

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

FOR OFFICE USE ONLY

**RECEIVED**

**AUG 23 2016**

TOWN CLERK  
TOWN OF PAYSON

1. Full Name of Committee  
Michael Hughes for Mayor of Payson  
Address  
200 W. Roundup 85541 Gila 928-975-4485  
City ZIP Code County Phone

2. Sponsoring Organization or Candidate and office  
Michael Hughes Mayor of Payson  
Name of Candidate and Office Sought (if applicable)  
michael@mhughesre.com  
E-Mail Address Fax #

3A. ID#  
12-C-04

**4. REPORTING PERIOD** (Please check appropriate box)

**DUE BETWEEN**

- January 31 Report - For Period of \_\_\_\_\_ \* thru December 31, 2015 ..... January 1, 2016 and February 1, 2016
- June 30 Report - For Period of January 1, 2016 thru May 31, 2016 ..... June 1, 2016 and June 30, 2016
- Pre-Primary Election Report - For Period of June 1, 2016 thru August 18, 2016 ..... August 19, 2016 and August 26, 2016
- Post-Primary Election Report - For Period of August 19, 2016 thru September 19, 2016 ..... September 20, 2016 and September 29, 2016
- Pre-General Election Report - For Period of September 20, 2016 thru October 27, 2016 ..... October 28, 2016 and November 4, 2016
- Post-General Election Report - For Period of October 28, 2016 thru November 28, 2016 ..... November 29, 2016 and December 8, 2016
- \*\*January 31, Report - For Period of November 29, 2016 thru December 31, 2017 ..... January 1, 2018 and January 31, 2018

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		0
5b Cash on Hand at the Beginning of this Reporting Period	\$ 200	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$ 3,330	3,530
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	3,530	3,530
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	2,757.60	2,757.60
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	\$ 772.40	\$ 772.40

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

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

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

1. Committee Name: Michael Hughes For Mayor of Payson  
 3. Report covering period from 6-1-16 Thru 8-18-16

2. ID#	<u>12-C-04</u>
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	<u>1485</u>	<u>1485</u>
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	<u>345</u>	<u>345</u>
(c) Political Committees (Total from Schedule B)	<u>—</u>	<u>—</u>
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	<u>1830</u>	<u>1830</u>
(e) Refund of contributions (Total from Schedule F-2)	<u>0</u>	<u>—</u>
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	<u>1830</u>	<u>1830</u>
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	<u>1,500</u>	<u>1700</u>
(b) All other loans (Total from Schedule C-1)	<u>—</u>	<u>—</u>
(c) Total Loans [add 5(a) and 5(b)]	<u>1,500</u>	<u>1700</u>
6. In-kind contributions (Total from Schedule E)	<u>—</u>	<u>—</u>
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	<u>—</u>	<u>—</u>
8. Total Receipts [add 4(f), 5(c), 6, and 7]	<u>3,330</u>	<u>3,530</u>
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	<u>2,757.60</u>	<u>2757.60</u>
10. Independent Expenditures (Total from Schedule D-1)	<u>—</u>	<u>—</u>
11. Value of In-kind expenditures (Total from Schedule E)	<u>—</u>	<u>—</u>
12. Loans made by reporting committee (Total from Schedule D-2)	<u>—</u>	<u>—</u>
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	<u>—</u>	<u>—</u>
(b) Repayment of all other loans (Total from Schedule D-5)	<u>—</u>	<u>—</u>
(c) Total Loan Repayments [add 13(a) and 13(b)]	<u>—</u>	<u>—</u>
14. Transfers to other political committees (Total from Schedule D-6)	<u>—</u>	<u>—</u>
15. Any other disbursement (Total from Schedule D-7)	<u>—</u>	<u>—</u>
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	<u>2,757.60</u>	<u>2,757.60</u>
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	<u>—</u>	<u>—</u>
18. Total disbursements [subtract line 17 from line 16]	<u>2,757.60</u>	<u>2,757.60</u>
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	<u>—</u>	<u>—</u>

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

Michael Hughes  
 Type or Print Name of Treasurer

[Signature]  
 Signature of Treasurer or Candidate or Designating Individual

8-17-16  
 Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS\*

SCHEDULE A

2. ID# 12-C-04	
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Michael Hughes For Mayor of Payson

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Payson, AZ		85541																									
OCCUPATION	EMPLOYER																										
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>STERNON</td> <td>SANON</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1039 W RIMMLOW RD</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>PAYSON</td> <td>AZ</td> <td>85541</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	STERNON	SANON		STREET ADDRESS			1039 W RIMMLOW RD			CITY	STATE	ZIP	PAYSON	AZ	85541	OCCUPATION	EMPLOYER					6/24/16	\$100.00
LAST	FIRST	MI																									
STERNON	SANON																										
STREET ADDRESS																											
1039 W RIMMLOW RD																											
CITY	STATE	ZIP																									
PAYSON	AZ	85541																									
OCCUPATION	EMPLOYER																										
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]																										

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

CONTRIBUTIONS more than \$50 - from INDIVIDUALS\*

SCHEDULE A

2. ID#	12-C-04
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Michael Hughes for Mayor of Paysa

3. Report covering period from 6-1-16 thru 6-18-16

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																												
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Cunningham</td> <td>Deborah</td> <td>L</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">16734 E Westby # 202</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Fountain Hills</td> <td>AZ</td> <td>85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Cunningham	Deborah	L	STREET ADDRESS			16734 E Westby # 202			CITY	STATE	ZIP	Fountain Hills	AZ	85268	OCCUPATION	EMPLOYER					7/5/16	\$30.00	
LAST	FIRST	MI																										
Cunningham	Deborah	L																										
STREET ADDRESS																												
16734 E Westby # 202																												
CITY	STATE	ZIP																										
Fountain Hills	AZ	85268																										
OCCUPATION	EMPLOYER																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Halverson</td> <td>Narran + Phyllis</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1177 S. Mt. View Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Paysa</td> <td>AZ</td> <td>85541</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Halverson	Narran + Phyllis		STREET ADDRESS			1177 S. Mt. View Dr			CITY	STATE	ZIP	Paysa	AZ	85541	OCCUPATION	EMPLOYER					6/26	\$100.00	
LAST	FIRST	MI																										
Halverson	Narran + Phyllis																											
STREET ADDRESS																												
1177 S. Mt. View Dr																												
CITY	STATE	ZIP																										
Paysa	AZ	85541																										
OCCUPATION	EMPLOYER																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Wilson</td> <td>John + Sae</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1005 S Corson City Ctr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Paysa</td> <td>AZ</td> <td>85541</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Wilson	John + Sae		STREET ADDRESS			1005 S Corson City Ctr			CITY	STATE	ZIP	Paysa	AZ	85541	OCCUPATION	EMPLOYER					8/4	\$250.00	
LAST	FIRST	MI																										
Wilson	John + Sae																											
STREET ADDRESS																												
1005 S Corson City Ctr																												
CITY	STATE	ZIP																										
Paysa	AZ	85541																										
OCCUPATION	EMPLOYER																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"></td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI				STREET ADDRESS						CITY	STATE	ZIP				OCCUPATION	EMPLOYER							
LAST	FIRST	MI																										
STREET ADDRESS																												
CITY	STATE	ZIP																										
OCCUPATION	EMPLOYER																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"></td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI				STREET ADDRESS						CITY	STATE	ZIP				OCCUPATION	EMPLOYER							
LAST	FIRST	MI																										
STREET ADDRESS																												
CITY	STATE	ZIP																										
OCCUPATION	EMPLOYER																											
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		1485																									

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

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

SCHEDULE A-1

2. ID# 12-C-04	
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Michael Hughes for Mayor of Payson

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
6-25 Fundraiser	\$325.-	
6/28 Demote	20.2	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	345	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]

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

# CONTRIBUTIONS FROM POLITICAL COMMITTEES

# SCHEDULE B

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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



CANDIDATE LOANS

SCHEDULE C

1. Committee Name <i>Michael Hughes for Mayor of Payson</i>		2. ID #	
		<input checked="" type="checkbox"/>	Primary
		<input type="checkbox"/>	General
3. Report covering period from <u>6-1-16</u> thru <u>8-18-16</u>			
4. LOANS MADE OR GUARANTEED BY CANDIDATE		DATE RECEIVED	AMOUNT RECEIVED
NAME AND ADDRESS FROM WHOM RECEIVED			CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a. NAME, ADDRESS, CITY, STATE, AND ZIP <i>Michael Hughes</i>			
<i>200 W Roundup Payson AZ 85541</i>		<i>6-7-16</i>	<i>1,000<sup>00</sup></i>
DESCRIPTION <i>Loan to Campaign</i>			
b. NAME, ADDRESS, CITY, STATE, AND ZIP <i>Michael Hughes</i>			
<i>200 W Roundup Payson AZ 85541</i>			
DESCRIPTION <i>Loan to Campaign</i>		<i>6-18-16</i>	<i>500</i>
c. NAME, ADDRESS, CITY, STATE, AND ZIP			
DESCRIPTION			
d. NAME, ADDRESS, CITY, STATE, AND ZIP			
DESCRIPTION			
e. NAME, ADDRESS, CITY, STATE, AND ZIP			
DESCRIPTION			
f. NAME, ADDRESS, CITY, STATE, AND ZIP			
DESCRIPTION			
5. ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]			

# OTHER LOANS

# SCHEDULE C1

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

EXPENDITURES FOR OPERATING EXPENSES\*

SCHEDULE D

2. ID#	12-C-04
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Michael Heyles For Mayor of Payson

3. Report covering period from 6-1-16 thru 8-18-16

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Harland - Clark</u>	<u>6/1</u>	<u>\$38.39</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Checks</u>		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Vista Print</u>	<u>6/17</u>	<u>\$1,206.24</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Yard Signs + Business Cards</u>		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Walmart</u>	<u>6/20</u>	<u>\$85.89</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Supplies for Fundraiser</u>		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Safeway</u>	<u>6/20</u>	<u>\$76.59</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Supplies for Fundraiser</u>		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Walmart</u>	<u>6/24</u>	<u>\$78.10</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Supplies for Fundraiser</u>		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Safeway</u>	<u>6/24</u>	<u>\$34.76</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Supplies for Fundraiser</u>		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

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

EXPENDITURES FOR OPERATING EXPENSES\*

SCHEDULE D

2. ID#	12-C-04
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Michael Heyles For Mayor of Payson

3. Report covering period from 6-1-16 thru 8-18-16

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>Safeway</u>	<u>6/24</u>	<u>\$ 19.<sup>36</sup></u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Supplies for Fundraiser</u>		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>Dollar Tree</u>	<u>6/24</u>	<u>\$ 6.<sup>52</sup></u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Supplies for Fundraiser</u>		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>KMOG</u>	<u>7/12</u>	<u>\$ 720.<sup>00</sup></u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Radio Ads</u>		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>KMOG</u>	<u>7/26</u>	<u>\$ 240.<sup>00</sup></u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Radio Ads</u>		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>Round up</u>	<u>7/21</u>	<u>\$ 138.<sup>88</sup></u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>News Paper Ad</u>		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>Walmart</u>	<u>7/11</u>	<u>\$ 20.<sup>27</sup></u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Supplies for Signs</u>		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A)		

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

EXPENDITURES FOR OPERATING EXPENSES\*

SCHEDULE D

2. ID# <u>12-C-04</u>	
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Michael Heylos For Mayor of Payson

3. Report covering period from 6-1-16 thru 8-18-16

4 EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>KMOG</u>	<u>8/1</u>	<u>\$100.<sup>00</sup></u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Air Time on Radio</u>		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP  <u>Walmart</u>	<u>8/1</u>	<u>&lt; \$7.38</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Credit back on Srgn Supplies</u>		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A)		<u>2757.60</u>

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

# INDEPENDENT EXPENDITURES\*

## SCHEDULE D-1

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

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

\*SEE A.R.S. § 16-901(14).

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

\_\_\_\_\_  
Signature of Treasurer

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

# LOANS MADE BY REPORTING COMMITTEE

## SCHEDULE D-2

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

OFFSETS TO OPERATING EXPENSES \*

SCHEDULE D-3

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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



REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

# REPAYMENT OF ALL OTHER LOANS

## SCHEDULE D-5

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

# TRANSFERS TO OTHER POLITICAL COMMITTEES

## SCHEDULE D-6

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		

ANY OTHER DISBURSEMENT

SCHEDULE D-7

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4.	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]			

# IN-KIND CONTRIBUTIONS and EXPENDITURES

# SCHEDULE E

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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

OFFSETS TO CONTRIBUTIONS RECEIVED \*

SCHEDULE F-2

2. ID#	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]			

\* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

2. ID#

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

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