

POLITICAL COMMITTEE
CITY OF _____
CAMPAIGN FINANCE REPORT
2016 August/November Regular Election

FOR OFFICE USE ONLY

MESA CITY CLERK
2016 JUN 28 PM 3: 32

1. Guinn For Mesa
Full Name of Committee

533 N Date
Address

Mesa 85201 Maricopa 480-
City ZIP Code County Phone

209-2788
Phone

2. Courtney Guinn, Councilmember District 1
Sponsoring Organization or Candidate and office

Name of Candidate and Office Sought (if applicable)

Courtney_Guinn@cox.net _____
E-Mail Address Fax #

3A. ID#

CAN2016-07

4. REPORTING PERIOD (Please check appropriate box) DUE BETWEEN

January 31 Report - For Period of 11-25-2014 thru December 31, 2015 January 1, 2016 and February 1, 2016

June 30 Report - For Period of January 1, 2016 thru May 31, 2016 June 1, 2016 and June 30, 2016

Pre-Primary Election Report - For Period of June 1, 2016 thru August 18, 2016 August 19, 2016 and August 26, 2016

Post-Primary Election Report - For Period of August 19, 2016 thru September 19, 2016 September 20, 2016 and September 29, 2016

Pre-General Election Report - For Period of September 20, 2016 thru October 27, 2016 October 28, 2016 and November 4, 2016

Post-General Election Report - For Period of October 28, 2016 thru November 28, 2016 November 29, 2016 and December 8, 2016

**January 31, Report - For Period of November 29, 2016 thru December 31, 2017 January 1, 2018 and January 31, 2018

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		\$ 0.00
5b Cash on Hand at the Beginning of this Reporting Period	\$0.00	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$550.00	\$550.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	\$550.00	\$550.00
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		\$0.00
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$534.09	\$534.09
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	\$15.91	\$15.91

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

1. Committee Name: Guinn For Mesa
 3. Report covering period from 4/1/16 Thru 5/31/16

2. ID#
CAN2016-07

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:	\$550. ⁰⁰	\$550.00
(a) Individuals - more than \$50 (Total from Schedule A)	\$550. ⁰⁰	\$550.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	—	—
(c) Political Committees (Total from Schedule B)	—	—
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	\$550. ⁰⁰	\$550.00
(e) Refund of contributions (Total from Schedule F-2)	—	—
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	\$550. ⁰⁰	\$550.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	—	—
(b) All other loans (Total from Schedule C-1)	—	—
(c) Total Loans [add 5(a) and 5(b)]	—	—
6. In-kind contributions (Total from Schedule E)	—	—
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	—	—
8. Total Receipts [add 4(f), 5(c), 6, and 7]	\$550. ⁰⁰	\$550.00
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	\$534. ⁰⁹	\$534.09
10. Independent Expenditures (Total from Schedule D-1)	—	—
11. Value of In-kind expenditures (Total from Schedule E)	—	—
12. Loans made by reporting committee (Total from Schedule D-2)	—	—
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	—	—
(b) Repayment of all other loans (Total from Schedule D-5)	—	—
(c) Total Loan Repayments [add 13(a) and 13(b)]	—	—
14. Transfers to other political committees (Total from Schedule D-6)	—	—
15. Any other disbursement (Total from Schedule D-7)	—	—
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	\$534.09	\$534.09
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	—	—
18. Total disbursements [subtract line 17 from line 16]	\$534.09	\$534.09
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	—	—

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Courtney Guinn
 Type or Print Name of Treasurer

Courtney Guinn 6/28/16
 Signature of Treasurer or Candidate or Designating Individual Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
CAN2016-07

1. Committee Name Guinn For Mesa

3. Report covering period from 1/1/16 thru 5/31/16

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																												
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Guinn</td> <td>Courtney</td> <td>W</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">533 N Date</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Mesa</td> <td>AZ</td> <td>85201</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Program Manager</td> <td colspan="2">Walgreens</td> </tr> </table>	LAST	FIRST	MI	Guinn	Courtney	W	STREET ADDRESS			533 N Date			CITY	STATE	ZIP	Mesa	AZ	85201	OCCUPATION	EMPLOYER		Program Manager	Walgreens		1/14/16	\$500.00	\$550.00
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5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		\$550.00	\$550.00																								

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#
CAN2016-07

1. Committee Name Guinn For Mesa

3. Report covering period from 1/1/16 thru 5/31/16

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Americopy 856 E Main St Mesa, AZ 85203 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Copies.	1/14/16	\$9.72
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Sports Station 1054 N Gilbert Rd STE 3 Gilbert, AZ 85234 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printed Shirts	4/12/16	\$172.27
4c.	NAME, ADDRESS, CITY, STATE AND ZIP Costco 1415 N Arizona Ave Gilbert, AZ 85233 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Water	5/16/16	\$29.94
4d.	NAME, ADDRESS, CITY, STATE AND ZIP QuikTrip 816 W University Dr Mesa, AZ 85201 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Ice	5/17/16	\$7.16
4e.	NAME, ADDRESS, CITY, STATE AND ZIP Mesa Westwood Little League 733 N Longmore Mesa, AZ 85201 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Sponsorship with banners	2/16/16	\$300.00
4f.	NAME, ADDRESS, CITY, STATE AND ZIP Bank of America 63 W Main St Mesa, AZ 85201 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Monthly Service Fee	5/2/16	\$15.00
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [if last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		\$534.09

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

4	INDEPENDENT EXPENDITURES IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE <input type="checkbox"/> Benefitted <input type="checkbox"/> Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE <input type="checkbox"/> Benefitted <input type="checkbox"/> Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE <input type="checkbox"/> Benefitted <input type="checkbox"/> Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]		

*SEE A.R.S. § 16-901(14).

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Signature of Treasurer _____

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT