER PROPERTY OF



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

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

Printed Name of Committee Treasurer

Signature of Committee Treasurer

07/13/2024

Date

COMMITTEE ID NUMBER
PAC24-03

SUMMARY OF RECEIPTS (Schedule A):

		,
Receipts	s Cash	Equity
Monetary Contributions Received		
(a) In-State Individuals - More than \$100	\$3000.00	
(b) In-State Individuals - \$100 or Less (Aggrega	ste) \$100.00	
(c) Out-of-State Individuals		
(d) Candidate Committees		
(e) Political Action Committees		
(f) Political Parties		
(g) Partnerships		
(h) Corporations & Limited Liability Companie	PS (PACs & Political Parties Only)	
(i) Labor Organizations (PACs & Political Parties On		
(j) Candidate's Personal Monies (Candidate Com	4.0.00	
(k) Monetary Contributions Subtotal (add 1(a) the	annace only)	
(I) Refunds Given Back to Contributors	lough 1(j)) woo to loo	
	1(6)) \$5048.98	The state of the s
(m) Net Monetary Contributions (subtract 1(I) from Loans	1(k))	
(a) Loans Received		
(b) Forgiveness on Loans Received		00
(c) Repayment on Loans Made		
(d) Interest Accrued on Loans Made		
(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
. Rebates and Refunds Received		
. Interest Accrued on Committee Monies		
. In-Kind Contributions Received		
(a) In-State Individuals - More than \$100		\$150.00
(b) In-State Individuals - \$100 or Less (Aggrega	ite)	
(c) Out-of-State Individuals		
(d) Candidate Committees		
(e) Political Action Committees		
(f) Political Parties		6/si
(g) Partnerships		TIM .
(h) Corporations & Limited Liability Companie		(8)
(i) Labor Organizations (PACs & Political Parties Or		
(j) Candidate's Personal Assets or Property (		\$1E0.00
(k) In-Kind Contributions Subtotal (equity: add 5		\$150.00
. In-Kind Donations Received (Non-Contributions) (P	olitical Parties Only)	
Extensions of Credit		
(a) Extensions of Credit Received		(A)
(b) Payments on Extensions of Credit Receiv		
(c) Net Extensions of Credit (subtract 7(b) from 7(a		
. Joint Fundraising / Shared Expense Payments	s Received	
. Payments Received for Goods / Services		
<ol> <li>Outstanding Accounts Receivable / Debts Owe</li> </ol>	ed to Committee	
1. Transfer In Surplus Monies / Transfer Out Deb	t (use cash and/or equity as applicable)	
2. Miscellaneous Receipts (use cash and/or equity as ap	oplicable)	
13. Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12, equ	uity: add 2(b), 5(k), 6-7(c), 10-12) \$5048.98	\$150.00

COMMITTEE ID NUMBER PAC24-03

MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:\* SCHEDULE A(1)(a)

	Individu	al Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cyc	
	Name Hildy Anguis		Date Contribution Received 05/07/2024	\$200.00	\$200.00	\$200.00	
	Street Address 2920 Esmerelda Dr						
1	сиу Bullhead City	State AZ	zip 86442				
	Occupation Dist 2 County Supervisor	Employer Mohave Co	punty				
	Name John & Olivia McCormick	<u> </u>	Date Contribution Received 05/24/2024	\$1000.00	\$1000.00	\$1000.00	
	Street Address 1891 Corwin Rd						
	<sub>сау</sub> Bullhead City	State AZ	ZIP 86442				
	Occupation Retired Real Estate	Employer N/A					
	Name Dan Oehler		Date Contribution Received 06/17/2024	\$300.00	\$300.00	\$300.00	
	Street Address 2759 Camino Del Rio						
3	cay Bullhead City	State AZ	ZIP 86442				
	Occupation Lawyer	Employer Self					
	Name Fred Lamb		Date Contribution Received 06/25/2024	\$300.00	\$300.00	\$300.00	
	Street Address 1120 Copper Ln						
ŀ	city Bullhead City	State AZ	ZIP 86442				
	Occupation Employer Retried Dentisit Self						
	Name Ann Pettit		Date Contribution Received 06/25/2024	\$500.00	\$500.00	\$500.00	
	Street Address 3804 Mountain View Rd						
5	city Bullhead City	State AZ	ZIP 86442				
	Occupation Employer Real Estate US Southwest		rest				

<sup>\*</sup>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 \_ 2



MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:\* SCHEDULE A(1)(a)

	Individual	Contributor Inforr	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Ray Jackson		Date Contribution Received 06/25/2024	\$500.00	\$500.00	\$500.00
	Street Address 3804 Mountain View Rd					
1	c <sub>ily</sub> Bullhead City	State AZ	ZIP 86442			
	Occupation Retired	Employer N/A	3			
	<sub>Name</sub> Tom Dallman		Date Contribution Received 04/18/2024	\$200.00	\$200.00	\$200.00
- 1	Street Address 2024 Cactus Ct					
2	с <sub>йу</sub> Bullhead City	State AZ	ZIP 86442			
	Occupation Medical Director	Employer Canyon Ho	me Health & Hospice			
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	I	Date Contribution Received			
	Streel Address					
4	City	State	ZIP			
	Occupation Employer					
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				

\*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), page2 of 2



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	\$100.00	\$100.00
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	\$100.00	\$100.00

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



# MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

	Са	indidate Information	1	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Karen Dallman		Date Contribution Received 03/10/2024	\$67.77	\$67.77	\$67.77
	Street Address 2024 Cactus Ct	163				
	city Bullhead City	State AZ	ziP 86442			
	Occupation Retired CMA/Manager	Employer N/A				
	<sub>Name</sub> Karen Dallman		Date Contribution Received 05/07/2024	1207.51	\$1207.51	\$1207.51
	Street Address 2024 Cactus Ct					
?	city Bullhead City	State AZ	ZIP 86442			
	Occupation Employer Retired CMA/Manager N/A					
1	<sub>Name</sub> Karen Dallman		Date Contribution Received 06/05/2024	\$311.20	\$311.20	\$311.20
	Street Address 2024 Cactus Ct		<u>'</u>			
	<sub>сіtу</sub> Bullhead City	State AZ	ZIP 86442			
	Occupation Retired CMA/Manager	Employer N/A	•		1992	
	<sub>Name</sub> Karen Dallman	Date Contribution Received 06/19/2024	\$362,50	\$362.50	\$362,50	
	Street Address 2024 Cactus Ct					
1	City Bullhead City	State AZ	ZIP 86442			
	Occupation Employer N/A Employer N/A					
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
_	Enter total only if last page of sci (transfer the total received this period	hedule I to "Summary of Rece	ipts,* line 1(j))		\$1948.98	\$1948.98



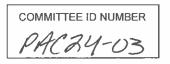
IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN \$100 DURING ELECTION CYCLE:\*

SCHEDULE A(5)(a)

	Indivi	dual Contributor Inforr	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	<sub>Name</sub> Mehdi Arzami		Date In-Kind Contribution Received 05/24/2024	\$150.00	\$150.00	\$150.00
	Street Address 2710 Sidewheel Dr			1		
1	c <sub>ity</sub> Bullhead City	State	<sup>ZIP</sup> 86442			
	Occupation General Contractor	Employer Fairway Co	enstruction			
	Name		Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP			
	Occupation	Employer		-		
$\dashv$	Nәme	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		Date In-Kind Contribution Received			
	Street Address			-	l.	
5	City	State	ZIP	-	:	
	Occupation	Employer		1	;	
_	Enter total only if last page of (transfer the total received this per		<u> </u>		\$150.00	\$150.00

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





## DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information				Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	<sub>Name</sub> VistaPrint.com	Disbursement Date 03/10/2024		\$67.77	\$67.77	\$67.77
	Street Address Online					
1	City	State	ZIP			
	Type of Operating Expense Paid Banner	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Cash ☑ Credit		
	Name Totally Awesome Printing	Disbursement Date 05/07/2024		\$1207.51	\$1207.51	\$1207.51
	Street Address 1524 Drinda Way					
2	city Fort Mohave	State AZ	zip 86426	□ Cash		
	Type of Operating Expense Paid Campaign Signs, shirts, postcards	Non-Electoral Purp	ose? (PACs and Political Parties Only)	☑ Credit		
	Name Totally Awesome Printing	Distursement Dat 06/05/2024	ie	\$311.20	\$311.20	\$311.20
	Street Address 1524 Drinda Way					
3	c <sub>ity</sub> Fort Mohave	State AZ	zip 86426	□ Cash		
	Type of Operating Expense Paid Campaign Signs	Non-Electoral Purp	ose? (PACs and Political Parties Only)	☑ Credit		
	Name Mean Green Marketing	Disbursement Date 06/19/2024		\$362.50	\$362.50	\$362.50
	Street Address 3065 E Northern Ave					
1	c <sub>ily</sub> Kingman	State AZ	zip 86409	— ☑ Cash		
	Type of Operating Expense Paid Advertisement	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
	Name Bullhead City Rotary Club	Disbursement Date 04/18/2024		\$200.00	\$200.00	\$200.00
	Street Address PO Box					
5	cny Bullhead City	State AZ	21P 86442	☑ Cash ☐ Credit		
	Type of Operating Expense Paid Burro BBQ Ad	Non-Electoral Purp	pose? (PACs and Political Parties Only)	-   Loredit		
	 Enter total only if last page of schedul				\$2148.98	\$2148.98

Schedule B(1), page\_\_\_\_ of \_\_\_\_