

EE INFORMATION (required	i):		Received Clerk's Office
Committee Information:	Committee Name:	Committee to Elect Eddie Levins	7/19/24 LAnderson
TE INFORMATION (only if fill Office Sought:	ing as a candidate comm	nittee):	☐ Special District Office:

COMMITTEE INFORMATION (required):

🗹 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
	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
	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
~	2024 August Pre-Primary Election Report: July 1, 2024 to July 20, 2024	July 21, 2024 to July 27, 2024
	2024 August Post-Primary Election (Q3) Report: July 21, 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

\*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)	2150	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	2150	2150
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 2,150.00	\$ 2,150.00
(d) = Balance at close of reporting period	\$ 0.00	

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.

Eddie Levins	( Ledoux	07/19/2024
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	800	
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals	550	
	(d) Candidate Committees	<u> </u>	
	(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)	800	
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))	2150	
	(I) Refunds Given Back to Contributors	0	
	(m) Net Monetary Contributions (subtract 1(l) from 1(k))	2150	
2.	Loans	2100	
	(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))		
١.	Rebates and Refunds Received		
	Interest Accrued on Committee Monies		
<b>.</b>	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 Partles Only)		
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
	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))		
	Joint Fundralsing / Shared Expense Payments Received		
	Payments Received for Goods / Services		
DSC.	Outstanding Accounts Receivable / Debts Owed to Committee		
	Transfer In Surplus Monles / Transfer Out Debt (use cash and/or equity as applicable)		
2.	Miscellaneous Receipts (use cash and/or equity as applicable)		

## SUMMARY OF DISBURSEMENTS (Schedule B):

10	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	1983.49	
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	X 30,000	
	(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		
Т	(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))		
ò.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
3.	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		
	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)	1983.49	

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

SCHEDULE A(1)(a)

/	Individual C	ontributor Infon	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
1	Name Larritine Levins		Date Contribution Received 10/16/23	500		
	Street Address 1460 N. 62nd Street					
1	cay Mesa	State AZ	ZIP 85205			
	Occupation Nurse	Employer Naphcare				
	Name Kevin Blackwell		Date Contribution Received 9/20123	300		
	Street Address	The state of the s				
2	City	State	ZIP			
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address	-				
4	ON .	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
-	Street Address			1		
5	City	State	ZIP			
				_		

\*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).

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

\*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	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name David Levins		Date Contribution Received 9/29/23	500		
	Street Address 6 Rivanna Road					
1	New Castle	DE State	7IP 19720			
	Bus Driver	DART				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name	•	Date Contribution Received			
	Street Address					
3	Сму	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
į	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of scheo (transfer the total received this period to	lule "Summary of Recei	ots," line 1(c))			



#### MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/	Candidate Comm	nittee Contributor Info	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Recei	Ned			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Recei	hved			
-	Committee Name					
	Street Address					
3	ON .	State	ZIP	1		
	Committee ID Number	Date Contribution Recei	ved			
	Committee Name					
	1					
	Street Address			-		
4	Street Address City	State	ZIP			
1		State  Date Contribution Receive		-		
1	Ску					
4	City  Committee ID Number					
	City  Committee ID Number  Committee Name					

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MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

						1
/	Political Action Com	mittee Contributor Ir	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Committee Name					
	Street Address					
1	ску	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name		=		-	
	Street Address					
2	City	State	ZIP	1 1		
	Committee ID Number Date Contribution Received		red	1		
	Committee Name					
	Street Address	-		1		
3	Oby	State	ZIP	1		
	Committee ID Number	Date Contribution Receiv	ed	1		
	Committee Name		= = =			-
	Street Address			1		
4	City	State	ZIP	1		
	Committee ID Number	Date Contribution Received		1 1		
_	Committee Name					
		Street Address				
	Street Address			1		
5	Street Address  City	State	ZIP			

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MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

/				Ĭ	1 -	
	Politic	al Party Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cyc
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contributio	n Received			
	Committee Name					
	Street Address					
2	Cay	State	ZIP			
	Committee ID Number	Date Contributio	on Received	-		
	Committee Name					
	Street Address					
3	City	State	ZIP		Le.	
	Committee ID Number	Date Contributio	n Received			
	Committee Name					
	Street Address					
4	Cay	State	ZIP			
	Committee ID Number	Date Contribution	n Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution	n Received			
					1	

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MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnersh	nip Contributor Infor	mation	Amount Receive	Cumulative ed Amount this Reporting Period	Cumulative Amount this Election Cyc
	Partnership Name					
	Street Ackiness					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number					
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Partnership Name					
	Street Address					
	City	State	ZIP			
Ì	Corporation Commission File Number	ile Number Date Contribution Received				
	Partnership Name					
١	Street Address					
	City	State	ZIP			
I	Corporation Commission File Number	Date Contribution	Received			

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#### MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation	/ LLC Contributor I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount thi Election Cycl
	Corporation/LLC Name	Corporation/LLC Name					
	Street Address						
1	City						
	Corporation Commission File Number						
	Corporation LLC Name						
	Street Address						
2	Сту	State	ZIP		1		
1	Corporation Commission File Number	Son Commission File Number Date Contribution Received					
	Corporation/LLC Name						
	Street Address	1					
3	ON .	State	ZIP		1		
	Corporation Commission File Number	orporation Commission File Number Date Contribution R		soeived			
	Corporation/LLC Name						
	Street Address				1		
4	City :	State	ZIP		-		
	Corporation Commission File Number	Date Contributio	n Received		-		
	Corporation/LLC Name						
5	Street Address						
	Ску	State	ZIP				
	Corporation Commission File Number	Date Contribution	n Received				_

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MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organization	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc	
	Labor Organization Name		Reporting Feriod	Licolori Oyo			
	Street Address						
	City	State	ZIP	-			
	Corporation Commission File Number	Date Contribution Receive	d	-			
	Labor Organization Name						
	Street Address			1			
1000	Ску	State	ZIP				
	Corporation Commission File Number	Date Contribution Receive	ed .				
	Labor Organization Name						
1000	Street Address		1				
1	ON	State	ZIP				
	Corporation Commission File Number	Date Contribution Receive	ed	1			
	Labor Organization Name						
- 1	Street Address						
			27/2	1	1		
(755)	City	State	ZIP				
(200)	City  Corporation Commission File Number	State  Date Contribution Receive		-			
CASC				-			
	Corporation Commission File Number			_			
	Corporation Commission File Number  Labor Organization Name						

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MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

_		andidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Eddie Levins		Date Contribution Received 9/20/2023	800		
	Street Address 1460 N 62nd Street					
1	Cay Mesa	State AZ	zip 85205			
	Occupation Educator	Employee LIS Group				
	Name		Date Contribution Received			
	Street Address					
2	Oby	State	ZIP			
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address					
3	Оку	State	ZIP			
	Occupation	Employer				
	Næme		Date Contribution Received			
	Street Address					
١	City	State	ZIP	-		
	Occupation	Employer				
	Name		Date Contribution Received			
ŀ	Street Address					
ŀ	City	State	ZIP			
-	Occupation	Employer		-		

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REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

8	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded		Treporting Feriou	Liection Cycle
	Street Address					
1	Cay	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution	-		
	Name		Date Contribution Refunded			
	Street Address					
2	City City	State	ZIP	-		
	ID Number (# applicable)		Date of Original Contribution	_		
	Name	Date Contribution Refunded				
	reet Address					
3		I				
~	CRy	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution		A 500	
	Name		Date Contribution Refunded			
	Street Address					
4	Chy	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
1	Name		Date Contribution Refunded			
	Street Address			-		
5	City	State	ZIP	-		
	ID Number (if applicable)		Date of Original Contribution	-		
_				1		

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LOANS RECEIVED:

SCHEDULE A(2)(a)

		Lender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulativ Amount th Election Cy
	Lander Name	Date Loan Received	3			
	Street Address			1		
1	Caty	State		1		
	Custantin Entires Name	Non-Electoral Purpo	ee? (PACs and Political Parties Only)	1		
	Lender Name	Date Loan Receive	đ			
	Street Artifrons			1 1		
2	Chy	State	ZIP	1		
	Quaranter Enterior Name	Part Lot	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name		Date Loan Received			
	Steel Attima			1		
3	Ob;	State	ZIP	1		
	Gueranto/Endoner Name	Non-Electional Purpose? (PACs and Political Parties Only)		1		
	Lender Name	Date Loan Received	1			
	Street Address			1		
4	Cay	State	ZIP	1		
	Guaranto/Endorser Name	Non-Electoral Purpos	e? (PACs and Political Parties Only)	-		
1	Lender Name	Date Loan Received				
	Street Address			1		
5	Cey	State	ZIP	-		
	GuarantoofEndorser Name	Non-Electoral Purpose	e? (PACs and Political Parties Only)			

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FORGIVENESS ON LOANS RECEIVED: SCHEDULE A(2)(b)

/	Lender	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address		1			
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address			1		
5	City	State	ZIP	1		
				J		

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REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

,						
/	Вогго	wer Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	)			
	Borrower Name		Date Repayment Received			
			Delic (Tepayment Tocoroc			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	inal Amount Borrowed Amount Still Outstand				
+	Borrower Name		Date Repayment Received	-		
	Street Address					
3						
~	Cay	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address			-		
5	City	State	ZIP			
١		-1	1	1		

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

_	P	ower Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	nding			
	Borrower Name		Date Interest Accrued			
	Street Address					
2	Ску	State	ZIP			
	Original Amount Sorrowed	Amount Still Outstar	nding			
	Borrower Name		Date Interest Accrued			
	Street Address		-			
3	Ony	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	nding	-		
	Borrower Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	nding	_		
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
1	Original Amount Borrowed Amount Still Outstanding					

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COMMITTEE ID NUMBER

# STATE OF ARIZONA

_	Pa	ayor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Payor Name		Date Rebets/Refund Received			
	Street Address					
1	Cay	State	ZIP	_		
	Original Purchase Amount	Reason for Refund/R	Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address		}			
2	Cay	State	ZIP			
	Original Purchase Amount	Reason for Refund/R	tebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address			1 1		
3	Cay	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/R	ebate	1		
	Payor Name		Date Rebate/Refund Received			
	Street Address			1		
4	Сву	State	ZIP			
	Original Purchase Amount	Reason for Refund/Re	ebate	1		
	Psyor Name		Date Rebate/Refund Received			
100	Street Address			1		
5	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/Re	obalo	1 1		
_	Enter total only if last page of sched (transfer the total received this period to	ule				

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Sunk Name / Type of Account)		
Account with Interest Elemed (Sank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)		

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

SCHEDULE A(5)(a)

/	Individ	dual Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name		Date In-Kind Contribution Received					
	Street Address			1				
1	City	State	ZIP					
	Occupation	Employer						
	Name		Date In-Kind Contribution Received					
	Street Address			1				
2	Ску	State	ZIP	1				
	Occupation	Employer		1				
1	Name		Date In-Kind Contribution Received					
	Street Address							
3	Ску	State	ZIP	1				
	Occupation	Employer						
	Name		Date In-Kind Contribution Received					
	Street Address							
4	City	State	ZIP					
	Occupation	Employer						
1	Name		Date In-Kind Contribution Received					
	Street Address			1				
5	City	State	ZIP	1				
	Occupation	Employer		4				

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

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IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):\*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$100 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

<sup>\*</sup>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)

	/				i i	1 - 1		
_		Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	\
	Committee	a Name					,	
	Street Add	tress						
1	City		State	ZIP				
1	Committee	a ID Number	Date In-Kind Contribution	Received				
r	Committee	e Name	L					
	Street Add	tress						
2	Cary		State	ZIP				
	Committee	e ID Number	Received					
	Committee	e Name						
	Street Add	ires						
	RECERTOR							
3	City		State	ZIP				
	Committee	e ID Number	Date In-Kind Contribution	Received	4 0			
	Committee	e Name						
	Street Add	tress						
4	City		State	ZIP				
	Committee	e ID Number	Date In-Kind Contribution	Received				
	Committee	e Name		7.				
	Street Add	riress						
5	City		State	ZIP				
	Committee	e ID Number	Date In-Kind Contribution	Received				
Ĺ	Enter t	otal only if last page of schedule r the total received this period to "Sumr	mary of Receipts," l	ine 5(d))	ı			,
/			Sche	24 69 edule A(5)(c), page of	) —		/	/

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

/	Candidate	Committee Contributor	Information	Amount Received	Cumulative Amount this	Cumulative Amount this	
	Committee Name				Reporting Period	Election Cycle	
	Street Address	Street Address					
1	City	State State					
	Committee ID Number	Date In-Kind Contri	bution Received				
	Committee Name						
	Street Address						
2	City	State	ZIP				
	Committee ID Number	Date In-Kind Cont	ribution Received				
	Committee Name						
	Street Address						
3	City	State	ZIP				
	Committee ID Number Date In-Kind Contribution Received						
	Committee Name						
	Street Address						
4	City	State	ZIP				
	Committee ID Number	Date In-Kind Contr	ibution Received				
	Committee Name	Committee Name					
	Street Address						
5	City	State	ZIP				
	Committee ID Number	Date In-Kind Contr	Ibution Received				

Schedule A(5)(d), page 25 of 69

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

SCHEDULE A(5)(e)

•	Political Action (	Committee Contributo	r Information	Amount Received	Cumulative Amount this	Cumulative Amount this
1	Committee Name			Reporting Period	Election Cycle	
	Street Address					
	CU VIII. ACLI 1998					
1	Chy	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Received			
	Committee Nume					
	Street Autoresa					
2	City City	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name					
•	Street Address					
3	ON:	State	ZIP			
	Committee ID Number	Date in-Kind Contril				
	Committee Name					
	Street Address					i
4	Cay	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			
	Committee Name				-	
5	Street Address		1			
J	Сву	State	ZIP			
	Committee ID Number	Date In-Kind Contri	bution Received			

Schedule A(5)(e), page 26 of 69

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

/						
	Political Party Co	ntributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name				у поролину у опос	
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	Cay	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
3	Coty .	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
+	Committee Name					
	Street Address					
5	City	Stele	ZIP			
	Committee ID Number	Date In-Kind Contribution				

Schedule A(5)(f), page 27 of 69



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersh	nip Contributor Info	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount thin Election Cyc
	Partnership Name	40				
	Street Address					
ı	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	stribution Received			
	Partnership Name					
	Street Address					
2	Cay .	State	ZIP			
	Corporation Commission File Number					
1	Partnership Name	4			=	
	Street Address					
3	CRY	State	ZIP			
	Corporation Commission File Number	Date In-Kind Co	ntribution Received			
	Partnership Name		=			
	Street Address	Street Address				
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	stribution Received			
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	Iribution Received			

Schedule A(5)(g), page 28 of 69

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation / LLC	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	ску	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received		:	
	Corporation/LLC Name	-				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received	-		
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Corporation/LLC Name					
	Street Address	_	1			
5	City	State	ZIP	_		
		F				
	Corporation Commission File Number  Enter total only if last page of schedule (transfer the total received this period to "Su	Date In-Kind Contribution				

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organ	ization Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	ску	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
	Labor Organization Name					
	Street Address					
2	Cay	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cor	tribution Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP	y		
	Corporation Commission File Number	Date In-Kind Cor	tribution Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Received			

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

SCHEDULE A(5)(j)

et Address  It or Property Contributed  et Address	State	Date In-Kind Contribution Received			
t or Property Contributed	State	ZIP			
•	State	ZIP			
•					
•					
et Address		Date In-Kind Contribution Received			
	State	ZIP	-		
at or Property Contributed			- 1		
•		Date In-Kind Contribution Received			
Address			1		
n Address					
	State	ZIP			
t or Property Contributed		1			
•		Date In-Kind Contribution Received			
at Address			1		
	State	ZIP	-		
Asset or Property Contributed			- 1		
		Date In-Kind Contribution Received			
			1 1		
I Address	]				
	State	ZIP			
t or Property Contributed			1		
e et	Address  or Property Contributed  Address  Address	Address  State  Or Property Contributed  Address  State  State  State	Address  State ZIP  Or Property Contributed  Date In-Kind Contribution Received  Address  State ZIP  Date In-Kind Contribution Received  Address  State ZIP  Or Property Contributed  Date In-Kind Contribution Received	Address  State ZIP  Or Properly Contributed  Date In-Kind Contribution Received  Address  State ZIP  Date In-Kind Contribution Received  Address  State ZIP  State ZIP  Date In-Kind Contribution Received  Date In-Kind Contribution Received	Date In-Kind Contribution Received    State   ZIP



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

SCHEDULE A(6)

	Source	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Donation Received				
	Street Address					
1	Cay	State	ZIP	1		
	Type of Item Donated	1	N 1 P			
	Name		Date In-Kind Donation Received			
100	Street Actionss			-		
2	City	State	ZIP	-		
	Type of Item Donated			-		
	Name	Date In-Kind Donation Received				
	Street Address	L	1			
3	Cay	State	ZIP	-		
	Type of Item Donated			1		
+	Name		Date In-Kind Donation Received			
	Street Address			1		
4	City	State	ZIP	- 1		
	Type of Item Donated			_		
	Name		Date In-Kind Donation Received			
			Date in-Kind Donation Received			
	Street Address	,				
	City	State	ZIP	]		
	Type of Item Donated					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 6)			



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

_	Creditor Info	mation	Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address				
1	City	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit			
	Name				
	Street Address			œ.	
2	City State	ZIP			
200	Services or Goods Provided on Credit	Date of Extension of Credit			
	Name				
	Street Address				
3	City State	ZIP			
	Services or Goods Provided on Credit				
	Name				
	Street Address				
4	City State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit			
	Name				
5	Stroet Address				
2	City	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit			

Schedule A(7)(a), page 33 of 69

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

/	Creditor	Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Γ	Name				,	
	Street Address					
1	City	State	ZIP			
	Continue Control Original Production					
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
Г	Name					
	Street Address					
2	City	State	ZIP			
			a.			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
Г	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
Г	Name		i a			
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
5		Lie tes	I			
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
H	Enter total only if last page of schedule (transfer the total received this period to "Sum		L			
	(transfer the total received this period to "Sum	mary of Recelpts," I	ine 7(b))			

Schedule A(7)(b), page 34 of 69

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payor Committee Information			i	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (If applicable)	Type of Shared Expens	e (if applicable)			
_	Committee Name		Payment Date			
	Street Address					
2	Сту	State	ZIP			
	Date of Joint Fundraising Event (Fapplicable)	Type of Shared Expens	e (if applicable)			
	Committee Name		Payment Date			
	Street Address		_			
3	Ску	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)		0.1	
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	e (if applicable)			
	Committee Name		Payment Date			
	Street Address	-				
5	City	State	ZIP		k)	
1	Date of Joint Fundralsing Event (if applicable)	Type of Shared Expense	(if applicable)	_		

Schedule A(8), page\_35\_ of\_69

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

_	Payor		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name					
	Street Address					
1	Ску	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2		L				
	Oky .	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	Oky	State	ZIP			
	Services or Goods Purchased		Payment Date			
_	Name					
	Street Address		_			
4						
~	Сау	State	ZIP			
	Services or Goods Purchased	Payment Date				
	Name	,				
	Street Address					
5	Cay	State	ZIP			
	Services or Goods Purchased	Payment Date				
	Enter total only if last page of schedule (transfer the total received this period to "Sun					

Schedule A(9), page\_\_\_ of \_\_\_

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	lr	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	1		
	Type of Account Receivable or Debt Owed	Date that Debt Accrued	-			
	Name		-			
	Street Address			-		
2	City	State	ZIP	1		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued		-	
-	Name		1 1			
	Street Address			-		
3	Ску	State	ZIP			
	Type of Account Receivable or Debt Owed Date that Debt Accrued			-		
	Name					
	Street Address		-			
4	Ску	State	ZIP	1		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-		
	Name					
	Street Address	-				
5	City	State	ZIP	-		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-		

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#### TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / 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)	2 11 1	

Schedule A(11), page \_\_\_\_ of \_\_\_



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Source I	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
-	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type	B	Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date	-		
	Name					
	Street Actiness					
3	Ску	State	ZIP	_		
	Receipt Type		Receipt Date			
	Name			-		
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
5	City	State	ZIP	_		
	Receipt Type		Receipt Date	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sum		   40\			
_	transfer the total received this period to "Sum	mary of Receipts,	line 12)			



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

_		ipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursament Dal	e	800		
	Marion Owens					
	Street Address					
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Startural Dum	nee2 (DACs and Dolltind Darling Oak)	☐ Cash ☐ Credit		
	Website		Non-Electronal Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Da	te	400		
	Phx Women's Conference	10/7/23				
	Street Address					
2	City	State ZIP				
				☑ Cash		
	Type of Operating Expense Paid	Non-Bectoral Purpose? (PACs and Political Parties Only)		□ Credit		
	Name Knuckle Sandwiches	10/27/23	le	132.87		
	Street Address	10/21/20				
_	1140 N. Higley Road, Suite 103					
3	City	State	ZIP			
	Mesa	AZ	85205	☑ Cash		
	Type of Operating Expense Paid Canvassing Event	Non-Sectoral Purp	Non-Bectoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date	le .	93.91		
	Knucle Sandwiches	11/18/23				
	Street Address 1140 N. Higley Road, Suite 103					
4	City	State	ZIP			
	Mesa	AZ	85205	G Cook		
	Type of Operating Expense Paid	Non-Electoral Purp	ose? (PACs and Political Parties Only)	☐ Cash ☐ Credit		
	Canvassing Event					
	Name	Disbursement Dat	0	123.40		
	Walmart	10/27/23		120.40		
	Street Address					
5	4505 E. McKellips Road					
-0	city Mesa	AZ	95205	☑ Cash		
	Type of Operating Expense Paid		pae? (PACs and Political Parties Only)	☐ Credit		
	Campaign Materials	Non-Electoral Purpose? (PACs and Political Parties Only)				

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



# MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

_	Candidate Committee	e Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
1	Street Address					
•	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name					
2	Street Address					
•	Сау	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			□ Credit		
	Committee Name					
	Street Address					
3	ΟN	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
5	Street Address					
	City	State	ZIP	□ Cash		
1	Committee ID Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sun	nmary of Disbursen	nents," line 2(a))			
			edule B(2)(a), page	41 69		

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Commi	ttee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative ` Amount this Election Cycle
	Committee Name					
ŀ	Street Address					
	City	State	ZIP	□ Cash		
Ì	Committee ID Number Date Contribution Made			□ Credit		
l	Committee Name	V II			-	
ŀ	Street Address					
ŀ	City State ZIP		ZIP			
ŀ	Committee ID Number Date Contribution Made			□ Cash □ Credit		
1	Committee Name		<u> </u>			
	Street Address					
ŀ	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
1	Committee Name					=
	Street Address			1		
ŀ	City	State	ZIP	□ Coch		
ŀ	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
ł	Committee Name					
ŀ	Street Address					
1	City	State	ZIP	□ Cash		
1	Committee ID Number	Committee ID Number Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursen	nents," line 2(b))			

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

				Amount	Cumulative	Cumulative
	Political Party Re	ecipient Informati	on	Contributed	Amount this Reporting Period	Amount this Election Cycle
	Committee Name					
0.000	Street Address		1			
1	State		ZIP	1		
1				□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
2000	Street Address					
2	City State Z		ZIP	1.		
		State	Zi-	☐ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name					
	Street Address			+		
3						
J	Oty .	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	<b>L</b>	☐ Credit		
_	Committee Name	<u> </u>				
	Street Address					
2	Sures: Augress					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
-	Committee Name					
			·			
	Street Address					
5	City	State	ZIP			
1	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sun	nmary of Disbursen	nents," line 2(c))			
		0-1-	edule B(2)(c), page_43_ o	. 69		



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnership R	ecipient Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
Ì	Street Address					
l	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
1	Partnership Name					
ŀ	Street Address					
ŀ	City State 2		ZIP			
Ì	Corporation Commission File Number Date Contribution Made			☐ Cash☐ Credit		
ł	Partnership Name					
	Street Address					
l	Сву	State	ZIP	□ Cash		
Ì	Corporation Commission File Number	Date Contribution Made		□ Credit		
l	Partnership Name	Partnership Name				
ŀ	Street Address					
Ì	City	State	ZIP	□ Cash		
İ	Corporation Commission File Number	Date Contribution Made		☐ Credit		
t	Partnership Name					
ŀ	Street Address					
Ì	City	ty State ZIP		□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
ŀ	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 2(d))					

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

/				l	Cumulative	Cumulative
	Corporation / LLC	Recipient Informa	ation	Amount Contributed	Amount this Reporting Period	Amount this
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		☐ Cash ☐ Credit		
	Corporation/LLC Name					
	Street Address				•:	
2	City	ZIP				
	Corporation Commission File Number	☐ Cash☐ Credit				
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Corporation/LLC Name		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
	Street Address			1		
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursen	nents," line 2(e))			
\		90	45 hedule B(2)(e), page	69 of		/



COMMITTEE ID NUMBER
Can2024-06

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

′	Labor Organizati	on Recipient Infon	mation	Amount Contributor	Cumulative Amount this	Cumulative Amount this
	Labor Organization Name				Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	!	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number Date Contribution Made		□ Cash □ Credit			
	Labor Organization Name					
İ	Street Address					
1	City	State	ZIP			
1	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
t	Labor Organization Name					
I	Streel Address					
1	City	State	ZIP			
1	Corporation Commission File Number Date Contribution Made		□ Cash □ Credit			
E	Enter total only if last page of schedule transfer the total disbursed this period to "Su	mmary of Disbursen	nents." line 2(f))			
		energian Branco Electronia di	owned word with			

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address					
1	City	State	ZIP		ú	
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address			1		
2	City	State	ZIP			
	Committee ID Number	Date of Original Contribution	-			
100	Committee Name	Date Refund Received				
	Street Address			-		
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	-		

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LOANS MADE: SCHEDULE B(3)(a)

	Воггоме	r Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
1	Borrower Name					
	Street Address					
2	City	State	ZIP			
	Guaranton/Endorser Name Date Loan Made					
	Borrower Name	1				
	Street Address					
3	ску	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	1			
	Borrower Name	1				
	Street Address					
4	Сту	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
200	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	L			

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



LOAN GUARANTEES MADE: SCHEDULE B(3)(b)

/	Guara	ntor Information		Amount Guaranteed	Cumulative Amount this	Cumulative Amount this
_	10000000	Guarantor Name				Election Cycle
		NAME OF THE PROPERTY OF THE PR				
	Street Address					
1	1 City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name	Guarantor Name				
	Street Address					
2	2 City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name	Guarantor Name				
	Street Address					
3	3 cay	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address	Street Address				
4	4 City	State	ZIP			
	Borrower Name	Date Loan Guaranteed			i.	
	Guarantor Name	Guarantor Name				
	Street Address					
5	5 City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedu (transfer the total received this period to "S	e ummary of Receipts " I	line 3(b))			
	transfer the total received this period to "S	e ummary of Receipts," I	line 3(b))			

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/		Sorrower Information	1	Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cycl
0.00	Borrower Name		Date Forgiveness Made		The state of the s	
	Street Address					
1	City	State	ZIP			
Section of the second	Original Amount of Loan	Amount Still Out	standing			
	Borrower Name		Date Forgiveness Made			
	Street Activess					
2	City	State	ZIP			
	Original Amount of Loan Amount Still Outstan		standing			
	Sonowor Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	ignal Amount of Loan Amount Still Outsi		standing			
	Borrower Name		Date Forgiveness Made		=	
	Street Activess					
	City	State	ZIP			
	Original Amount of Loan	Amount Sta Outs	standing			
1	Borrower Name		Date Forgiveness Made	1		
	Street Address					
ŀ	City	State	ZIP			
ŀ	Original Amount of Loan Amount Still Outstanding		tanding			
ł	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 3(c))					

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REPAYMENT ON LOANS RECEIVED: SCHEDULE B(3)(d)

_	Lend	er Information	2	Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	nding			
	Lender Name		Date Repayment Made			
	Street Address					
2	City	State	ZIP			
317.0	Original Amount Somowed	Amount Still Outsta	nding		w	
1	Lender Name		Date Repayment Made			
l	Street Address			_		
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	inding			
1	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	nding		_	
1	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstan	nding			
1	Enter total only if last page of schedu (transfer the total disbursed this period to "	le				

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

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

,						
/	Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Le	Lender Name		Date Interest Accrued			
St	treet Address					
1 0	ity	State	ZIP			
O	original Amount Borrowed	Amount Still Outstanding				
Le	ender Name		Date Interest Accrued			
St	Street Address			1		
2 0	av .	State	ZIP			
0	Original Amount Borrowed Amount Still Outstan					
L	ender Name		Date Interest Accrued			
S	treet Address					
3 0	ay .	State	ZIP	1		
0	kiginal Amount Borrowed	Amount Still Outstanding				
u	ender Name		Date Interest Accrued			
St	Street Address					
4 a	жу	State	ZIP			
o	original Amount Borrowed	Amount Still Outstanding				
Le	Lender Name		Date Interest Accrued			
SI	Street Address					
5 0	iny	State	ZIP			
0	Original Amount Borrowed Amount Still Outstand					
E (tr	inter total only if last page of schedule ransfer the total disbursed this period to "Sun	nmary of Disbursen	nents," line 3(e))			

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

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name of Original Payor		Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (Fapplicable)	Original Payment Amount	Date of Original Payment			
Name of Original Payor		Date Rebate/Refund Made	-		
Street Address					
City	State	ZIP			
Corporation Commission File Number (Fapplicable)	Original Payment Amount	Date of Original Payment	-		
Name of Original Payor		Date Rebate/Refund Made			
Street Address	Street Address				
City	Starte	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
Name of Original Payor		Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
Name of Original Payor		Date Rebate/Refund Made			
Street Address					
City	State	ZIP	-		
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	_		
	Name of Original Payor  Street Address  City  Corporation Commission File Number (if applicable)  Name of Original Payor  Street Address  City  Corporation Commission File Number (if applicable)  Name of Original Payor  Street Address  City  Corporation Commission File Number (if applicable)  Name of Original Payor  Street Address  City  Street Address  City	Street Address  City State  Corporation Commission File Number (if applicable) Original Payment Amount  Name of Original Payor  Street Address  City State  Corporation Commission File Number (if applicable) Original Payment Amount  Name of Original Payor  Street Address  City State  Corporation Commission File Number (if applicable) Original Payment Amount  Name of Original Payor  Street Address  City State  Corporation Commission File Number (if applicable) Original Payment Amount  Name of Original Payor  Street Address  City State  Corporation Commission File Number (if applicable) Original Payment Amount  Name of Original Payor	Name of Original Payor  State  City  State  ZIP  Corporation Commission File Number (if applicable)  Original Payment Amount  Date of Original Payment  Name of Original Payor  Date Rebate/Refund Made  Street Address  City  State  ZIP  Corporation Commission File Number (if applicable)  Original Payment Amount  Date of Original Payment  Name of Original Payor  Date Rebate/Refund Made  Street Address  City  State  ZIP  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  ZIP  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address  City  State  ZIP  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address  City  Date Rebate/Refund Made	Name of Original Payor  Date Rebatis/Refund Made  Street Address  City  State  Corporation Commission File Number (Fapolicable)  Original Payment Amount  Date of Original Payor  Date Rebatis/Refund Made  Street Address  City  State  Zip  Corporation Commission File Number (Fapolicable)  Original Payment Amount  Date of Original Payment  Date of Original Payment  Date of Original Payment  Date of Original Payment  Date Rebatis/Refund Made  Street Address  City  State  Zip  Corporation Commission File Number (Fapolicable)  Original Payment Amount  Name of Original Payor  Date Rebatis/Refund Made  Street Address  City  State  Zip  Corporation Commission File Number (Fapolicable)  Original Payment Amount  Name of Original Payor  Date Rebatis/Refund Made  Street Address  City  Date Rebatis/Refund Made   Recipient Information	

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

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Comm	ittee Recipient	Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
	Street Address					
2	City State ZIP					
	Committee ID Number	Date In-Kind Co	ntribution Made			
	Committee Name					
	Street Address					
3	Chy	State	ZIP			
	Committee ID Number	Date In-Kind Cor	ntribution Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
1	Committee ID Number	Date In-Kind Cor	stribution Made			
1	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number Date In-Kind Contribution Made					
+	Enter total only if last page of schedu (transfer the total disbursed this period to *	 le				

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

Political Ac	tion Committee Recipier	nt Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City State ZIP		3			
Committee ID Number Date In-Kind Contribution Made					
Committee Name			1 1		
Street Address	Dell I				
State ZIP					
Committee ID Number Date In-Kind Contribution Made		-			
Committee Name					
Street Address	=				
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution Made				
Committee Name			3		
Street Address					
Cay	State	ZIP			
Committee ID Number	Date In-Kind Con	Date In-Kind Contribution Made			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Con	tribution Made			
	City  Committee ID Number  Committee Name  Street Address  City  Committee Name  Committee Name  Committee ID Number   Street Address  City  State  Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Con  Committee ID Number  Date In-Kind Con  Street Address  City  State  Committee ID Number  Date In-Kind Con  Date In-Kind Con  Date In-Kind Con  Date In-Kind Con  Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Con  Committee Name  Street Address  City  State  Committee ID Number  Date In-Kind Con  State  Committee ID Number	Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made  Committee ID Number  Committee Name  Street Address  City  State  ZIP  Committee Name  Street Address  City  State  ZIP  Committee Name  Street Address  Date In-Kind Contribution Made  Committee Name  Street Address  Date In-Kind Contribution Made	Street Address  City  State  Date In-Kind Contribution Made  Committee Name  Street Address  City  State  ZIP  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made  Committee Name  Street Address  City  State  ZIP  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made  Committee Name  Street Address  City  State  ZIP  Date In-Kind Contribution Made  Committee ID Number  Date In-Kind Contribution Made	Committee 1D Number  Committee	

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

		Recipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name					
	Street Address	Street Address				
1	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address			1		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made	-		
	Committee Name					
	Street Address					
3		City State ZIP				
	Committee ID Number	Date In-Kind Contribution	n Made			
	Consmittee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address			1		
5	City	State	ZIP	1		
	Committee ID Number	Date In-Kind Contribution	Made	-		
_	Enter total only if last page of schedul (transfer the total disbursed this period to "5					

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IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/				1	Cumulative	Cumulative
	Partners	hip Recipient Inform	Amount Contributed	Amount this Reporting Period	Amount this	
	Partnership Name					
	Street Address					
1	City	State	ZIP			
1000	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Partnership Name					
	Street Address					
2	Спу	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	bution Made			
	Partnership Name					
	Street Address					
3	Ĉ\$	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Partnership Name					
	Street Address	Street Address				
4	Cey	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
	Parinership Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
			1	I .		

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation / L	LC Recipient Inform	ation	Amount	Cumulative Amount this	Cumulative Amount this
	Corporation/LLC Name	Contributed	Reporting Period	Election Cycle		
	Street Address					0
1						
•	Cay	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made	1		
	Corporation/LLC Name					
	Street Address			-		
2	City State ZIP		-			
	Corporation Commission File Number					
	Corporation/LLC Name					
	Street Address			1		
3	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution Made				
	Corporation/LLC Name					
	Street Address	*				
4		la.	In			
	Cay	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Date In-Kind Contribution Made			
	Corporation/LLC Name					
	Street Address					
5	City	State ZIP		1		
	Corporation Commission File Number	n File Number Date In-Kind Contribution Made				
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 5(e))					



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organ	nization Recipient Ir	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name Street Address				, and a	
1	City	State	ZIP			
32	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Lator Organization Name					
	Street Address					
2	City State ZIP					
	Corporation Commission File Number Date In-Kind Contribution Made					
	Labor Organization Name					
	Street Address	Street Address				
3	Ony	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Labor Organization Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
100	Corporation Commission File Number	Corporation Commission File Number Date In-Kind Contribution Made				
	Enter total only if last page of sch (transfer the total disbursed this period	edule d to "Summary of Disb	oursements," line 5(f))			



INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

	Expenditure	Recipient Informa	ation	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient Name		Mode of Advertising (TV, mail, etc)				
	Street Address		1			
	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)  Candidate(s) Opposed		noluting % apposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
Ì	Street Address		<u> </u>	1		
I	City	State	ZIP	]		
	Candidate(s) Supported (including % supported)  Candidate(s) Opposed (in		including % opposed)	☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		oreak		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
l	Street Address		-	1		
Ì	Cty	State	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (ii	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			1		
	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)  Candidate(s) Opposed (including % supported)		ncluding % opposed)	□ Cash		
-	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
E (	Enter total only if last page of schedul transfer the total disbursed this period to "S	e Summary of Disburs	sements," line 6)			



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	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			
	Balict Measure(s) Supported (Including % supported)	Ballot Measure(s) Opposi	ed (including % apposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Stoadcast	Dection Month Year		□ Credit		
1	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	-		
	Saliot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppos	ed (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
1	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
3	City	State	ZIP	1		
I	Balkot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppose	ed (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
1	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
-	Street Address					
-	City	State	ZIP	-		
L	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppose	ed (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
1	Enter total only if last page of schedule transfer the total disbursed this period to "S	B	omente * line 7\			



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			-		
1	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reco	alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Stradoust	Office Held		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	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		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address					
3	Cay	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reco	alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		<u> </u>			
4	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Reco	alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
1	Enter total only if last page of schedule (transfer the total disbursed this period to "S					

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SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Ber	nefitted Candida	te	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Candidate Name		Date Benefit Provided			
1	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
-	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
Ī	Type of Benefit Provided					
-	Notes:		*			
1	Candidate Name		Date Benefit Provided			
	Street Address			=-		
ŀ	City	State	ZIP			
ŀ	Type of Benefit Provided					
-	Notes:					
	Candidate Name		Date Benefit Provided			
-	Street Address					
	City	State	ZIP			
L	Type of Benefit Provided					
-	Notes:					
1	Enter total only if last page of sche (transfer the total disbursed this period	dule to "Summary of Di	sbursements," line 9)	l		

#### JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

undraising Event (Fapplicable)  series  Grodnessing Event (Fapplicable)	State Type of Shared Ex	Payment Date  ZIP  upense (if applicable)  Payment Date	□ Cash □ Credit		
fundraising Event (if applicable) area	Type of Shared Ex	opense (if applicable)			
ane S	Type of Shared Ex	opense (if applicable)			
ane S					
3	State	Payment Date			
	State		1		
Undrassing Event (Fapplicable)	State				
unchasing Event (Fapplicable)		ZIP			
	Type of Shared Ex	xpense (if applicable)	□ Cash □ Credit		
ane		Payment Date			
Street Address					
	State	ZIP	□ Cash		
Fundraising Event (f applicable)	Type of Shared Ex	xpense (if applicable)	□ Credit		
ane .		Payment Date			
s					
	State	ZIP	□ Cash		
undraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)	□ Credit		
urne		Payment Date			
Street Address					
	State	ZIP			
	Type of Shared Ex	:pense (if applicable)	□ Cash □ Credit		
undraising Event (if applicable)		N.P.			
	ndraising Event (if applicable)	ndraising Event (if applicable)  Type of Shared Ex		☐ Cash Indraising Event (if applicable)  Type of Shared Expense (if applicable)  □ Credit	☐ Cash ☐ Credit



REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipien	t Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	Сту	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					-
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed	1	Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Reimbursed	L	Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Enter total only if last page of schodule					
	Enter total only if last page of schedule (transfer the total disbursed this period to *Su	mmary of Disburse	ments," line 11)			

### OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

_	165,	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued	_		
+	Name					
	Street Address					
2	City	State	ZIP	1 < 1		
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
1	Name					
	Street Address					
,	City	State	ZIP	4		
	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	_		
1						
ļ	Name					
	Street Address	State	ZIP	_		
	City  Type of Account Payable or Debt Owed	Ciell	Date that Debt Accrued			
4	200					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 12)			



# 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		
Recipient of Surplus Monies / Source of Transfermed Decc		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 13)		

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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

_		Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Staples			433.72	Y	
1	Street Address 4535 E. McKellips Road					
1	city Mesa	AZ	ZIP 85215	☑ Cash		
	Disbursement Type Payment for services		Disbursement Date	□ Credit		
	Name					
Street Address			-			
2	City		ZIP	□ Coch		
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type	l	Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
1	Namo		1.			
	Street Address		1			
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbur	sements," line 14)			



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)		-

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