

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

FOR OFFICE USE ONLY

MESA CITY CLERK  
2016 JAN -7 PM 2:29

1. Reelect Chris Glover to District 4

Full Name of Committee  
151 East First Street #114

Address  
Mesa 85201 Maricopa 480-694-1993

City ZIP Code County Phone

2. \_\_\_\_\_  
Sponsoring Organization or Candidate and office

\_\_\_\_\_  
Name of Candidate and Office Sought (if applicable)  
reelectchrsglovertodistrict4@gm ail.com

\_\_\_\_\_  
E-Mail Address Fax #

3A. ID# CAN14-04

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	26052.08	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	0.00	40890.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	26052.08	40890.00
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)	4500.00	19337.92
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	21552.08	21552.08

\*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: Reelect Chris Glover to District 4  
 3. Report covering period from 11/25/14 Thru 12/31/15

2. ID#
--------

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	0.00	20600.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	0.00	390.00
(c) Political Committees (Total from Schedule B)	0.00	9100.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	0.00	30090.00
(e) Refund of contributions (Total from Schedule F-2)	0.00	0.00
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	0.00	30090.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0.00	6100.00
(b) All other loans (Total from Schedule C-1)	0.00	0.00
(c) Total Loans [add 5(a) and 5(b)]	0.00	6100.00
6. In-kind contributions (Total from Schedule E)	0.00	4700.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0.00	0.00
8. Total Receipts [add 4(f), 5(c), 6, and 7]	0.00	40890.00

DISBURSEMENTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
9. Expenditures for operating expenses (Total from Schedule D)	0.00	4037.92
10. Independent Expenditures (Total from Schedule D-1)	0.00	0.00
11. Value of In-kind expenditures (Total from Schedule E)	0.00	4700.00
12. Loans made by reporting committee (Total from Schedule D-2)	0.00	0.00
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0.00	6100.00
(b) Repayment of all other loans (Total from Schedule D-5)	0.00	0.00
(c) Total Loan Repayments [add 13(a) and 13(b)]	0.00	6100.00
14. Transfers to other political committees (Total from Schedule D-6)	0.00	0.00
15. Any other disbursement (Total from Schedule D-7)	4500.00	19337.92
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	4500.00	19337.92
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0.00	0.00
18. Total disbursements [subtract line 17 from line 16]	4500.00	19337.92
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0.00	0.00

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.

Christopher Glover

Type or Print Name of Treasurer

*Christopher J. Glover*

Signature of Treasurer or Candidate or Designating Individual

1-7-2016

Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS\*

SCHEDULE A

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

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 colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
LAST	FIRST	MI													
STREET ADDRESS															
CITY	STATE	ZIP													
OCCUPATION	EMPLOYER														
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
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OCCUPATION	EMPLOYER														
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
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LAST	FIRST	MI													
STREET ADDRESS															
CITY	STATE	ZIP													
OCCUPATION	EMPLOYER														
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]			0.00											

\*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.

**CONTRIBUTIONS of \$50 or less - AGGREGATE TOTAL\***

**SCHEDULE A-1**

2. ID#
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1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

**4. Aggregate Total of Contributions of \$50 or less**

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	0.00	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	0.00

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

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4		CONTRIBUTIONS	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
		IDENTITY OF CONTRIBUTOR AND DATE RECEIVED		
4a	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [if last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]		0.00	0.00

**CANDIDATE LOANS**

**SCHEDULE C**

<b>1.</b>	<b>Committee Name</b> Reelect Chris Glover to District 4		<b>2. ID #</b>	
<b>3.</b>	Report covering period from <u>11/25/14</u> thru <u>12/31/15</u>			
<b>4.</b>	<b>LOANS MADE OR GUARANTEED BY CANDIDATE</b>	<b>DATE RECEIVED</b>	<b>AMOUNT RECEIVED</b>	<b>CUMULATIVE TOTAL THIS CAMPAIGN TO DATE</b>
	<b>NAME AND ADDRESS FROM WHOM RECEIVED</b>			
<b>4a.</b>	<b>NAME, ADDRESS, CITY, STATE, AND ZIP</b>			
	<b>DESCRIPTION</b>			
<b>b.</b>	<b>NAME, ADDRESS, CITY, STATE, AND ZIP</b>			
	<b>DESCRIPTION</b>			
<b>c.</b>	<b>NAME, ADDRESS, CITY, STATE, AND ZIP</b>			
	<b>DESCRIPTION</b>			
<b>d.</b>	<b>NAME, ADDRESS, CITY, STATE, AND ZIP</b>			
	<b>DESCRIPTION</b>			
<b>e.</b>	<b>NAME, ADDRESS, CITY, STATE, AND ZIP</b>			
	<b>DESCRIPTION</b>			
<b>f.</b>	<b>NAME, ADDRESS, CITY, STATE, AND ZIP</b>			
	<b>DESCRIPTION</b>			
<b>5.</b>	<b>ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C</b> [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]		<b>0.00</b>	<b>0.00</b>

OTHER LOANS

SCHEDULE C1

2. ID#

1. Committee Name Reelect Chris Glover to District 4  
 3. Report covering period from 11/25/14 thru 12/31/15

4	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A]		0.00	0.00

**EXPENDITURES FOR OPERATING EXPENSES\***

**SCHEDULE D**

2. ID#
--------

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

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		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
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]		0.00

\*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 Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED			
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]	0.00	

\*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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

2. ID#
--------

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		0.00

OFFSETS TO OPERATING EXPENSES \*

SCHEDULE D-3

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [If last page of Schedule D-3, [transfer total to Detailed Summary Page Line 17 Column A]			0.00
* Includes return of contributions made by reporting committee			

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		0.00

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	REPAYMENT OF ALL OTHER LOANS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]	0.00	

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID#
--------

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]

0.00

ANY OTHER DISBURSEMENT

SCHEDULE D-7

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/14/15 thru 12/31/15

4.	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# ProMusica Arizona Tax ID #51-0503175 P.O. Box 74386 Phoenix, Arizona 85087  DESCRIPTION Charitable Donation	6/1/2015	4500.00
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#   DESCRIPTION		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#   DESCRIPTION		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#   DESCRIPTION		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#   DESCRIPTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 (Transfer total to Detailed Summary Page Line 15 Column A)		4500.00

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN			
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]			0.00
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]			0.00

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [if last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A		0.00

OFFSETS TO CONTRIBUTIONS RECEIVED \*

SCHEDULE F-2

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	DATE REFUND MADE	AMOUNT OF THE REFUND
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		

0.00

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]

\* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

2. ID#

1. Committee Name Reelect Chris Glover to District 4

3. Report covering period from 11/25/14 thru 12/31/15

4	DEBTS AND OBLIGATIONS	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED				
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [Transfer total to Detail Summary Page Line 19, Column A]				0.00