

STATE OF ARIZONA RECEIVED COMMITTEE CAMPAIGN FINANCE REPORT APR 15 2022

COMMITTEE ID NUMBER

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Tubbs for Council TOWN OF PAYSON

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

Office Sought:	☐ County Office:	☐ Special District Office:	
	☑ City/Town Office: Payson Town Council	☐ School Board District:	

Cumulative Report:

	REPORTING PERIOD	REPORT DUE
	2020 4 th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 202
128	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 202
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
1	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
	2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	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, A.R.S. §§ 1-243(A) and 1-303.	

*Reporting deadline extended to next business day. A.R.S. §§ 1-243(A) 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)	\$ 0.00	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 2,000.00	\$ 2,000.00
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 1,200.00	\$ 1,200.00
(d) = Balance at close of reporting period	\$ 800.00	

□ Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page and the following page need to be filed.

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 7/31/21 (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.

Susan Tubbs	Susan Tubbs	04/15/2022
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date



SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
	Monetary Contributions Received		(产数理集等层)
	(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)	2000 00	
	(j) Candidate's Personal Monies (Candidate Committees Only)	2000.00	
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))	2000.00	
	(I) Refunds Given Back to Contributors	- X	
	(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		Maria California
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
3.	Rebates and Refunds Received		
1.	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))		
3.	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))		
3.			
500	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
	Outstanding Accounts Receivable / Debts Owed to Committee		10
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity asapplicable)		
	Miscellaneous Receipts (use cash and/or equity as applicable)		



SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	1200.00	
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))		
4.	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))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	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	100 mm	
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		
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)	1200.00	



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

SCHEDULE A(1)(a)

/	Individual Contr	ibutor Informatio		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	1		
	Occupation	Employer		-		
	Name		Date Contribution Received	- 0		
	Street Address				* 134 	
3	City	State	ZIP	\dashv		
	Occupation	Employer			,	
	Name		Date Contribution Received	-		
	Street Address			-	,	
4	City	State	ZIP	_		
	Occupation	Employer		\perp		
	Name		Date Contribution Received			
	Street Address					
5			T			
.70	City	State	ZIP			
	Occupation	Employer				_

*If in-state individual contributions of \$100 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

Schedule A(1)(a), page 1 of 1



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))		

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

^{*}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 Contr	ibutor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address				1	
1	City	State	ZIP			
	Occupation	Employer		=		
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer	•			
	Name		Date Contribution Received			
	Street Address	t Address				
3	City	State	ZIP		2	
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP		-	
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP		2	
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Sum					

Schedule A(1)(c), page____ of ___

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

/	Candidate Committe	ee Contributor Infor	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 Contribution Receive	I ed	-	ı	
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
	eet Address			-		
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name	1				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name	Committee Name				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Enter total only if last page of schedule (transfer the total received this period to "Su	e Immary of Receipts "	line 1(d))			

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

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/ 	Political Action	Committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address					
1	City	State	ZIP			
C	Committee ID Number	Date Contribution Red	ceived	- V		
	Committee Name	1				
2	Street Address				2	
-	Committee ID Number	State State Contribution Re	ZIP	8	7) (p)	
	Committee ID Number Committee Name	Date Contribution Re	Celve 0			
	Street Address					
3 c	City	State	ZIP			
	Committee ID Number	Date Contribution Re	ceived	*		
	Committee Name					
	Street Address				-	
4	City	State	ZIP			
	Committee ID Number	Date Contribution Re	eceived			
	Committee Name					
5	Street Address City	State	ZIP			
	Committee ID Number	Date Contribution Re				
	Enter total only if last page of se					

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

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

Political Party Contributor Information Amount Received Amount this Amount this	1						/
Street Address			ntributor Informat	ion	Amount Received	Amount this	Cumulative Amount this Election Cycle
Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received		Committee Name					
Committee ID Number Committee Name Street Address City Committee Name Street Address City Committee ID Number Data Contribution Received ZIP Committee ID Number Data Contribution Received Committee ID Number Data Contribution Received Committee ID Number Data Contribution Received Data Contribution Received Committee Name Street Address City Data Contribution Received Data Contribution Received		Street Address					
Committee Name Street Address Zip Committee ID Number Data Contribution Received Committee ID Number Data Contribution Received Zip Committee ID Number Data Contribution Received Zip Committee ID Number Data Contribution Received Committee Name Street Address Street Address Street Address Data Contribution Received	1	City	State	ZIP			
Street Address ZIP		Committee ID Number	Date Contribution Receive	d		<i>y</i>	
2 City State ZIP Committee ID Number Deta Contribution Received Committee ID Number Deta Contribution Received City State ZIP Committee ID Number Deta Contribution Received Committee ID Number Deta Contribution Received Committee Name Street Address 4 City State ZIP Committee ID Number Deta Contribution Received Committee Name Street Address City State ZIP Committee ID Number Deta Contribution Received		Committee Name					
Committee ID Number Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received State ZIP Committee ID Number Date Contribution Received City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received		Street Address					
Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee ID Number Street Address City State ZIP Committee ID Number Date Contribution Received Street Address City State ZIP Committee ID Number Date Contribution Received Street Address Committee ID Number Date Contribution Received Street Address Committee ID Number Date Contribution Received Date Contribution Received	2	City	State	ZIP			
Street Address City State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received		Committee ID Number	Date Contribution Receive	ed			
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Committee ID Number Date Contribution Received Committee Name Street Address City Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name Street Address City Committee Name Date Contribution Received Committee ID Number Date Contribution Received		Street Address					
Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received	3	City	State	ZIP			
Street Address City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received		Committee ID Number	Date Contribution Receive	ed		2	
A		Committee Name				- 35	
City State ZIP Committee ID Number Date Contribution Received Street Address City State ZIP Committee ID Number Date Contribution Received		Street Address					
Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received	4	City	State	ZIP	11	11.1	
Street Address City State ZIP Committee ID Number Date Contribution Received		Committee ID Number	Date Contribution Received				
City State ZIP Committee ID Number Date Contribution Received		Committee Name	1				
City State ZIP Committee ID Number Date Contribution Received		Street Address			-		1
	5	City	State	ZIP	-		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts " line 1/ft)		Committee ID Number	Date Contribution Receiv	ed	-		4
fundamental and total received this period to summary or necessary, line 1(1))		Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receipts,"	line 1(f))			

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

1						
		ntributor Informatio	on	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 Receive	d			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Partnership Name					
	Street Address	Street Address				-
3	City	State	ZIP		· · · · · ·	
	Corporation Commission File Number	Date Contribution Receive	ed			
-	Partnership Name					
	Street Address					_
4	City	State	ZIP			-
	Corporation Commission File Number	Date Contribution Receive	ed		,	
-	Partnership Name					
	Street Address			-		
5	City	State	ZIP			. 1
	Corporation Commission File Number	Date Contribution Receive	ed	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,"	line 1(g))			

Schedule A(1)(g), page___ of ___

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

Corporation / LLC	Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Corporation/LLC Name				1	
Street Address					
City	State	ZIP	- 12		
Corporation Commission File Number	Date Contribution Receive	d			
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date Contribution Receive	<u>l</u>			
Corporation/LLC Name				- ,1	
Street Address					
City	State	ZIP			
Corporation Commission File Number	mber Date Contribution Received				
Corporation/LLC Name					
Street Address	1				
City	State	ZIP	1		
Corporation Commission File Number	Date Contribution Receiv	<u>l</u>			
Corporation/LLC Name					
Street Address			1	-	
City	State	ZIP	1		
		I.	1	1	I
	Corporation/LLC Name Street Address City Corporation Commission File Number Street Address City Corporation/LLC Name Street Address City Corporation/LLC Name Street Address City Corporation Commission File Number Street Address City Corporation Commission File Number Corporation Commission File Number Corporation Commission File Number Corporation/LLC Name Street Address City Corporation Commission File Number	Corporation/LLC Name Street Address City State Corporation Commission File Number Date Contribution Receive City State Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation Commission File Number Date Contribution Receive Corporation Commission File Number Date Contribution Receive Corporation/LLC Name Street Address	Street Address City State ZIP Corporation Commission File Number Date Contribution Received Street Address City State ZIP Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received City State ZIP Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received	Corporation ALC Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received Corporation ALC Name Street Address City State ZIP Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received	Corporation / LLC Contributor Information Amount Received Amount this Reporting Period Corporation Commission File Number Date Contribution Received Corporation Commission File Number Date Contribution Received

Schedule A(1)(h), page____ of ___

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

				F		
Labor Organiza	ation Contributor Info	ormation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Labor Organization Name						
ddress						
	State	ZIP				
tion Commission File Number	Date Contribution Red	ceived		-		
rganization Name						
ddress						
	State	ZIP				
tion Commission File Number	Date Contribution Re	ceived				
Labor Organization Name						
Street Address						
	State	ZIP		-		
tion Commission File Number	Date Contribution Re	ceived				
Labor Organization Name						
ddress				-	-	
	State	ZIP		-		П
tion Commission File Number	Date Contribution Received					
rganization Name						
Street Address			-	=		
	State	ZIP		1		
tion Commission File Number	Date Contribution Re	eceived		+		
		0.000.000.000.000.000.000.000.000.000.	only if last page of schedule total received this period to "Summary of Receipts," line 1(i))			

Schedule A(1)(i), page____ of ___



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

/	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Susan Tubbs		Date Contribution Received 02/14/2022			
	703 E Tyler Parkway			2000.00		
1	Payson	AZ	85541	2000.00	\$1	
	Realtor	Susan Tu	ubbs PC			
	Name		Date Contribution Received			
	Street Address				·,	
2	City	State	ZIP	1		4.
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer			,	
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP	1		.1
	Occupation	Employer				
Н	Name		Date Contribution Received			
	Street Address			1		
5	City	State	ZIP			7.0
	Occupation	Employer	1			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(j))			

Schedule A(1)(j), page 1 of 1

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

/	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date Contribution Refunded				
	Street Address					
1	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address				1	
2	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
7	Name	Date Contribution Refunded				
	Street Address			-		
3	City	State	ZIP			
	ID Number (if applicable)	Date of Original Contribution				
	Name	Date Contribution Refunded				
	Street Address					
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution		9	
	Name	Name				
	Street Address			1		
5	City	State	ZIP	1		1
	ID Number (if applicable)		Date of Original Contribution			1
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(I))			

Schedule A(1)(I), page ____ of___



LOANS RECEIVED:

SCHEDULE A(2)(a)

_		r Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Lender Name Date Loan Received					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? ((PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)			£	
	Lender Name	Date Loan Received				
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)			

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

FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

Lender I	nformation		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		Date Forgiveness Received			
Street Address					
City	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding				
Lender Name		Date Forgiveness Received			1
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Lender Name	L	Date Forgiveness Received			
Street Address					
City	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding		-		
Lender Name		Date Forgiveness Received			
Street Address			-		
City	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding		-		
Lender Name		Date Forgiveness Received			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding		-		
	Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan	Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name	Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received	Lender Name Date Forgiveness Received City State ZiP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZiP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received	Reporting Period Lender Name Date Forgiveness Received City State Lender Name Date Forgiveness Received City State Lender Name Date Forgiveness Received Digital Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received City State Zip Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received City State Zip Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received City State Zip Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Steel Address City State Zip Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Steel Address City State Zip Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received

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

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrower	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		- 3 de		
	Borrower Name		Date Repayment Received		1	
	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			7, 4		
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	Street Address			-		
5	City	State	ZIP	72		
	Original Amount Borrowed	Amount Still Outstanding		-		

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

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

_		r Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address			1	in the second	
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued		14	
	Street Address					
2	City	State	ZIP		y ·	
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding		1		
	Borrower Name	Date Interest Accrued		-		
	Street Address				4.0	
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		1		

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



REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

/		nformation		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Street Address					
1	City	State	ZIP		\$ 0.00	
	Original Purchase Amount	Reason for Refund/Rebat	e			
	Payor Name		Date Rebate/Refund Received			
	Street Address			1		
2	City	State	ZIP	1	,	
	Original Purchase Amount	Reason for Refund/Rebat	e	1		
	Payor Name		Date Rebate/Refund Received			
	Street Address			1		
3	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/Rebat	e	1		
	Payor Name		Date Rebate/Refund Received			
	Street Address			1		
4	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/Rebat	e	1		
	Payor Name		Date Rebate/Refund Received			
	Street Address			1		
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebat	le e	1		
-	Enter total only if last page of schedule (transfer the total received this period to "Sun					

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Schedule A(3), page ____ of ___

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Account with Interest Eamed (Bank Name / Type of Account)		
Account with Interest Eamed (Bank Name / Type of Account)		
Account with Interest Eamed (Bank Name / Type of Account)	10,4	
Account with Interest Eamed (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)	<i>y</i>	

Schedule A(4), page____ of ___

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

SCHEDULE A(5)(a)

/		ibutor 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			
	Occupation	Employer			,	
	Name Date In-Kind Contribution Received					
	Street Address			a		
2	City	State	ZIP		, -	
	Occupation	Employer		*		
Г	Name		Date In-Kind Contribution Received		0	2
	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			1-
	Street Address			1		
5	City	State	ZIP]		9
	Occupation	Employer	•			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(a))	•		

*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)(a), page____ of ___



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 - \$50 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 ____



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

SCHEDULE A(5)(c)

					3	
/	Individual Contr	ibutor Information	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					٨.
1	City	State	ZIP	_	\$ 0.00	,
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address				=	
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
3	Street Address		£			
3	City	State	ZIP			
	Occupation	Employer		,		
	Name		Date In-Kind Contribution Received			
4	Street Address					
7	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
5	Street Address					
ا	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(c))			di di

Schedule A(5)(c), page___ of ___

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

/						
_	Candidate Committee	Contributor Infor	mation	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 F	Received	Sec.		
П	Committee Name					
	Street Address			_		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
H	Committee Name					_
	Street Address					
3	City	State	ZIP		Į.	
	Committee ID Number	Date In-Kind Contribution	Received			
Н	Committee Name					
	Street Address					
4	City	State	ZIP		ji.	
	Committee ID Number	Date In-Kind Contribution	Received			-
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			-
H	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(d))			

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

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

100				2		
_	Political Action Committ	ee Contributor In	formation	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		1		20	
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 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 "Sum	mary of Receipts," I	ine 5(e))			

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

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

1	Political Party Cor Committee Name Street Address	ntributor Informati	ion	Amount Received	Cumulative Amount this	Cumulative Amount this
1	0.0000000000000000000000000000000000000				Reporting Period	Election Cycle
	Street Address					
1						
	City	State	ZIP		1.	
	Committee ID Number	Date In-Kind Contribution I	Received			
	Committee Name					
	Street Address			=		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name			Į.		
Ш	Street Address				2	
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
П	Committee Name					
	Street Address					
4	City	State	ZIP	·-		
	Committee ID Number	Date In-Kind Contribution Received				
П	Committee Name					
Ш	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
П	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(f))			

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

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnershi	p Contributor Information	on	Amount Received	Cumulative Amount this	Cumulative Amount this
	Partnership Name			Reporting Period	Election Cycle	
	Street Address			-		
1	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	I Received	-		
	Partnership Name					
	Street Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address			-		
4	City	State	ZIP	_		
	Corporation Commission File Number	prporation Commission File Number Date In-Kind Contribution Received		-		
	Partnership Name					
	Street Address			-		
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received		+		

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Schedule A(5)(g), page___ of ___

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

				Cumulative	Cumulative
Corporation /	LLC Contributor Inforr	nation	Amount Received	Amount this Reporting Period	Amount this Election Cycle
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	n Received			
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	n Received			
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	on Received			
Corporation/LLC Name					
Street Address			\dashv		
City	State	ZIP			
Corporation Commission File Number Date In-Kind Contribution Received					
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	on Received			
	Corporation/LLC Name Street Address City Corporation Commission File Number Corporation Commission File Number Corporation Commission File Number Corporation/LLC Name Street Address City Corporation Commission File Number Corporation Commission File Number Corporation Commission File Number Corporation/LLC Name Street Address City Corporation Commission File Number Corporation/LLC Name Street Address City Corporation/LLC Name	Corporation/LLC Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Corporation Commission File Number Date In-Kind Contribution Corporation Commission File Number Date In-Kind Contribution Corporation/LLC Name Street Address City State Corporation/LLC Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Corporation/LLC Name Street Address City State Corporation/LLC Name	Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received	Street Address City State ZiP Corporation Commission File Number Date In-Kind Contribution Received City State ZiP Corporation ALC Name Street Address ZiP Corporation Commission File Number Date In-Kind Contribution Received City State ZiP Corporation ALC Name Street Address City State ZiP Corporation Commission File Number Date In-Kind Contribution Received City State ZiP Corporation ALC Name Street Address City State ZiP Corporation ALC Name Street Address City State ZiP Corporation ALC Name Street Address City State ZiP Corporation Commission File Number Date In-Kind Contribution Received City State ZiP Corporation Commission File Number Date In-Kind Contribution Received Corporation Commission File Number Date In-Kind Contribution Received City State ZiP Corporation Commission File Number Date In-Kind Contribution Received Street Address City State ZiP Corporation Commission File Number Date In-Kind Contribution Received Street Address ZiP Corporation Commission File Number Date In-Kind Contribution Received	Corporation / LLC Contributor Information Amount Received Reporting Period Corporation LLC Name Street Address City State ZIP Corporation Commission File Number Date in-Kind Contribution Received City State City State

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

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Labor Organization Name					
Street Address					
City	State	ZIP	v		
Corporation Commission File Number	Date In-Kind Contribution	Received			
Labor Organization Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	Received			
Labor Organization Name				-	4)
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date In-Kind Contribution	Received		E.	
Labor Organization Name					
Street Address					
City	State	ZIP			,-
Corporation Commission File Number	Date In-Kind Contribution	Received			
Labor Organization Name					
Street Address					
City	State	ZIP		10	
Corporation Commission File 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	line 5(i))			
	Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number Labor Organization Name Street Address City Corporation Commission File Number	Labor Organization Name City State Corporation Commission File Number Date In-Kind Contribution Labor Organization Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Labor Organization Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Labor Organization Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Labor Organization Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Labor Organization Name Street Address City State Corporation Commission File Number Date In-Kind Contribution Labor Organization Name	Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received	Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date in-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date in-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date in-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date in-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date in-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date in-Kind Contribution Received	Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received Labor Organization Name Street Address City State ZIP Corporation Commission File Number Date In-Kind Contribution Received

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

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

SCHEDULE A(5)(j)

/						
_	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Γ	Name		Date In-Kind Contribution Received			
	Street Address			-		
1	City	State	ZIP		* * *	
	Asset or Property Contributed				=	
L	- Marie Control of Marie Control				2	
	Name		Date In-Kind Contribution Received			
	Street Address			1		
2	City	State	ZIP			
	Asset or Property Contributed					
L	Name		Date In-Kind Contribution Received			
	Name		Date in-Aind Contribution Received			
	Street Address					
3	City	State	ZIP		-	
	Asset or Property Contributed					
\vdash	Name		Date In-Kind Contribution Received			
	Street Address				_	
L						
4	City	State	ZIP		8	
	Asset or Property Contributed				2	
\vdash	Name		Date In-Kind Contribution Received			
	Street Address	treet Address		-		
5	200000000000000000000000000000000000000	I.	I			
	City	State	ZIP			
	Asset or Property Contributed				- 10 H	
r	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts "	line 5(i))			
4	A service the total received this period to dull		nedule A(5)(j), page o	f		/

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

SCHEDULE A(6)

Source Information Amount Received Amount this Reporting Period Street Address 1 City State Zip Type of Item Donated Date In-Kind Donation Received Select Address 2 City State Zip Type of Item Donated Date In-Kind Donation Received Date In-Kind Donation Received	
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 Street Address 3 City State ZIP Type of Item Donated Name Date in-Kind Donation Received Street Address 4 City State ZIP Type of Item Donated	Cumulative Amount this Election Cycle
1	
Type of Item Donated Name	
Name Date in-Kind Donation Received	
Street Address 2 City State ZiP Type of Item Donated Name Date In-Kind Donation Received Street Address 3 City State ZiP Type of Item Donated Name Date In-Kind Donation Received Street Address 4 City State ZiP Type of Item Donated	
Zip	
Type of Item Donated Name Date In-Kind Donation Received Street Address City State ZIP Type of Item Donated Name Date In-Kind Donation Received Street Address City State ZIP Type of Item Donated Street Address City State ZIP Type of Item Donated	
Name Date in-Kind Donation Received Street Address City State ZIP Type of Item Donated Name Date in-Kind Donation Received Street Address 4 City State ZIP Type of Item Donated	
Street Address City State ZIP Type of Item Donated Name Date In-Kind Donation Received Street Address City State ZIP Type of Item Donated	
Type of Item Donated Name Date In-Kind Donation Received Street Address City State ZIP Type of Item Donated	
Type of Item Donated Name Date In-Kind Donation Received Street Address 4 City Type of Item Donated	
Name Date In-Kind Donation Received Street Address City State ZIP Type of Item Donated	
Street Address 4 City State ZIP Type of Item Donated	
4 City State ZIP Type of Item Donated	
City State ZIP Type of Item Donated	
Name Date In-Kind Donation Received	
	1 2
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 "Summary of Receipts," line 6)	1

Schedule A(6), page____

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

_	Creditor	nformation		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name				ı	
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
Г	Name		•	2		
	Street Address		us :	27 17		
2	2 City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
r	Name					
	Street Address					
3	Gity City	State	ZIP	-		
	Services or Goods Provided on Credit		Date of Extension of Credit			
r	Name					
	Street Address			1	-	
4	City	State	ZIP			
	Services or Goods Provided on Credit	-	Date of Extension of Credit		1	
r	Name		1			
	Street Address	1		- 1		
5	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			-
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 7(a))	1		

Schedule A(7)(a), page____ of ____

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

/				Payment Amount	Cumulative	Cumulative
	Creditor	Information		on Credit Extended	Amount this Reporting Period	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				ē	
	Street Address			-	A	
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address				-9.	
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 Credit			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Receipts "	line 7/h))	7-		

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Schedule A(7)(b), page____ of ____

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

,						
	Payor Co	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense		pense (if applicable)			
2	Committee Name		Payment Date		5	
	Street Address				2,	
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			ı
	Committee Name		Payment Date			
3	Street Address		8			
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)		*	
4	Committee Name Payment Date					
	Street Address		-			
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			
	Committee Name		Payment Date			
5	Street Address					
	City State		ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			
	Enter total only if last page of scheo (transfer the total received this period to	fule	ote " line 8)			

Arizona Secretary of State Revision 7/31/21 (fillable format)

Schedule A(8), page____ of ____

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor Ir	formation		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		je			
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date		8	
	Name					
	Street Address	-				
4	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 schedule (transfer the total received this period to "Sum					

Arizona Secretary of State Revision 7/31/21 (fillable format)

Schedule A(9), page____ of ____

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/	Infor	mation		Amount	Cumulative Amount this	Cumulative Amount this
	Name				Reporting Period	Election Cycle
	Street Address		3			
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name			7		
	Street Address	reet Address				
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued		Ä,	
	Name	е				
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address			1		
4	City	State	ZIP	1		
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
	Name	I I				
	Street Address		-			
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	1		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Receipte "	line 10)			

Arizona Secretary of State Revision 7/31/21 (fillable format)

Schedule A(10), page____ of ____



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		1-
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		- 1
Source of Surplus Monies / Recipient of Transferred Debt		
Source of Surplus Monies / Recipient of Transferred Debt		N /
Total (transfer the total received this period to "Summary of Receipts," line 11)		

Schedule A(11), page____ of ___



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

		nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address				2	
1	City	State	ZIP			
	Receipt Type		Receipt Date	2 2 2		
	Name	-				
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date		1	
	Name					
,	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name			EA .		
4	Street Address				-	
	City	State	ZIP			
	Receipt Type		Receipt Date			
	200,000	Name				
5		Street Address				
	City	State	ZIP Paraira Para		15 7	
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 12)			

Schedule A(12), page____ of ____

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipient	Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	ame	Disbursement Date			1200.00	1200.00
K	MOG Radio	02/14/22		100	1200.00	1200.00
2.5%	reet Address			1200.00		
5	00 E Tyler Parkway			1200.00		
1 Cit	ty	State	ZIP			
P	Payson	AZ	85541	□ Cash		
_	rpe of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Cash ☐ Credit		,
F	Forum					
_	ame	Disbursement Date			-	
					4	
Str	reet Address					
2		1		_		
Cit	ty	State	ZIP			
-				☐ Cash		
Ty	/pe of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		.1
\perp						
Na	ame	Disbursement Date				
Str	reet Address					
3 Cit	ty	State	ZIP			
				□ Cash		
Ту	ype of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
				34-000-444-000-000	1	
Na	ame	Disbursement Date			+	
					-	
Str	reet Address			_		
					1	
4		I.			1	
Cit	ty	State	ZIP			
				☐ Cash	1	
Ту	/pe of Operating Expense Paid		(PACs and Political Parties Only)	☐ Credit		
Na	ame	Disbursement Date				
				_		
Str	reet Address					
5 Cit	ity	State	ZIP			
				☐ Cash ☐ Credit		
Tv	/pe of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	- Li Ciedit		
,						
+						-
Er	nter total only if last page of schedule		SOF WINE ON			
(tr	ransfer the total disbursed this period to "Su	mmary of Disburser	ments," line 1)			

Schedule B(1), page 1 of 1

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
	Street Address					
1		- 4				
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	7.0×4		
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			□ Credit		
	Committee Name	1		=		
	Street Address	Street Address				
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name	1				
	Street Address	- 1				
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Su					

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

7	Political Action Commit	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Street Address					
1	State State		ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit	F = 4	_
	Committee Name					
2	Street Address			i e		
	City	State Date Contribution Made	ZIP	□ Cash		
	Committee ID Number Committee Name	☐ Credit				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name		-			
	Street Address	Street Address				
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		8
	Committee Name					
5	Street Address				9	
-	City	State	ZIP	☐ Cash☐ Credit	□ Cash	
	Committee ID Number Date Contribution Made			Li Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disburser	ments," line 2(b))			

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party F	ecipient Informati	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name				7	
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit	☐ Cash☐ Credit	
	Committee Name					
	Street 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		1			
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Si					

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	ship Recipient Informa	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Torporation Commission File Number Date Contribution Made				
	Partnership Name					
	Street Address					
2	City	State	ZIP	Floret		
	Corporation Commission File Number	Date Contribution M	ade	☐ Cash☐ Credit		
	Partnership Name					
1	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	ade	☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	ade	☐ Cash☐ Credit		
	Partnership Name					
	Street Address				-	
5	City	State	ZIP	□ Cook		
	Corporation Commission File Number	Date Contribution M	ade	□ Cash □ Credit	=	
_	Enter total only if last page of scl (transfer the total disbursed this perio	hedule	reaments " line 3/d"			

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/ LLC Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address			6		
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
+	Corporation/LLC Name		2			
	Street Address					
3	City	City State ZIP				
	Corporation Commission File Number	Date Contribution	n Made	□ Cash		
	Corporation/LLC Name		9800-3200			
	*					
4	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	n Made	□ Credit	riging.	
	Corporation/LLC Name	3800411 13 * 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			7	
	Street Address	ii ii				
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Number Date Contribution Made		□ Credit		
	Enter total only if last page of sch	adula				

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	nization Recipient In	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Labor Organization Name						
	Street Address						
1	City	State	ZIP	TI Cook			
	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	☐ Cash☐ Credit		
	Labor Organization Name						
1	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit			
	Labor Organization Name						
	Street Address				199		
4	City	State	ZIP	□ Cash		ja-	
	Corporation Commission File Number	ration Commission File Number Date Contribution Made					
	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 (transfer the total disbursed this perio	nedule					

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

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Contributor	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address		1			
1	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	-		
	Committee Name		Date Refund Received			
	treet Address					
2	City	State	ZIP	1		
	Committee ID Number		Date of Original Contribution	1		
	Committee Name	Date Refund Received			1 4	
	Street Address		1			
3	City	State	ZIP			
	Committee ID Number	Date of Original Contribution	1			
	Committee Name	Date Refund Received				
	Street Address		1	j.	,	
4	City	State	ZIP	1		
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address		1			
5	City	State	ZIP			W .
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sui	mmary of Dishurse	ments." line 2(h))			

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

LOANS MADE:

SCHEDULE B(3)(a)

/		Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address			4,		
1	City	State	ZIP		П	
	Guarantor/Endorser Name	Date Loan Made			_	
	Borrower Name					
	Street Address	₽1	2			
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made			e -	
	Borrower Name					
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made		i L		=
	Borrower Name				-	
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
5	City	State	ZIP	-		9
	Guarantor/Endorser Name	Date Loan Made				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Disburseme	ents," line 3(a))			1

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Schedule B(3)(a), page___of _

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

and the second s	Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Guarantor Name					
Street Address					
City	State	ZIP			
Borrower Name	Date Loan Guaranteed				
Guarantor Name					
Street Address	7 1				
City	State	ZIP	=		
Borrower Name	Date Loan Guaranteed				
Guarantor Name					
Street Address		- 4			
City	State	ZIP			
Borrower Name	Date Loan Guaranteed		1001		
Guarantor Name					
Street Address			.65		
City	State	ZIP			
Borrower Name	Date Loan Guaranteed		· ·		
Guarantor Name					
Street Address					
City	State	ZIP			
Borrower Name	Date Loan Guaranteed				
	Guarantor Name Street Address City Borrower Name Street Address City Borrower Name Guarantor Name Guarantor Name	Guarantor Name Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State Street Address City State Street Address City State City State	Street Address City State ZIP Borrower Name Date Loan Guaranteed Street Address City State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State ZIP Borrower Name Date Loan Guaranteed Street Address City State ZIP City State ZIP Borrower Name Date Loan Guaranteed City State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State ZIP Borrower Name Date Loan Guaranteed City State ZIP Street Address City State ZIP City State ZIP City State ZIP City State ZIP City State ZIP	Guarantor Name Street Address City State ZIP Borrower Name City State ZIP Courantor Name City State ZIP Courantor Name City State ZIP Courantor Name Street Address City State ZIP Courantor Name City State ZIP Courantor Name City State ZIP Courantor Name City State ZIP Courantor Name	Guaranter Name Street Address City State C

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

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

presentation and the second se	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Borrower Name		Date Forgiveness Made			
Street Address			1		
City	State	ZIP	1		
Original Amount of Loan	Amount Still Outstanding		1 5		
Borrower Name		Date Forgiveness Made			B
Street Address			1		
City	State	ZIP	1		
Original Amount of Loan	Amount Still Outstanding		1 1		
Borrower Name		Date Forgiveness Made			
Street Address			1	-	
City	State	ZIP	-	-	
Original Amount of Loan	Amount Still Outstanding		-		
Borrower Name		Date Forgiveness Made			
Street Address			-		
City	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding		-		
		Data Farahanasa Mada			
		Date Fulgiveness Made	J		
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
	Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan	Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State	Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made	Borrower Name Date Forgiveness Made	Borrower Name Date Forgiveness Made Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Street Address City State ZIP Criginal Amount of Loan Amount Still Outstanding Criginal Amount of Loan Criginal Amoun

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

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address	Street Address				
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandin	ng			
	Lender Name		Date Repayment Made			
	Street Address				*	
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandin	ng			
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	ng		-	
	Lender Name		Date Repayment Made			
	Street Address	Street Address				
4	City	State	ZIP		1	
	Original Amount Borrowed	Amount Still Outstandi	ng		6	
	Lender Name	81	Date Repayment Made			
	Street Address	Street Address				
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandi	ing			
_	Enter total only if last page of schedule (transfer the total disbursed this period to "S					

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

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/		Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address	•				
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address			-		
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Interest Accrued			
	Street Address		<i>\$</i>		-	
3	City State		ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		

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

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	Rec	ipient 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		v	
	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				E-	
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					
5	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	\dashv		

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Schedule B(4), page____ of ____

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committe	e Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	19	7	
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made		-	
_	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made	-		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sui	mmary of Disbursen	nents." line 5(a))		,	

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

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/	Political Action Commi	ttee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address		7			
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					7
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made		5 k	
	Committee Name					
	Street Address				,	
4	City	State	ZIP	7		
	Committee ID Number	Date In-Kind Contribution	n Made		-	
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
2	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburser	ments," line 5(b))			

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

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Politica	al Party Recipient Inform	nation	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 Contrit	oution Made				
	Committee Name						
	Street Address						
2	City	State	ZIP				
	Committee ID Number	Date In-Kind Contri	bution Made				
	Committee Name						
	Street Address						
3	City	State	ZIP				
	Committee ID Number	Date In-Kind Contri	ibution Made				
	Committee Name		1.0				
	Street Address					. V	
4	City	State	ZIP				
	Committee ID Number	Date In-Kind Contr	ibution Made		-		
	Committee Name						
	Street Address						
5	City	State	ZIP				
	Committee ID Number	Date In-Kind Contr	ibution Made				

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IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners Partnership Name	hip Recipient Inform	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address			7-		
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			24.5		
	Street Address		*******************************			
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	tribution Made			
_	Partnership Name				2	
	Street Address					
4			T			
	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Made					
	Partnership Name	å	1			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Con	ntribution Made			

Schedule B(5)(d), page____ of ___

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation / LLC	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
Corporation/LLC Name						
	Street Address	-				
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
Г	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
Н	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur					
	(transfer the total disbursed this period to "Su	mmary of Disburser	ments," line 5(e))			

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

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organization	n Recipient Inform	ation	Amount Contributed	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 Contribution	I Made			
	Labor Organization Name					
	Street Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
_	Labor Organization Name					
	Street Address			-		
3	City	State	ZIP		-	
	Corporation Commission File Number	Date In-Kind Contribution	n Made	_		
	Labor Organization Name					
	Street Address			-		
4	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
L	Labor Organization Name			-	-	
	Street Address			-		
5	City State ZIP			× 8		
L	Corporation Commission File Number	Date In-Kind Contribution				
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	ummary of Disburser	ments," line 5(f))			

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

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

_		Recipient Informat		Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name	Mode of Advertising (TV, mail, etc)				
	Street Address	16:				
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	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
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	Office Sought	_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			w		
3	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	_		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1	-	
4	City	State	ZIP		1 2	
	Candidate(s) Supported (including % supported) Candidate(s) Opposed (including % opposed)		cluding % opposed)	☐ Cash	-	
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "	e of Birk	- I line ()			

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BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure F	Recipient Informa	Mode of Advertising (TV, mail, etc)	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address					
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppos	sed (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	100	□ Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppos	sed (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	1		
	Ballot Measure(s) Supported (including % supported)	d (including % supported) Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Oppor	sed (including % opposed)	☐ Cash	4 · 2	
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "to	le Summary of Disbur	rsements," line 7)			

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

_		Recipient Informatio		Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address				76	
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 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		alled	☐ Cash	-	
	Date of First Publication, Display, Delivery, or Broadcast		☐ 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	I. alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			9 -		
4	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Rec		□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	cation, Display, Delivery, or Broadcast Office Held		☐ Credit		
_	Enter total only if last page of schedul (transfer the total disbursed this period to "	e				

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SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/		ed Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address					
1	Сіту	State	ZIP			
	Type of Benefit Provided			9		
	Notes:			-		
	Candidate Name		Date Benefit Provided			
	Street Address					
2	City	State	ZIP			
	Type of Benefit Provided			2		
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address				-	
3	City	State	ZIP]		
	Type of Benefit Provided		•			
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
4	City	State	ZIP			
	Type of Benefit Provided				==	
	Notes:				1	
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	e Summary of Disbursen	nents." line 9)		×	

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JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

		mmittee Informati		Payment Amount	Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address		•			
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expen	se (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	ase (if applicable)	□ Cash □ Credit			
-	Committee Name		Payment Date	1		
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expen	nse (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exper	nse (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)			☐ Cash☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "S	e Summary of Disburs	sements," line 10)			

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	Cook.		
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit	3	
	Name			-		
	Street Address					
2	City	State	ZIP	TI Cook	,	
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP	□ Cash	-	
	Services or Goods Reimbursed	36 =	Reimbursement Date	☐ Credit		
	Name		-			
	Street Address				2	
4	City	State	ZIP	II Cook		
	Services or Goods Reimbursed	Reimbursement Date	☐ Cash☐ Credit			
	Name					
	Street Address			N)		
5	City	State	ZIP	TI Control		
	Services or Goods Reimbursed Reimbursement Date			☐ Cash☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disburse	ments," line 11)			

OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

		formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name				7	
	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	1	Date that Debt Accrued	1		
			Data vist Data Padiada	1		
	Name				E _{1.5}	
4	Street Address					
7	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address			1		
5	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
-	Enter total only if last page of schedule					

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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	н .	ž į
tecipient of Surplus Monies / Source of Transferred Debt		
tecipient of Surplus Monies / Source of Transferred Debt	i	
Recipient of Surplus Monies / Source of Transferred Debt		
Fotal transfer the total disbursed this period to "Summary of Disbursements," line 13)		8

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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

_	Recipient	Information		Amount	Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					3
	Street Address					-
1	City	State	ZIP	□ Cash		2.1
	Disbursement Type	Disbursement Date	☐ Credit	* 4	*	
1	Name					
1	Street Address					
2	City	State	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit			
	Name					
	Street Address				4.	
3	City	State	ZIP	□ Cash		¥,,
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
	Street Address					
4	City	State	ZIP	II Cook		
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
1	Name				7	
	Street Address					
5	City	State	ZIP	D.Ozak	*	
	Disbursement Type	L	Disbursement Date	☐ Cash☐ Credit		ji
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disburse	ements," 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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