

Committee Name:

STATE OF ARIZONA COMMITTEE CAMPAIGN

FINANCE REPORT

COMMITTEE INFORMATION (required):

Committee Information:

RECEIVED

By Lisa Anderson at 3:38 pm, Jan 22, 2024

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

Office Sought.	County Office:	□ Special District Office:
	City/Town Office:	School Board District:

Cumulative Report:

Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.
Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below): ______

REPORTING PERIOD (check one):

	REPORTING PERIOD	REPORT DUE
	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	3(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>i.e.</i> ending balance from the previous reporting period)		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)		
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)		
(d) = Balance at close of reporting period		
Check here if filing <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must a following page need to be filed.	be completed, but only this c	cover page and the

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity. Arizona Secretary of State Revision 9/28/23; League Update 11/15/23 (fillable format)



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

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

Printed Name of Committee Treasurer

Signature of Committee Treasurer

Date



SUMMARY OF RECEIPTS (Schedule A):

/	Pagainta	Cash	Equity
	Receipts	Casil	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committees		
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Monies (Candidate Committees Only)		
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		
	(I) Refunds Given Back to Contributors		
	(m) Net Monetary Contributions (subtract 1(l) from 1(k))		
2.	Loans		
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
3.	Rebates and Refunds Received		
4.	Interest Accrued on Committee Monies		
5.	In-Kind Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committees		
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
	Outstanding Accounts Receivable / Debts Owed to Committee		
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
	Miscellaneous Receipts (use cash and/or equity as applicable)		
	Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)		



SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses		
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3.	Loans		
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
ŀ.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Contributions Subtotal (add 5(a) through 5(f))		
б.	Independent Expenditures Made		
7 .	Ballot Measure Expenditures Made		
3.	Recall Expenditures Made		
).	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
1.	Reimbursements Made		
2.	Outstanding Accounts Payable / Debts Owed by Committee		
3.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
4.	Miscellaneous Disbursements		
15.	Aggregate of Disbursements - \$250 or Less		
16	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)		



/	Inc	lividual Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address			_		
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP	_		
	Gity	State	20			
	Occupation	Employer				
	Name	I	Date Contribution Received			
	Street Address			_		
3	City	State	ZIP	_		
	Oky .	out	211			
	Occupation	Employer				
	Name	I	Date Contribution Received			
	Street Address					
4	City	State	ZIP	_		
	Occupation	Employer				
	Name	L L	Date Contribution Received			
	Street Address	Street Address				
5	City	State	ZIP	-		
				_		
	Occupation	Employer				
	Enter total only if last page ((transfer the total received this p	of schedule period to "Summary of Receip	ots," line 1(a))			



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.

Schedule A(1)(b), page____ of ____



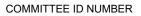


MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

		dividual Contributor Inforn	1	Amount Received	Amount this Reporting Period	Amount this Election Cycl
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			_		
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page (transfer the total received this	of schedule				

Schedule A(1)(c), page_____ of _____



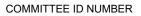


SCHEDULE A(1)(d)

MONETARY	CONTRIBUTIONS	FROM CANDIDATE	COMMITTEES
MONETARY	CONTRIBUTIONS	FROM CANDIDATE	COMMITTEES

/	Candidate C	ommittee Contributor I	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution R	eceived			
	Committee Name					
	Street Address					
5	City	State	ZIP			
		Date Contribution R				

Schedule A(1)(d), page ____ of ____





MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/	1	on Committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Red	zeived			
	Committee Name					
	Street Address					
2	City	State	ZIP			
		Date Contribution Re				
	Committee ID Number					
	Committee Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			

Schedule A(1)(e), page____ of ____



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

	Politica	al Party Contributor Inforr	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Re	eceived			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number Date Contribution Received					
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Re	aceived			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Re	eceived			
		schedule riod to "Summary of Receipt				



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

Partnership Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Received			
	Partnership Name					
	Street Address					
3	City	State ZIP				
	Corporation Commission File Number Date Contribution Received					
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	orporation Commission File Number Date Contribution Received					
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Enter total only if last page of scl (transfer the total received this period	nedule		I		



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	/						
/		Corporation / LLC C	ontributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name						
		Street Address					
1		City	ity State ZIP				
		Corporation Commission File Number	Date Contribution Receive	d			
		Corporation/LLC Name					
		Street Address			-		
2	2	City	State	ZIP	-		
	-	Corporation Commission File Number	Date Contribution Received				
		Corporation/LLC Name					
	-	Street Address			-		
3	3	City	State	ZIP	-		
		Corporation Commission File Number	Date Contribution Receive	ed	-		
		Corporation/LLC Name					
		Street Address			-		
4	1	City	State	ZIP	-		
		Corporation Commission File Number	Date Contribution Receive	ed	-		
	Corporation/LLC Name						
	-	Street Address			-		
5	5	City	State	ZIP	-		
		Corporation Commission File Number	Date Contribution Receive	ed	-		
		Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts," I	ine 1(h))	1		
<u> </u>						· I	/

COMMITTEE ID NUMBER



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organiz	zation Contributor Inf	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Re	ceived			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Re	ceived			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Re	ceived			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Re	ceived			
	Enter total only if last page of sch (transfer the total received this period t	edule to "Summary of Receipts	s," line 1(i))			



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

		Candidate Information	I	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cyc
	Name		Date Contribution Received			
	Street Address					l
1	City	State	ZIP			l
	Occupation	Employer				l
	Name		Date Contribution Received			
	Street Address					l
2	City	State	ZIP			l
	Occupation	Employer				l
	Name		Date Contribution Received			
3	Street Address					l
	City	State	ZIP			l
	Occupation	Employer				l
	Name		Date Contribution Received			
	Street Address		I			1
4	City	State	ZIP			l
	Occupation	Employer	I			l
	Name		Date Contribution Received			
	Street Address		I	—		l
5	City	State	ZIP	—		l
	Occupation	Employer	I			l
	Enter total only if last page (transfer the total received this	e of schedule				

Schedule A(1)(j), page____ of ____



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

/	Contributor Information		n	Amount Refunded	Cumulative Amount this	Cumulative Amount th
	Name		Date Contribution Refunded		Reporting Period	Election Cyc
-	Street Address					
	City	State	ZIP			
-	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
-	Street Address					
-	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
-	Street Address					
;	City	State	ZIP			
-	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
ŀ	City State		ZIP			
	ID Number (if applicable)		Date of Original Contribution			
Ī	Name		Date Contribution Refunded			
	Street Address					
;	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
1	Enter total only if last page of s	chedule od to "Summary of Rece	I	I		

Schedule A(1)(I), page____ of____



LOANS RECEIVED:

Lander Name Date Loan Received Street Address ZP GuarantoxEndorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Z City Street Address ZP GuarantoxEndorser Name Date Loan Received Street Address ZP GuarantoxEndorser Name Date Loan Received Street Address ZP GuarantoxEndorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lander Name Date Loan Received Street Address ZP GuarantoxEndorser Name Non-Electoral Purpose? (PACs and Political Parties Only) City State ZiP CuarantoxEndorser Name Non-Electoral Purpose? (PACs and Political Parties Only) City State ZiP CuarantoxEndorser Name Non-Electoral Purpose? (PACs and Political Parties Only) City State GuarantoxEndorser Name Non-Electoral Purpose? (PACs and Political Parties Only) City State ZiP GuarantoxEndorser Name City State ZiP City GuarantoxEndorser Name Non-Electoral Purpose? (PACs and Political Parties Only) City State ZiP City	/	Zender Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Image: City State ZP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Street Address ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Orky) Image: City State ZIP Guarantor/Endorser Name Date Loan Received Street Address Street Address ZIP ZIP Guarantor/Endorser Name Date Loan Received Street Address Street Ad		Lender Name	Date Loan Received				
Guarantox/Endorser Name Norr-Electoral Purpose? (PACs and Political Parties Only) Index Name Date Loan Received Street Address IP Guarantox/Endorser Name Norr-Electoral Purpose? (PACs and Political Parties Only) Image: Control of the street of the str		Street Address			-		
Image: Street Address Image: Street Address Image: Street Address Image: Street Address <t< td=""><td>1</td><td>City</td><td>State</td><td>ZIP</td><td>-</td><td></td><td></td></t<>	1	City	State	ZIP	-		
Lender Name Date Lean Received Street Address City Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Lean Received Street Address City Guarantor/Endorser Name Date Lean Received Street Address City Guarantor/Endorser Name Date Lean Received Street Address City Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Lean Received Street Address City Street Address City Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Lean Received Street Address City State ZiP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Guarantor/Endorser Name		PACs and Political Parties Only)			
2 City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Lender Name					
org State Lin Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) J Lender Name Date Loan Received J Street Address ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Quarantor/Endorser Name Date Loan Received J Street Address City Stale Quarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Quarantor/Endorser Name Date Loan Received J Street Address City Stale Quarantor/Endorser Name Date Loan Received J Street Address City Stale Quarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Quarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Street Address					
Image: series of the series	2	City	State	ZIP			
3 Street Address 3 City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Guarantor/Endorser Name		PACs and Political Parties Only)			
3 City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) 4 Lender Name 5 Street Address City State 2 City 6 Street Name 0 Date Loan Received City State 2 City Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) 0 Date Loan Received 5 City 5 City 6 City 5 City 6 City 5 City 5 City 6 City 5 City 6 City 5 City 6 City 5 City 6 City 6 City 6 City 7 State 7 City 6 City 7 State 7 City 8 City 8 City 8 City 8 City 8		Lender Name	Date Loan Received				
Size 2IP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Image: City State Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Image: City State Street Address City Guarantor/Endorser Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Street Address					
Image: series of the series	3	City	State	ZIP			
4 Street Address 6 Street Address 6 City State ZIP 6 Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) 0 0 Date Loan Received 5 Street Address Street Address 6 City State ZIP 6 City State ZIP 6 City State ZIP 6 City State ZIP 6 Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Guarantor/Endorser Name					
4 City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) □ □ k Lender Name b Date Loan Received Street Address Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Lender Name					
City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Street Address					
Image: series of the series	4	City	State	ZIP			
Lender Name Date Loan Received Street Address City State Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Guarantor/Endorser Name					
5 City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Lender Name					
Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only)		Street Address					
	5	City	State	ZIP	•		
		Guarantor/Endorser Name		PACs and Political Parties Only)	4		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 2(a))		Enter total only if last page of schedule		ine 2(a))	1		

Schedule A(2)(a), page____ of ____

SCHEDULE A(2)(a)



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	-		
1	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding	1			
	Lender Name	1	Date Forgiveness Received			
	Street Address		1			
2	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding	I	-		
	Lender Name	<u> </u>	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	1	Date Forgiveness Received			
	Street Address		1	-		
5	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		-		
	Enter total only if last page of schedule (transfer the total received this period to "Sun					

Schedule A(2)(b), page____ of ____



COMMITTEE ID NUMBER

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrowe	Borrower Information Amount Repair		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address			-		
2	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address			-		
3	City	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	_		
5	Street Address		1			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to "Sur			•		

Schedule A(2)(c), page____ of ____



INTEREST ACCRUED ON LOANS MADE:

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

SCHEDULE A(2)(d)

/	Borrowe	r 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 Outstanding		-		
	Borrower Name		Date Interest Accrued			
	Street Address			_		
2	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
_	Borrower Name		Date Interest Accrued			
	Street Address	Street Address		_		
3	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Interest Accrued			
			Date interest Accided	_		
4	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding					
	Borrower Name		Date Interest Accrued			
ĺ	Street Address			-		
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding	1	-		
	Enter total only if last page of schedule					

Schedule A(2)(d), page____ of ____



COMMITTEE ID NUMBER

STATE OF ARIZONA FRANCEREFORPAIGN

SCHEDULE A(3)

/		Payor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulati Amount tl Election C
	Payor Name		Date Rebate/Refund Received			
	Street Address		I			
1	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
2	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refur	ld/Rebate	_		
	Payor Name		Date Rebate/Refund Received			
	Street Address			_		
~	Sirect Address					
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	ld/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address			_		
4	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address			-		
5	City	State	ZIP	_		
	Original Purchase Amount	Reason for Refur	ud/Rebate	-		
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 3)					
	(transfer the total received this pe	eriod to "Summary of Rece				



SCHEDULE A(4)

INTEREST ACCRUED	ON COMMITTEE MONIES:

	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 (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)		

Schedule A(4), page____ of ____





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

SCHEDULE A(5)(a)

/	Individu	ual Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address			-		
1	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP			
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
3	City	State	ZIP	_		
	Occupation	Employer		_		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
4	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
5	City	State	ZIP	-		
	Occupation	Employer		-		

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

Schedule A(5), page____ of ____



COMMITTEE ID NUMBER

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))			

*If contributions of more than \$100 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

Schedule A(5)(b), page____ of ____

COMMITTEE ID NUMBER



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

IN-KIND CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS:

SCHEDULE A(5)(c)

/	Candidate Committe	e Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address			-		
2	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received	-		
	Committee Name					
	Street Address	-				
3	City	State	ZIP	_		
	Committee ID Number	Date In-Kind Contribution	Received	-		
	Committee Name					
				_		
1	Street Address	1	1			
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
5	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received	-		
_	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receipts," I	ine 5(d))			
			edule A(5)(c), page c			





IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

/	1	Committee Contributor In	formation	Amount Receive	Cumulative d Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	ion Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	tion Received			

Schedule A(5)(d), page____ of ____





IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/		nmittee Contributor Ir	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
-	Street Address					
1	City	State	ZIP	-		
Ī	Committee ID Number	Date In-Kind Contribution	n Received	-		
	Committee Name					
-	Street Address			-		
2	City	State	ZIP	_		
				_		
	Committee ID Number	Date In-Kind Contributio	n Received			
	Committee Name					
-	Street Address		-			
3	City	State	ZIP			
-	Committee ID Number	Date In-Kind Contributio	n Received			
	Committee Name					
ŀ	Street Address					
4	City	State	ZIP	-		
-	Committee ID Number	Date In-Kind Contributio	n Received	-		
	Committee Name					
	Street Address	-				
5	City	State	ZIP	4		
				4		
	Committee ID Number	Date In-Kind Contributio	n Received			
	Enter total only if last page of scheo (transfer the total received this period to	iule "Summary of Possints"				

Schedule A(5)(e), page____ of ____



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Politic	al Party Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name					
	Street Address					l
	City	State	ZIP			l
	Committee ID Number	Date In-Kind Contr	ibution Received			l
	Committee Name					
	Street Address					l
2	City	State	ZIP			l
	Committee ID Number	Date In-Kind Contr	ribution Received			l
	Committee Name					
	Street Address					1
3	City	State	ZIP			l
	Committee ID Number	Date In-Kind Contr	ribution Received			l
	Committee Name					
	Street Address					
4	City	State	ZIP			1
	Committee ID Number	Date In-Kind Contr	ribution Received			l
	Committee Name					
	Street Address					l
5	City	State	ZIP			l
	Committee ID Number	Date In-Kind Contr	ribution Received			l
	Enter total only if last page of (transfer the total received this pe	f schedule eriod to "Summary of Receij	pts," line 5(f))			



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnersl	nip Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Received			
-	Partnership Name	I				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Partnership Name	I				
Ş	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Partnership Name					
	Street Address					
ŀ	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
-	Partnership Name	I				
	Street Address					
5	City	State ZIP				
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Enter total only if last page of sch (transfer the total received this period	iedule		I		





IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	/						
/		Corporation / LLC C	contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Corporation/LLC Name					
	-	Street Address					
1	1	City	State	ZIP	•		
		Corporation Commission File Number	Date In-Kind Contribution I	Received			
		Corporation/LLC Name					
		Street Address					
2	2	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received	•		
		Corporation/LLC Name					
		Street Address					
3	3	City	State	ZIP	•		
		Corporation Commission File Number	Date In-Kind Contribution	Received			
		Corporation/LLC Name					
		Street Address					
4	4	City	State	ZIP	•		
		Corporation Commission File Number	Date In-Kind Contribution	Received	•		
		Corporation/LLC Name					
		Street Address	•				
5	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received			
		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(h))	I		
$\overline{\ }$							/

Arizona Secretary of State Revision 9/28/23



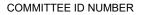
IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organ	ization Contributor I	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibution Received			
	Labor Organization Name	I				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Conti	ibution Received			
	Labor Organization Name					
3	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Conti	ibution Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Received			
	Enter total only if last page of sch (transfer the total received this period	nedule				

Arizona Secretary of State Revision 9/28/23

Schedule A(5)(i), page____ of ____





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

SCHEDULE A(5)(j)

	Candida	te Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP	-		
	Asset or Property Contributed			-		
	Name		Date In-Kind Contribution Received			
-	Street Address		-			
3	City	State	ZIP	-		
	Asset or Property Contributed			_		
	Name		Date In-Kind Contribution Received			
	Street Address			_		
4	City	State	ZIP	-		
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP	-		
		GIRIE	L 11	4		
	Asset or Property Contributed					
	Enter total only if last page of schedule (transfer the total received this period to "Su	e mmary of Receir	nts." line 5(i))			





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		i toporang i onou	
	Street Address	-				
1	City	State	ZIP			
	Type of Item Donated		•			
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
0	Street Address					
3	City	State	ZIP			
	Type of Item Donated					
	Name	Date In-Kind Donation Received	_			
4	Street Address					
4	City	State	ZIP			
	Type of Item Donated					
	Name	Date In-Kind Donation Received	_			
5	Street Address			_		
5	City	State	ZIP			
	Type of Item Donated					
	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receipts,"	line 6)			



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

/		or Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit				
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit	_		
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address			_		
5	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Enter total only if last page of schedu (transfer the total received this period to "S	e				
	(transfer the total received this period to "S	ummary of Receipt	s," line 7(a))			

Arizona Secretary of State Revision 9/28/23



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Credito	r Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit	Date of Original Extension of Credit				
	Name					
	Street Address		-			
2	City	State	ZIP	-		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	-		
	Name					
	Street Address	-				
3	City	State	ZIP	-		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	-		
	Name					
	Street Address	-				
4	City	State	ZIP	-		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	-		
	Name					
	Street Address			-		
5	City	State	ZIP	-		
	Services or Goods Originally Provided on Credit Date of Original Extension of Credi					
	Enter total only if last page of schedule (transfer the total received this period to "Su	mmary of Receipts "	line 7(b))			



SCHEDULE A(8)

	Payor Co	ommittee Informati	on	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address	I				
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (if applicable)			
	Committee Name	Payment Date				
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (if applicable)			
	Committee Name	 	Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (if applicable)			

Schedule A(8), page____ of ____



COMMITTEE ID NUMBER

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

, ,		Payor Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Enter total only if last page of (transfer the total received this pe	schedule				

Schedule A(9), page____ of ____





OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/		mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	many of Receipte " !	line 10)			
i	uransier the total received this period to Sumi	nary or receipts, 1				

Schedule A(10), page____ of ____

COMMITTEE ID NUMBER

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)		

Schedule A(11), page____ of ____



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

		e Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
ł	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name	Name				
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Su					

Schedule A(12), page____ of ____



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Rec	ipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Disbursement Date					
	Street Address			_		
1	City	State	ZIP			
				□ Cash □ Credit		
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address					
2			1			
2	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose	? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP	_		
	U.S.	outo	2	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address			_		
	Street Address					
4	City	State	ZIP	_		
				□ Cash		
	Type of Operating Expense Paid		? (PACs and Political Parties Only)	□ Credit		
	Name	Disbursement Date				
	Street Address	I				
5	City	State	ZIP	□ Cash		
				□ Credit		
	Type of Operating Expense Paid	Non-Electoral Purpose	? (PACs and Political Parties Only)			

Schedule B(1), page____ of ____





MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Γ	e Committee Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	1			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address	Address				
3	City	State	ZIP			
	Committee ID Number Date Contribution Made			□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Enter total only if last page of (transfer the total disbursed this p	schedule eriod to "Summary of Disburse	ments," line 2(a))			

Schedule B(2)(a), page____ of ____





MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

		ction Committee Recipient Ir	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made	3	□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			Credit		
2	Committee Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			Credit		
	Committee Name Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee ID Number Date Contribution Made					
	Street Address					
5	City					
	Committee ID Number	Date Contribution Made	9	□ Cash □ Credit		
	Enter total only if last page of					

Schedule B(2)(b), page____ of ____



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Politie	cal Party Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
•	Committee Name					
:	Street Address					
1	City	State	ZIP	□ Cash		
•	Committee ID Number Date Contribution Made					
1	Committee Name					
;	Street Address					
2	City	State	ZIP			
1	Committee ID Number	Date Contribution N	Made	□ Cash □ Credit		
,	Committee Name					
:	Street Address					
3	City	State	ZIP	□ Cash		
1	Committee ID Number	Date Contribution Made				
1	Committee Name					
;	Street Address					
•	City	State	ZIP	□ Cash		
(Committee ID Number	Date Contribution M	Made			
'	Committee Name	I				
;	Street Address					
5	City	State	ZIP	□ Cash		
1	Committee ID Number	Date Contribution M	Made			
╞	Enter total only if last page of transfer the total disbursed this p	f schedule	rsements " line $2(c)$	I		



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	ship Recipient Inforr	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Street Address			l		
1	City	State	ZIP	□ Cash		1
	Corporation Commission File Number	Date Contribution	Made	□ Credit		l
	Partnership Name					
	Street Address					l
2	City	State	ZIP			1
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit	□ Cash □ Credit	
	Partnership Name					
s	Street Address	Street Address				l
3	City	State	ZIP			l
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Partnership Name					
	Street Address					l
1	City	State	ZIP			l
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		l
	Partnership Name					
	Street Address					l
5	City	State	ZIP			l
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		l
-	Enter total only if last page of sch (transfer the total disbursed this perio	l nedule d to "Summony of Dish	wroemente " line 2(d))	I		





MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/ LLC Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			l
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	 □ Cash		1
	Corporation Commission File Number	Date Contribution	Date Contribution Made			
	Corporation/LLC Name					
	Street Address			l		
3	City	State	ZIP			l
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					1
4	City	State	ZIP			l
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			l
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		l
				1		



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orga	nization Recipient In	formation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	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	File Number Date Contribution Made		□ Cash □ Credit		
	Labor Organization Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Corporation Commission File Number	ssion File Number Date Contribution Made		□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
5	City	State ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Enter total only if last page of scl	nedule d to "Summary of Disb		I		

Schedule B(2)(f), page____ of ____



COMMITTEE ID NUMBER

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contributor Information			Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cycl
	Committee Name		Date Refund Received			
	Street Address		I			l
1	City	State	ZIP	_		l
	Committee ID Number		Date of Original Contribution	-		1
	Committee Name		Date Refund Received			
	Street Address			_		l
2	City	State	ZIP			l
	Committee ID Number		Date of Original Contribution			l
(Committee Name		Date Refund Received			
	Street Address					l
3	City	State	ZIP	_		l
	Committee ID Number		Date of Original Contribution	_		l
	Committee Name		Date Refund Received			
	Street Address	Street Address		_		l
1	City	State	ZIP	_		l
	Committee ID Number		Date of Original Contribution	_		l
	Committee Name	Committee Name				
	Street Address	Street Address				l
5	City	State	ZIP			l
	Committee ID Number	Committee ID Number				l
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburser					

Schedule B(2)(h), page____ of ____



SCHEDULE B(3)(a)

LOANS MADE:

/	Borrower	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				
	Borrower Name	L				
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name					
	Borrower Name					
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name Date Loan Made					
	Sorrower Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name Date Loan Made					
	Borrower Name					
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	1			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 3(a))	1		

Schedule B(3)(a), page____of



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

/		Guarantor Information		Amount	Cumulative	Cumulative
		Guaranteed	Amount this Reporting Period	Amount thi Election Cyc		
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guarani	reed			
	Guarantor Name					
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
	Guarantor Name					
	Street Address					
2			I			
0	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
	Guarantor Name	· · ·				
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
_	Guarantor Name					
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
	Enter total only if last page of (transfer the total received this pe					

Schedule B(3)(b), page____ of ____



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/	В	orrower Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
-	Street Address					
1	City	State	ZIP			
-	Original Amount of Loan	Amount Still Outstandi	ing			
	Borrower Name		Date Forgiveness Made			
	Street Address					
2	City	State	State ZIP			
	Original Amount of Loan Amount Still Outstanding		ing			
	Borrower Name		Date Forgiveness Made			
s	Street Address					
3	City	State	ZIP			
-	Original Amount of Loan	Amount Still Outstandi	ing			
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan Amount Still Outstanding		ing			
	Borrower Name	I	Date Forgiveness Made			
ŀ	Street Address	Street Address				
5	City	State	ZIP	-		
ŀ	Original Amount of Loan	Amount Still Outstandi	ing	_		
	Enter total only if last page of sc (transfer the total disbursed this peric					

Schedule B(3)(c), page____ of ____



REPAYMENT ON LOANS RECEIVED:

		Lender Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding			
	Lender Name		Date Repayment Made			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding		anding			
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding			
	Lender Name		Date Repayment Made			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding			
	Lender Name		Date Repayment Made			
	Street Address]			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding			
	Enter total only if last page of s (transfer the total disbursed this pe					

Schedule B(3)(d), page____ of ____

SCHEDULE B(3)(d)



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/	Lende	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount th Election Cyc
	Lender Name		Date Interest Accrued			
-	Street Address		-			
1	City	State	ZIP	-		
ŀ	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Interest Accrued			
-	Street Address			-		
2	City	State	ZIP	-		
-	Original Amount Borrowed	Amount Still Outstanding		-		
			1			
	Lender Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
ľ	Original Amount Borrowed	Amount Still Outstanding	1	-		
	Lender Name		Date Interest Accrued			
-	Street Address			-		
4	City	State	ZIP	-		
-	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Interest Accrued			
ļ	Street Address			-		
5	City	State	ZIP	-		
-	Original Amount Borrowed	Amount Still Outstanding		-		

Schedule B(3)(e), page____ of ____



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	Red	sipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
1	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					
2	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			_		
3	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					
4	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			-		
		State	ZIP			
5	City					

Schedule B(4), page____ of ____

COMMITTEE ID NUMBER



STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/		ommittee Recipient Info	ormation	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 Contributi	on Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	ion Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	ion Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	ion Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribut	ion Made			

Schedule B(5)(a), page____ of ____





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					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Made			
	Committee Name					
	Street Address					
2	City	State	State ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
s	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
	Street Address					
4						
т	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made			
_	Enter total only if last page o (transfer the total disbursed this	f schedule				

Schedule B(5)(b), page____ of ____



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Polit	ical Party Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name					
	Street Address					
1	City State ZIP					
	Committee ID Number	Date In-Kind Contribut	tion Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ition Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ution Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ition Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	lution Made			
	Enter total only if last page of (transfer the total disburged this	of schedule period to "Summary of Disburs	sements." line 5(c))	I		



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	hip Recipient Inforr	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Enter total only if last page of sch (transfer the total disbursed this perio	nedule				



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation /	LLC Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	ion Made			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	lion Made			
		dule to "Summary of Disburs				



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organ	nization Recipient Ir	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	iribution Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	ribution Made			
	Labor Organization Name					
	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			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
	Enter total only if last page of sch (transfer the total disbursed this perio	nedule				

Arizona Secretary of State Revision 9/28/23

Schedule B(5)(f), page____ of ____



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/	Expenditure	Recipient Informat	ion	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	_		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- □ Credit		
-	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
2	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
3	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address			-		
4	City	State	ZIP	4		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	□ Cash		
				Credit		

Schedule B(6), page____ of ____



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/		Recipient Informati	1	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			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (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					
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (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					
3	City	State	ZIP	-		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (including % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address			1		
4	City	State	ZIP	1		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (including % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Enter total only if last page of schedu (transfer the total disbursed this period to "	le Summary of Disburse	ments," line 7)			

Schedule B(7), page____ of ____



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

/	Expenditure	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 Rec	called	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	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	called	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	elivery, or Broadcast Office Held		Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			_		
3	City	State	ZIP	_		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	called	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
4	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	called	 □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		Credit		
	Entor total only if last page of schodu					
	Enter total only if last page of schedu (transfer the total disbursed this period to "	Summary of Disburser	ments," line 8)			

Schedule B(8), page____ of ____





SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

Benefited Candidate Amount Candidate Research Rese								
$\left \begin{array}{c c c c } & \hline Interaction of the set of the$	<u> </u>	/	Benefitt	ted Candidate	_	Amount	Amount this	Amount this
$\left \begin{array}{c c c c c } 1 & \hline \\ \hline$			Candidate Name		Date Benefit Provided			
$ \begin{array}{ c c c } 1 & \hline \\ \hline$			Street Address					
$ \begin{array}{ c c c } 1 & \hline \\ \hline$			City	ZIP				
Nate::::::::::::::::::::::::::::::::::::		1						
$\left \begin{array}{c c c c } & \begin{tabular}{ c c } & \b$		ĺ	Type of Benefit Provided					
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3			Street Address					
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Image: Condition of the second sec			Type of Benefit Provided					
A Street Address City State Type of Benefit Provided Notes:			Notes:					
4 City State ZIP Type of Benefit Provided Notes:			Candidate Name		Date Benefit Provided			
4 Type of Benefit Provided Notes:			Street Address		I			
Notes:	4	4	City	State	ZIP			
			Type of Benefit Provided					
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 9)			Notes:					
	F		Enter total only if last page of schedule	e Summary of Disburser	nents " line 9)	<u>l</u>		
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Schedule B(9), page____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient	Committee Infor	mation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Payment Date				
	Street Address					
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared B	Expense (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared B	Expense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared B	Expense (if applicable)			
	Committee Name		Payment Date			
Street Address						
4	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)			
	Committee Name		Payment Date			
	Street Address		I			
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	Expense (if applicable)	□ Cash □ Credit		
-	Enter total only if last page of sched	lule		I		
	Enter total only if last page of schee (transfer the total disbursed this period t	o "Summary of Dis	bursements," line 10)			

Schedule B(10), page____ of ____



REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Reimbursed	I	Reimbursement Date	□ Cash □ 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		Reimbursement Date	□ Cash □ Credit		
	Name					
4	Street Address					
-	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	□ Credit				
	Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed Reimbursement Date					
	Enter total only if last page of schedule					

Schedule B(11), page____ of ____





OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

/						
		Debt Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address			_		
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
1	Street Address					
r	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed	I	Date that Debt Accrued			
	Enter total only if last page of sch	nedule	I			
	(transfer the total received this period	to "Summary of Rece	eipts," line 12)			

Schedule B(12), page____ of _____

COMMITTEE ID NUMBER

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

Schedule A(13), page____ of ____



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipient	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date			
	Name					
	Street Address					
2	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
4	City		ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Disbursement Type	<u> </u>	Disbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursen	nents," line 14)	I		
		,	· /			



AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

		Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative of Disburs	sements - \$250 or Less		
Enter total only if last (transfer the total received	page of schedule this period to "Summary of Disbursements," line 15)		
(transfer the total received	this period to "Summary of Disbursements," line 15)		

Schedule B(15), page____ of