RECFINED

JUL 2 0 2024

CITY OF CHANDLER CITY CLERK COMMITTEE INFORMATION (required):



COMMITTEE ID NUMBER c21-02

| Committee Information: | Committee Name: | Cody Newcomb for Chandler Ci | ty Council | | |
|------------------------------|--|---------------------------------------|---|--|--|
| DATE INFORMATION (only if fi | ling as a candidate comm | nittee): | | | |
| Office Sought. | ☐ County Office: ☐ City/Town Office: Chandler City Council | : Chandler City Council | ☐ Special District Office: | | |
| Cumulative Report: | | | | | |
| ☐ Check here if this is the | e candidate committee's | irst, cumulative report for the elect | ion cycle. Also select appropriate Reporting Period below | | |
| Cumulative reporting period | od start date (which supe | ersedes the start date for the Rep | orting Period selected below): | | |
| TING PERIOD (check one): | | | | | |

| | REPORTING PERIOD | REPORT DUE |
|---|--|--------------------------------------|
| | 2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023 | February 26, 2023 to March 4, 2023 |
| | 2023 March Post-Election (Q1) Report (Local Only): February 26, 2023 to March 31, 2023 | April 1, 2023 to April 15, 2023 |
| | 2023 Quarter 1 Report: January 1, 2023 to March 31, 2023 | April 1, 2023 to April 17, 2023 |
| | 2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023 | April 30, 2023 to May 6, 2023 |
| | 2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023 | July 1, 2023 to July 15, 2023 |
| | 2023 Quarter 2 Report: April 1, 2023 to June 30, 2023 | July 1, 2023 to July 17, 2023 |
| | 2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023 | July 16, 2023 to July 22, 2023 |
| | 2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023 | October 1, 2023 to October 16, 2023* |
| | 2023 Quarter 3 Report: July 1, 2023 to September 30, 2023 | October 1, 2023 to October 16, 2023 |
| | 2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023 | October 22, 2023 to October 28, 2023 |
| | 2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023 | January 1, 2024 to January 16, 2024* |
| | 2023 Quarter 4 Report: October 1, 2023 to December 31, 2023 | January 1, 2024 to January 16, 2024* |
| | 2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024 | February 25, 2024 to March 2, 2024 |
| | 2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024 | April 1, 2024 to April 15, 2024 |
| | 2024 Quarter 1 Report: January 1, 2024 to March 31, 2024 | April 1, 2024 to April 15, 2024 |
| | 2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024 | May 5, 2024 to May 11, 2024 |
| | 2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024 | July 1, 2024 to July 15, 2024 |
| | 2024 Quarter 2 Report: April 1, 2024 to June 30, 2024 | July 1, 2024 to July 15, 2024 |
| 1 | 2024 July Pre-Primary Election Report: July 1, 2024 to July 13, 2024 | July 14, 2024 to July 20, 2024 |
| | 2024 July Post-Primary Election (Q3) Report: July 14, 2024 to September 30, 2024 | October 1, 2024 to October 15, 2024 |
| | 2024 Quarter 3 Report: July 1, 2024 to September 30, 2024 | October 1, 2024 to October 15, 2024 |
| | 2024 November Pre-General Election Report: October 1, 2024 to October 19, 2024 | October 20, 2024 to October 26, 2024 |
| | 2024 November Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024 | January 1, 2025 to January 15, 2025 |
| | Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date | Same Date of Termination |

FINANCIAL SUMMARY (required):

| \$1.26 50 | |
|--------------|------------|
| 30 | |
| ,0 | |
| \$O | |
| \$1.26 | |
| 5 | of referen |





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.

| Noah Mundt | Noah Mundt | |
|--|-------------------------------------|------|
| The state of the s | Noah Mundt (Jul 20, 2024 18:53 PDT) | |
| Printed Name of Committee Treasurer | Signature of Committee Treasurer | Date |

SUMMARY OF RECEIPTS (Schedule A):

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

SUMMARY OF DISBURSEMENTS (Schedule B):

| / | Disbursements | Cash | Equity |
|-----|--|------|--------|
| | Disbursements for Operating Expenses | | |
| 2. | Contributions Made | | |
| | (a) Candidate Committees | | |
| | (b) Political Action Committees | | |
| | (c) Political Parties | | |
| | (d) Partnerships | | |
| | (e) Corporations & Limited Liability Companies (PAC & Political Parties Only) | | |
| | (f) Labor Organizations (PAC & Political Parties Only) | | |
| | (g) Monetary Contributions Subtotal (add 2(a) through 2(f)) | | |
| | (h) Contribution Refunds Provided to the Reporting Committee | | |
| | (i) Monetary Contributions Total (subtract 2(h) from 2(g)) | | |
| 3. | Loans | | |
| | (a) Loans Made | | |
| | (b) Loan Guarantees Made | | |
| | (c) Forgiveness on Loans Made | | |
| | (d) Repayment of Loans Received | | |
| | (e) Accrued Interest on Loans Received | | |
| | (f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c)) | | |
| 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 | | |
| 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) | | |



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

SCHEDULE A(1)(a)

| | Individual Contr | ibutor Informatio | n | 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 | <u> </u> | Date Contribution Received | | | |
| | Street Address | | | - | | |
| 2 | City | State | ZIP | | | |
| | Occupation | Employer | | - | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | _ | | |
| 3 | City | State | ZIP | _ | | |
| | Occupation | Employer | | _ | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | - | | |
| 4 | City | State | ZIP | - | | |
| | Occupation | Employer | | _ | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | - | | |
| 5 | City | State | ZIP | _ | | |
| | Occupation | Employer | | - | | |
| | | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," l | line 1(a)) | | | |

*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____ of ____

COMMITTEE ID NUMBER

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 Cont | ributor Informatio | n | 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 | 1 | Date Contribution Received | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | <u> </u> | Date Contribution Received | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Occupation | Employer | <u> </u> | | | |
| | Name | I | Date Contribution Received | | | |
| | Street Address | | L | | | |
| 4 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | l | Date Contribution Received | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | many of Receipts " | line 1(c)) | 1 | | |
| | The total reserved this period to Suiti | mary or receipts, | | | | |

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

| _ | Candidate Committee | · Contributor Info | rmation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---|-----------|-----------------|---|---|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | | | | | | |
| 2 | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | mittee ID Number Date Contribution Received | | | | |
| r | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | | | | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | I mary of Receipts," I | ine 1(d)) | l | | |

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

| | 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 Contribution Receive | ed | | | |
| | Committee Name | l | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | - | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," I | ine 1(e)) | | | |

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

| / | | | | | | |
|---|---|---------------------------|-----------|-----------------|---|---|
| | Political Party Coi | ntributor Informat | ion | 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 | d | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed . | | | |
| | | Suic Commission (1990) | | | | |
| | | Committee Name | | | | |
| F | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sumi | mary of Receipts " I | ine 1(f)) | • | | |

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

| | Partnership Con | tributor Informatio | on | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---------------------------|------------|-----------------|---|---|
| | Partnership Name | | | | | |
| | Street Address | | | - | | |
| 1 | City | State | ZIP | - | | |
| | City | State | ZIF | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | - | | |
| | Gily | State | Zir | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | | | | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | <u> </u> | | |
| | | | | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | - | | |
| | 5., | | | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | E 4(-)) | l | | |
| | (transter the total received this period to "Sum | mary of Receipts," l | line 1(g)) | | | |

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

| | Corporation / LLC C | Contributor Inform | ation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---------------------------|------------|-----------------|---|---|
| | Corporation/LLC Name | | | | | |
| | | | | | | |
| | Street Address | | | | | |
| 1 | | T | 1 | _ | | |
| ' | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | - | | |
| | | | | | | |
| | Corporation/LLC Name | | | | | |
| | | | | | | |
| | Street Address | | | | | |
| 1 | | | | _ | | |
| 2 | City | State | ZIP | | | |
| | | | | _ | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Corporation/LLC Name | | | | | |
| | os.ps. alion 220 mano | | | | | |
| | Street Address | | | 1 | | |
| | | | | | | |
| 3 | City | State | ZIP | | | |
| | | | | _ | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Companies # LC Name | | | | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | - | | |
| | | | | | | |
| 4 | City | State | ZIP | = | | |
| | | | | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | | | | | | |
| | Corporation/LLC Name | | | | | |
| | | _ | | | | |
| | Street Address | Street Address | | | | |
| 5 | City | State | ZIP | - | | |
| | | | | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | 1 | | |
| L | | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | | | | |
| | (transter the total received this period to "Sum | mary of Receipts," I | line 1(h)) | | | |

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

| | Labor Organization | Contributor Inforn | nation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---------------------------|-----------|-----------------|---|---|
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | I ed | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | - | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Enter total only if last mage of eah - dul- | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," I | ine 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 |
|---|--|----------------------|----------------------------|-----------------|---|---|
| | Name | | Date Contribution Received | | | |
| | Street Address | | , | 1 | | |
| 1 | City | State | ZIP | - | | |
| | Occupation | Employer | l | | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | <u> </u> | - | | |
| 2 | City | State | ZIP | - | | |
| | Occupation | Employer | | - | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | _ | | |
| 3 | City | State | ZIP | _ | | |
| | Occupation | Employer | | | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | - | | |
| 4 | City | State | ZIP | _ | | |
| | Occupation | Employer | | _ | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | Street Address | | <u> </u> - | | |
| 5 | City | State | ZIP | - | | |
| | Occupation | Employer | | - | | |
| | | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," I | ine 1(j)) | | | |

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



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 | | . 0 | , | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| | Name | | Date Contribution Refunded | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| | 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 | | | |
| | Name | | Date Contribution Refunded | | | |
| | Street Address | reet Address | | | | |
| 5 | City | State | ZIP | _ | | |
| | ID Number (if applicable) | | Date of Original Contribution | \dashv | | |
| _ | Enter total only if last page of schedule | | | | | |

Schedule A(1)(I), page____ of___



LOANS RECEIVED: SCHEDULE A(2)(a)

| / | Lender I | nformation | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--|---------------------------------------|-----------------|---|---|
| | Lender Name | Date Loan Received | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (| I PACs and Political Parties Only) | | | |
| | Lender Name | Date Loan Received | | | | |
| | Street Address | <u> </u> | | | | |
| 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? (| 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) | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | ine 2(a)) | I. | | |

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



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

| | | nformation | | Amount Forgiven | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------|---------------------------|-----------------|---|---|
| | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | <u> </u> | | | |
| 2 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Lender Name | <u> </u> | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | l | | | |
| 5 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | | | | |

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



REPAYMENT ON LOANS MADE: SCHEDULE A(2)(c)

| | Borrower | Information | | Amount Repaid | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------|-------------------------|---------------|---|---|
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | - | | |
| | Original Amount Borrowed | Amount Still Outstanding | L | - | | |
| | Borrower Name | <u> </u> | Date Repayment Received | | | |
| | Street Address | | | - | | |
| 2 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | - | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Repayment Received | | | |
| | Street Address | | | _ | | |
| 5 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | _ | | |
| | Enter total only if last page of schedule | | | | | |
| | (transfer the total received this period to "Sum | mary of Receipts," I | line 2(c)) | | | |

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

INTEREST ACCRUED ON LOANS MADE: SCHEDULE A(2)(d)

| Borrower | Information | | Amount of Interest Accrued | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--|---|---|---|
| Borrower Name | | Date Interest Accrued | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Original Amount Borrowed | Amount Still Outstanding | 1 | | | |
| Borrower Name | I | Date Interest Accrued | | | |
| Street Address | | l | | | |
| City | State | ZIP | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | |
| Borrower Name | | Date Interest Accrued | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | |
| Borrower Name | | Date Interest Accrued | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | |
| Borrower Name | | Date Interest Accrued | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | |
| Enter total only if last page of schedule | | | | | |
| | Borrower Name Street Address City Original Amount Borrowed Borrower Name Street Address City Original Amount Borrowed | Street Address City State Original Amount Borrowed Amount Still Outstanding Borrower Name Street Address City State Original Amount Borrowed Amount Still Outstanding Borrower Name Street Address City State Original Amount Borrowed Amount Still Outstanding Borrower Name Street Address City State Original Amount Borrowed Amount Still Outstanding Borrower Name Street Address City State City State Original Amount Borrowed Amount Still Outstanding Borrower Name Street Address City State Original Amount Borrowed Amount Still Outstanding Borrower Name | Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Borrower Name Date Interest Accrued | Betrower Name Street Address City State Amount Stit Outstanding Betrower Name Date Interest Accrused Street Address City State City State Date Interest Accrused Date Interest Accrused Street Address City State Date Interest Accrused Date Interest Accrused | Borrower Information |

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

c21-02



STATE OF ARIZONA FRIMNET REFORMPAIGN

COMMITTEE ID NUMBER

| | | Payor Information | | Amount Rebated or Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--------------|--------------------------|--------------------|-----------------------------|----------------------------|---|---|
| | Payor Name | | Date Rebate/Refund Received | | | , |
| <u> </u> | Street Address | | I | | | |
| | City | State | ZIP | _ | | |
| <u> </u> | Original Purchase Amount | Reason for Refund/ | Rebate | _ | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | | _ | | |
| 2 | City | State | ZIP | _ | | |
| | | | | | | |
| | Original Purchase Amount | Reason for Refund/ | Rebate | | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | Street Address | | | | |
| 3 | City | State | ZIP | | | |
| | Original Purchase Amount | Reason for Refund/ | Rebate | | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | | _ | | |
| 4 | City | State | ZIP | | | |
| | Original Purchase Amount | Reason for Refund/ | Rebate | | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | | _ | | |
| 5 | City | State | ZIP | _ | | |
| | Original Purchase Amount | Reason for Refund/ | Rebate | _ | | |

Schedule A(3), page____ of ____

COMMITTEE ID NUMBER

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

Schedule A(4), page____ of ____



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

SCHEDULE A(5)(a)

| | Individual Contr | ibutor Informatio | n | 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 | | | <u> </u> | | |
| 2 | City | State | ZIP | - | | |
| | Occupation | Employer | | _ | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | - | | |
| 3 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | - | | |
| 4 | City | State | ZIP | <u> </u> - | | |
| 1 | Ony | Otale | 2 | | | |
| | Occupation | Employer | | | | |
| | Name | I | Date In-Kind Contribution Received | | | |
| | Street Address | | <u>I</u> | 1 | | |
| 5 | City | State | ZIP | 1 | | |
| | Occupation | Employer | <u> </u> | - | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," I | line 5(a)) | <u> </u> | | |

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

Schedule A(5), page____ of ___

COMMITTEE ID NUMBER

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

SCHEDULE A(5)(b)

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

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

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

COMMITTEE ID NUMBER c21-02

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

SCHEDULE A(5)(c)

| / | Candidate Committe | e Contributor Info | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|---------------------------|-----------------|---|---|--|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| | Sueet Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Received | = | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | | | | | |
| | Committee to Number | Date In-Kind Contribution | Necesved | | | |
| | Committee Name | | | | | |
| : | Street Address | | | | | |
| 3 | City | State | ZIP | - | | |
| | Committee ID Number | Date In-Kind Contribution | Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | _ | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Received | - | | |
| | Committee Name | | | | | |
| | Street Address | | | _ | | |
| 5 | City | State | ZIP | _ | | |
| _ | | | | _ | | |

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

| | Candidate Committee | 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 In-Kind Contribution | I Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | City State ZIP | | | | |
| | Committee ID Number | Date In-Kind Contribution | Received | | | |
| | Enter total only if last page of schedule | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," I | ine 5(d)) | | | |

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

| _ | / | Political Action Committe | ee Contributor Inf | formation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|----------|---|---|-----------------------------|-----------|-----------------|---|---|
| | | Committee Name | | | | | |
| | • | Street Address | | | | | |
| 1 | 1 | City | State | ZIP | | | |
| | • | Committee ID Number | Date In-Kind Contribution I | Received | | | |
| - | | Committee Name | | | | | |
| | - | Street Address | | | | | |
| 2 | 2 | City | State | ZIP | | | |
| | - | Committee ID Number | Date In-Kind Contribution | Received | | | |
| F | | Committee Name | | | | | |
| | - | Street Address | | | | | |
| 3 | 3 | City | State | ZIP | | | |
| | = | Committee ID Number | Date In-Kind Contribution | Received | | | |
| H | | Committee Name | | | | | |
| | - | Street Address | | | | | |
| 4 | 4 | City | State | ZIP | | | |
| | | Committee ID Number | Date In-Kind Contribution | Received | | | |
| F | | Committee Name | | | | | |
| | | Street Address | | | | | |
| 5 | 5 | City State ZIP | | | | | |
| | | Committee ID Number | Date In-Kind Contribution | Received | | | |
| \vdash | | Enter total only if last page of schedule (transfer the total received this period to "Sumi | | | | | |
| 1 | | (transfer the total received this period to "Sumi | mary of Receipts," li | ine 5(e)) | | | |

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

| Political Party Cor | ntributor Informat | ion | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---------------------|---|--|--|--|--|
| Committee Name | | | | | |
| eet Address | | | | | |
| у | State | ZIP | | | |
| mmittee ID Number | Date In-Kind Contribution | Received | | | |
| Committee Name | | | | | |
| eet Address | | | | | |
| у | State | ZIP | | | |
| mmittee ID Number | Date In-Kind Contribution | Received | | | |
| Committee Name | | | | | |
| eet Address | | | | | |
| у | State | ZIP | | | |
| mmittee ID Number | Date In-Kind Contribution | Received | | | |
| mmittee Name | | | | | |
| Street Address | | | | | |
| у | State | ZIP | | | |
| mmittee ID Number | Date In-Kind Contribution Received | | | | |
| mmittee Name | | | | | |
| Street Address | | | | | |
| City State ZIP | | | | | |
| mmittee ID Number | Date In-Kind Contribution | Received | | | |
| | | | | | |
| | et Address mittee ID Number mittee Name et Address | et Address State Date In-Kind Contribution mittee ID Number Date In-Kind Contribution mittee ID Number Date In-Kind Contribution mittee Name et Address State State Date In-Kind Contribution mittee ID Number Date In-Kind Contribution mittee ID Number Date In-Kind Contribution mittee Name et Address State State State State State State State Date In-Kind Contribution mittee ID Number Date In-Kind Contribution Date In-Kind Contribution mittee ID Number Date In-Kind Contribution Date In-Kind Contribution Date In-Kind Contribution | State ZIP mittee ID Number Date In-Kind Contribution Received State ZIP mittee Name et Address State ZIP Date In-Kind Contribution Received mittee Name et Address State ZIP Date In-Kind Contribution Received State ZIP mittee ID Number Date In-Kind Contribution Received State ZIP mittee ID Number Date In-Kind Contribution Received mittee ID Number Date In-Kind Contribution Received State ZIP mittee ID Number Date In-Kind Contribution Received State ZIP mittee ID Number Date In-Kind Contribution Received State ZIP mittee ID Number Date In-Kind Contribution Received | Interest Name Intere | Political Party Contributor Information Amount Received Reporting Period Witten Name Int Address State |

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

| , | | | | | | |
|---|--|--|-----------|-----------------|---|---|
| | Partnership Con | tributor 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 In-Kind Contribution | 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 | orporation 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 | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | I mary of Receipts," I | ine 5(g)) | 1 | | |

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

| Street / City Corpora Street / Corpora | | | | | Cumulative | Cumulative |
|--|---|---------------------------|-----------|-----------------|---------------------------------|-------------------------------|
| Street / City Corpora Street / Corpora | Corporation / LLC C | Contributor Inform | ation | Amount Received | Amount this Reporting Period | Amount this Election Cycle |
| Corpor: Street / Corpor: Street / Corpor: Street / Corpor: Street / Corpor: Cor | ration/LLC Name | | | | | |
| Corpora | Address | | | | | |
| Corpor: Street / Corpor: | | State | ZIP | | | |
| Street / City Corpora Street / Corpora | oration Commission File Number | Date In-Kind Contribution | Received | | | |
| Corpora Street A Corpora Corpora Street A Corpora Corpora Corpora Corpora Corpora Corpora | oration/LLC Name | | | | | |
| Corpora Street / Corpora | Address | | | | | |
| Corpora Street / Corpora Corpora Street / Corpora Corpora Corpora | | State | ZIP | | | |
| Street / Corpor. Corpor. Street / City Corpor. | oration Commission File Number | Date In-Kind Contribution | Received | | | |
| Corpora Corpora Street A City Corpora | oration/LLC Name | | | | | |
| Corpora Corpora Street / City Corpora | Address | | | | | |
| Corpora Street / City Corpora | | State | ZIP | | | |
| Street / City Corpora | oration Commission File Number | Date In-Kind Contribution | Received | | | |
| City | oration/LLC Name | | | | | |
| Corpora | Address | | | | | |
| | | State | ZIP | | | |
| Corpora | oration Commission File Number | Date In-Kind Contribution | Received | | | |
| | Corporation/LLC Name | | | | | |
| Street / | Street Address | | | _ | | |
| 5 City | | State | ZIP | | | |
| Corpora | ration Commission File Number | Date In-Kind Contribution | Received | | | |
| Ente | er total only if last page of schedule sfer the total received this period to "Sum | many of December 111 | ing E/h)) | | | |

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

| / | Labor Organizat | ion Contributor Infor | mation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---------------------------|------------|-----------------|---|---|
| | Labor Organization Name | | | | | , |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | n Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | n Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | n Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | n Received | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | n Received | | | |
| _ | Enter total only if last page of schedu | ule | | | | |
| | Enter total only if last page of schedu (transfer the total received this period to | Summary of Receipts," | line 5(i)) | | | |

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 |
| | | Name | | Date In-Kind Contribution Received | | | |
| | - | Street Address | | <u> </u> | | | |
| 1 | 1 | City | State | ZIP | | | |
| | | Accept on Description Contributed | | | | | |
| | | Asset or Property Contributed | | | | | |
| | | Name | | Date In-Kind Contribution Received | | | |
| | - | Street Address | | | | | |
| 2 | 2 | City | State | ZIP | | | |
| | | | | | | | |
| | | Asset or Property Contributed | | | | | |
| | | Name | | Date In-Kind Contribution Received | | | |
| | - | Street Address | | | | | |
| 3 | 3 | City | State | ZIP | | | |
| | | | | | | | |
| | | Asset or Property Contributed | | | | | |
| | | Name | | Date In-Kind Contribution Received | | | |
| | - | Street Address | | | | | |
| 4 | 1 | City | State | ZIP | | | |
| | | o.,y | | | | | |
| | | Asset or Property Contributed | | | | | |
| | | Name | | Date In-Kind Contribution Received | | | |
| | ļ | Street Address | | | | | |
| 5 | 5 | City | State | ZIP | | | |
| | | Oily . | Ciale | | | | |
| | | Asset or Property Contributed | | | | | |
| \Box | | Enter total only if last page of schedule (transfer the total received this period to "Sumr | mary of Possints " | line 5(i)) | l | | |
| \ <u></u> | | firansier the total received this behod to "Sumi | | edule A(5)(j), page of | <u> </u> | | / |



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

SCHEDULE A(6)

| | Source I | nformation | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------------|--------------------------------|-----------------|---|---|
| | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | <u> </u> | - | | |
| 1 | City | State | ZIP | _ | | |
| | Type of Item Donated | <u> </u> | 1 | _ | | |
| | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | 1 | _ | | |
| 2 | City | State | ZIP | - | | |
| | Type of Item Donated | <u> </u> | 1 | _ | | |
| | Name | Date In-Kind Donation Received | | | | |
| • | Street Address | Street Address | | | | |
| 3 | City | State | ZIP | | | |
| | Type of Item Donated | | - | | | |
| | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | 1 | | | |
| 4 | City | State | ZIP | | | |
| | Type of Item Donated | <u> </u> | | | | |
| | Name | | Date In-Kind Donation Received | | | |
| | 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 "Sum | | E O | | | |
| | (transfer the total received this period to "Sum | mary of Receipts," | line o) | | | |

Schedule A(6), page____ of ____



EXTENSIONS OF CREDIT RECEIVED: SCHEDULE A(7)(a)

| | Creditor | Information | | Amount of Credit Extended | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|--------------------|-----------------------------|------------------------------|---|---|
| | Name | | | | | |
| | Street Address | | | _ | | |
| 1 | City | State | ZIP | | | |
| | Services or Goods Provided on Credit | | Date of Extension of Credit | | | |
| | Name | | | | | |
| | Street Address | | | _ | | |
| 2 | City | State | ZIP | | | |
| | Services or Goods Provided on Credit | | Date of Extension of Credit | | | |
| | Name | | | | | |
| | Street Address | _ | | | | |
| 3 | City | State | ZIP | _ | | |
| | Services or Goods Provided on Credit Date of Extension of Cred | | | | | |
| | Name | | | | | |
| | Street Address | | | _ | | |
| 4 | City | State | ZIP | _ | | |
| | Services or Goods Provided on Credit | | Date of Extension of Credit | _ | | |
| | Name | Name | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | _ | | |
| | Services or Goods Provided on Credit | | Date of Extension of Credit | _ | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | many of Possints " | lino 7(a)) | | | |
| | francisci ine iotal received tilis beliod to Sulli | mary or neceipis, | <i>r</i> (a <i>jj</i> | | <u> </u> | |

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



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

| / | Creditor | Information | | Payment Amount on Credit Extended | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------|--------------------------------------|---|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | 1 | Date of Original Extension of Credit | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| | Name | | | | | |
| | Street Address | net Address | | | | |
| 3 | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit Date of Original Extension of Cred | | | | | |
| | 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 | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," | line 7(b)) | | | |

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

| | Payor C | ommittee Informat | 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 Exp | Dense (if applicable) | | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Exp | pense (if applicable) | | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Exp | pense (if applicable) | | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 4 | 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 schedule | | | | | |

Schedule A(8), page____ of ____



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

| | Payor Information | | | Payment Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------|--------------|----------------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Services or Goods Purchased | | Payment Date | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Services or Goods Purchased | | Payment Date | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Services or Goods Purchased | Payment Date | | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 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 | l | | | | |

Schedule A(9), page____ of ____



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

| / | | | | 1 | 1 1 | |
|---|--|--------|------------------------|--------|---|---|
| | Info | mation | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| | Name | | | | | |
| 3 | Street Address | | | _ | | |
| | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | _ | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | _ | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | _ | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | | | | |

Schedule A(10), page____ of ____

COMMITTEE ID NUMBER

TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

| | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|---------------------------------------|
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Total (transfer the total received this period to "Summary of Receipts," line 11) | | |

Schedule A(11), page____ of ____



MISCELLANEOUS RECEIPTS: SCHEDULE A(12)

| _ | Source I | nformation | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|----------------------|--------------|--------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Receipt Type | | Receipt Date | | | |
| | Name | | l | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Receipt Type | | Receipt Date | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 3 | | T | I | | | |
| | City | State | ZIP | | | |
| | Receipt Type Receipt Date | | | | | |
| | Name | | l | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Receipt Type | | Receipt Date | | | |
| _ | Name | | | | | |
| | Street Address | | | | | |
| 5 | | I _a | ZIP | | | |
| | City | State | ZIP | | | |
| | Receipt Type | | Receipt Date | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts " I | ine 12) | • | | |
| | ' | ., | =, | | | |

Schedule A(12), page____ of ____



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

| • | ŀ | Recipient Information | | Amount Paid | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|-------------------------------------|--|--|-----------------|---|---|
| | Name | Disbursement Da | ate | | | 1 |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Operating Expense Paid | | pose? (PACs and Political Parties On | □ Cash □ Credit | | |
| | Name | Disbursement Da | ate | | | |
| l | Street Address | | | | | |
| | City | State | State ZIP | | | |
| ļ | Type of Operating Expense Paid | | | ☐ Cash☐ Credit | | |
| | Type of Operating Expense Fallu | Non-Electoral Purpose? (PACs and Political Parties Only) | | y | | |
| | Name | Disbursement Da | Disbursement Date | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Type of Operating Expense Paid | Non-Electoral Purpose? (PACs and Political Parties Only) | | ☐ Cash☐ Credit | | |
| | Name | Disbursement Date | | | | |
| | Street Address | Address | | | | |
| | City | State | ZIP | | | |
| | Type of Operating Expense Paid | Non-Electoral Puri | pose? (PACs and Political Parties On | ☐ Cash☐ Credit | | |
| | Type of Operating Expense Falu | | Non-Electoral Purpose? (PACs and Political Parties Only) | | | |
| | Name | Disbursement Da | ate | | | |
| | Street Address | · | | | | |
| | City | State | ZIP | □ Cash | | |
| | Type of Operating Expense Paid | Non-Electoral Pur | pose? (PACs and Political Parties On | □ Credit | | |
| l | Enter total only if last page of so | 1 | | | | |

Schedule B(1), page____ of ____



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

| / | Candidate Committe | ee Recipient Infor | mation | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---------------------------------|--------------------|-----------------------|---|---|
| | Committee Name | | | | Troporting Fortou | Licetion Cycle |
| | Street Address | | | | | |
| 1 | City | State | ZIP | ПСоор | | |
| | Committee ID Number | Date Contribution Made | ı | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | D Number Date Contribution Made | | | | |
| | Committee Name | | | | | |
| _ | Street Address | | | | | |
| 3 | City | State | ZIP | □ Cash | | |
| | Committee ID Number Date Contribution Made | | | ☐ Credit | | |
| | Committee Name | | | | | |
| 4 | Street Address | Street Address | | | | |
| 4 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | □ Credit | | |
| | | Committee Name | | | | |
| 5 | | Street Address | | | | |
| - | City | State | ZIP | ☐ Cash☐ Credit | | |
| | Committee ID Number | Date Contribution Made | | Li Ofedit | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Su | mmary of Disbursen | ments," line 2(a)) | | | |



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

| / | Political Action Con | nmittee Recipient In | formation | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|------------------------|-----------|-----------------------|---|---------------------------------------|
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | □ Credit | | |
| | Committee Name | l l | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | El Cash | | |
| | 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 | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | □ Casii | | |
| | Committee Name | | | | | |
| | Street Address | Street Address | | | | |
| 5 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | I | ☐ Credit | | |
| | Enter total only if last page of schedu (transfer the total disbursed this period to | a | | ļ | | |



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

| | Political Party R | ecipient Information | on | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|-------------------------------|-----|-----------------------|---|---|
| | Committee Name Street Address | | | | , , | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| 2 | Street Address City State ZIP | | | | | |
| | City Committee ID Number | State Date Contribution Made | ZIP | □ Cash □ Credit | | |
| | Committee Name | Committee Name | | | | |
| 3 | Street Address | | | | | |
| | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | □ Credit | | |
| | Committee Name Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| 5 | Street Address | | | | | |
| | City Committee ID Number | State Date Contribution Made | ZIP | ☐ Cash☐ Credit | | |
| _ | Enter total only if last page of schedule (transfer the total disbursed this period to "Sur | | | | | |



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

| | Partner | ship Recipient Informa | ation | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|-----|---|------------------------|-------|-----------------------|---|---|
| | Partnership Name | | | | 1 3 | |
| • | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| • | Corporation Commission File Number | Date Contribution Ma | ade | □ Credit | | |
| | Partnership Name | | | | | |
| • | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution M | ade | □ Cash □ Credit | | |
| | Partnership Name | | | | | |
| 3 - | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution M | ade | □ Cash □ Credit | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| ļ | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution M | ade | □ Cash □ Credit | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| , | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution M | ade | ☐ Cash☐ Credit | | |
| 4 | Enter total only if last page of sc (transfer the total disbursed this perio | hodulo | | | | |



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

| | Corporation | n / LLC Recipient In | formation | 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 Contribution | Made | □ Cash □ Credit | | | |
| | Corporation/LLC Name | <u> </u> | | | | | |
| | Street Address | | | | | | |
| 2 | City | State | ZIP | C Cook | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Casn □ Credit | □ Cash □ Credit | | |
| | Corporation/LLC Name | | | | | | |
| | Street Address | | | | | | |
| 3 | City | State | ZIP | C Cook | | | |
| | Corporation Commission File Number | Date Contribution | Made | ☐ Cash☐ Credit | | | |
| | Corporation/LLC Name | <u> </u> | | | | | |
| | Street Address | Street Address | | | | | |
| 4 | City | State | ZIP | C Cook | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | | |
| | Corporation/LLC Name | Corporation/LLC 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 | l nedule | | l | | | |



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

| | Labor Organ | nization Recipient In | formation | Amount Contributor | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------------------|------------------------|-----------------------|---|---|
| | Labor Organization Name Street Address | | | | , , | |
| | | | | | | |
| 1 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 2 | State ZIP | | | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Labor Organization Name | <u> </u> | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | ☐ Cash☐ Credit | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | ПСоор | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Labor Organization Name | 1 | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | C Cook | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| _ | Enter total only if last page of sch (transfer the total disbursed this perio | l nedule d to "Summarv of Disb | ursements." line 2(f)) | | | |



CONTRIBUTION REFUNDS RECEIVED: SCHEDULE B(2)(h)

| 1 c c c s 2 c c | Committee Name Street Address City Committee ID Number Committee Name | r Information | Date Refund Received ZIP Date of Original Contribution Date Refund Received | Amount Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|-----------------|--|----------------------|--|-----------------|---|---|
| 1 c c c s 2 c c | Committee ID Number Committee Name | State | ZIP Date of Original Contribution | - | | |
| 1 c | committee ID Number Committee Name Street Address | State | Date of Original Contribution | _ | | |
| 2 0 | Committee ID Number Committee Name Street Address | State | Date of Original Contribution | _ | | |
| 2 0 | Committee Name Street Address | | | | | |
| 2 0 | Street Address | | Date Refund Received | | | |
| 2 0 | | | | | | |
| | Tity . | Street Address | | _ | | |
| c | ony . | State | ZIP | | | |
| | Committee ID Number | | Date of Original Contribution | | | |
| С | Committee Name | | Date Refund Received | | | |
| s | Street Address | | | _ | | |
| 3 0 | City | State | ZIP | | | |
| С | Committee ID Number | | Date of Original Contribution | | | |
| С | Committee Name | Date Refund Received | | | | |
| S | Street Address | | | | | |
| 4 0 | Dity | State | ZIP | _ | | |
| | | | Date of Original Contribution | | | |
| | Committee ID Number | | | | | |
| C | Committee Name | | Date Refund Received | | | |
| | Street Address | | | | | |
| 5 0 | City | State | ZIP | | | |
| С | Committee ID Number | | Date of Original Contribution | | | |
| E | Enter total only if last page of schedule transfer the total disbursed this period to "Sun | nmany of Disburson | nents " line 2/h)) | 1 | | |

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



LOANS MADE: SCHEDULE B(3)(a)

| | Borrower | Information | | Amount Loaned | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|----------------------|-----------|---------------|---|---|
| | Borrower Name Street Address | | | | | |
| | | | | | | |
| 1 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| | Borrower Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | antor/Endorser Name Date Loan Made | | | | | |
| | Borrower Name | | | | | |
| ١ | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| | Borrower Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| | Borrower Name | | | | | |
| _ | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," l | ine 3(a)) | | | |

Schedule B(3)(a), page___of ___



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

| / | Guaranto | r Information | | Amount Guaranteed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|----------------------|-----------|----------------------|---|---|
| | Guarantor Name | | | | | |
| | Street Address | eet Address | | | | |
| 1 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Guarantor Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | tate ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Guarantor Name | | | | | |
| S | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Guarantor Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Guarantor Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts " I | ine 3/h)) | | | |

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FORGIVENESS ON LOANS MADE: SCHEDULE B(3)(c)

| / | Borrower | Information | | Amount Forgiven | Cumulative Amount this | Cumulative Amount this |
|---|---|--------------------------|-----------------------|-----------------|---------------------------|---------------------------|
| | | | T | | Reporting Period | Election Cycle |
| | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 1 | | T | T | | | |
| ' | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Borrower Name | I | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Forgiveness Made | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sur | nmary of Disbursen | nents," line 3(c)) | | | |

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



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

| | Lender I | nformation | | Amount Repaid | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|--------------------------|---------------------|---------------|---|---|
| | Lender Name | | Date Repayment Made | | | |
| | Street Address | | l | | | |
| 1 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Lender Name | <u>I</u> | Date Repayment Made | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Lender Name | | Date Repayment Made | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Lender Name | | Date Repayment Made | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | _ | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Lender Name | | Date Repayment Made | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Enter total only if last page of school de | | | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sur | nmary of Disbursen | nents," line 3(d)) | | | |

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



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

| | Lender I | nformation | | Amount of Interest Accrued | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|--------------------------|-----------------------|-------------------------------|---|---|
| | Lender Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | - | | |
| | Original Amount Borrowed | Amount Still Outstanding | | - | | |
| | Lender Name | <u> </u> | Date Interest Accrued | | | |
| | Street Address | | <u> </u> | | | |
| 2 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | 1 | | |
| | Lender Name | | Date Interest Accrued | | | |
| | Street Address | | | _ | | |
| 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 | | - | | |
| | Enter total only if last page of schedule | | | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sur | nmary of Disbursen | nents," line 3(e)) | | | |

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

| / | Red | sipient Information | | Amount Rebated / Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|-------------------------|--------------------------|------------------------------|---|---|
| | Name of Original Payor | | Date Rebate/Refund Made | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Date of Original Payment | | | |
| | Name of Original Payor | | Date Rebate/Refund Made | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Date of Original Payment | | | |
| | Name of Original Payor | | Date Rebate/Refund Made | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Name of Original Payor | | | |
| | Name of Original Payor | | Date Rebate/Refund Made | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Name of Original Payor | | | |
| | Name of Original Payor | | Date Rebate/Refund Made | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Name of Original Payor | | | |
| | Corporation Commission File Number (if applicable) Enter total only if last page of sche (transfer the total disbursed this period | edu | ıle | ıle | ıle | ıle |

Schedule B(4), page____ of ____



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

| | Candidate Committe | e Recipient Inforr | 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 Contribution I | 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 | <u> </u> | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Made | | | |

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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 | | | | | |
| 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 | | | | | |
| | 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 schodule | | | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sur | mmary of Disbursen | nents," line 5(b)) | | | |

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

| / | | | | | | |
|---|---|---------------------------|-----------|-----------------------|---|---|
| | Political Party Ro | ecipient Information | on | 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 Contribution | I Made | | | |
| | Committee Name | <u>I</u> | | | | |
| | 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 "Sur | | | | | |

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

| / | | | | 1 | 1 1 | |
|---|---------------------------------------|-------------------------|----------|-----------------------|---|---|
| | Partnersh | nip Recipient Informat | ion | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| | Partnership Name | | | | - | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contributi | on Made | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribut | ion Made | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribut | ion Made | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribut | ion Made | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribut | ion Made | | | |
| _ | Enter total only if last page of sche | | | | | |

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 | | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | Made | | | |
| | 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 "S | | | | | |

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 | Made | | | |
| | Labor Organization Name | | | | | |
| - | Street Address | | | | | |
| 2 | State ZIP | | 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 | Made | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 4 | | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | Made | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| ŀ | Corporation Commission File Number | Date In-Kind Contribution | I. Made | | | |
| + | Enter total only if last page of schedule (transfer the total disbursed this period to "Su | mmany of Dishurses | nents " line 5/f\\ | <u> </u> | | |

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



INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

| | Expenditure | Recipient Informa | tion | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--|-------------------------------------|-----------------------|---|---------------------------------------|
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Candidate(s) Supported (including % supported) | Candidate(s) Opposed (in | ncluding % opposed) | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | | □ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | - | | |
| | Candidate(s) Supported (including % supported) | Candidate(s) Opposed (in | ncluding % opposed) | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | | _ □ Credit | | |
| | Recipient Name | Recipient Name | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | - | | |
| | Candidate(s) Supported (including % supported) | Candidate(s) Opposed (in | ncluding % opposed) | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | | _ □ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | Street Address | | | | |
| 4 | City | State | ZIP | | | |
| • | Candidate(s) Supported (including % supported) | Candidate(s) Opposed (including % opposed) | | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | Office Sought | _ □ Credit | | |

Schedule B(6), page____ of ____



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

| | Expenditure Recipient Information | | | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---|-------------------------------------|-----------------------|---|---------------------------------------|
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) | Opposed (including % opposed) | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Ye | ar | ☐ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | + | | |
| 2 | City | State | ZIP | + | | |
| _ | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) | Opposed (including % opposed) | | | |
| | Date of First Publication, Display, Delivery, or Broadcast Election Month/Year | | ar | ☐ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | + | | |
| 3 | City | State | ZIP | - | | |
| • | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) | Opposed (including % opposed) | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Yea | ar | ☐ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | - | | |
| 4 | City | State | ZIP | - | | |
| - | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) Opposed (including % opposed) | | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Yea | ar | _ □ Credit | | |
| _ | Enter total only if last page of schedu | | | | | |

Schedule B(7), page____ of ____



RECALL EXPENDITURES MADE: SCHEDULE B(8)

| / | Expenditure F | Recipient Informatio | on | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|-----------------------------|-------------------------------------|-----------------------|---|---|
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | _ | | |
| 1 | City | State | ZIP | _ | | |
| | Supporting or Opposing Issuance of Recall Order? | Candidate Sought to be Reca | alled | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Office Held | | - □ Credit | | |
| | Recipient Name | I. | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | L | - | | |
| 2 | City | State | ZIP | - | | |
| | Supporting or Opposing Issuance of Recall Order? | Candidate Sought to be Rec | alled | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast Office Held | | | . □ Credit | | |
| | Recipient Name | <u> </u> | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | _ | | |
| 3 | City | State | ZIP | _ | | |
| | Supporting or Opposing Issuance of Recall Order? | Candidate Sought to be Reca | <u>l</u> alled | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Office Held | | □ Credit | | |
| | Recipient Name | <u> </u> | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | _ | | |
| 4 | City | State | ZIP | _ | | |
| | Supporting or Opposing Issuance of Recall Order? | Candidate Sought to be Reco | L alled | □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Office Held | | □ Credit | | |
| _ | Enter total only if last page of schedul (transfer the total disbursed this period to "S | <u> </u> | | 1 | | |

Schedule B(8), page____ of ____



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

| | Benefit | ted Candidate | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|---------------------------|-----------------------|----------|---|---|
| | Candidate Name | | Date Benefit Provided | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Type of Benefit Provided | | | | | |
| | Notes: | | | | | |
| | Candidate Name | | Date Benefit Provided | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Type of Benefit Provided | | | | | |
| | 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: | | | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "S | e summary of Disbursen | nents," line 9) | <u> </u> | | |

Schedule B(9), page____ of ____

COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

| Recipient Committee Information | | | n | Payment Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---------------------------------|---|------------------------|------------------|-----------------|---|---------------------------------------|
| | Committee Name | | Payment Date | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Expense | (if applicable) | □ Credit | | |
| | Committee Name | 1 | Payment Date | | | |
| | Street Address | | 1 | | | |
| 2 | City | State | ZIP | □ Cash | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Expense | (if applicable) | □ Credit | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | 1 | | | |
| 3 | City | State | ZIP | II Cook | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Expense | (if applicable) | □ Cash □ Credit | | |
| | Committee Name | Payment Date | | | | |
| | Street Address | | <u> </u> | | | |
| 4 | City | State | ZIP | T 0 l | | |
| | Date of Joint Fundraising Event (if applicable) | Type of Shared Expense | (if applicable) | □ Cash □ Credit | | |
| | Committee Name | | Payment Date | | | |
| | Street Address | | 1 | | | |
| 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 schedu | e e | | | | |
| | (transfer the total disbursed this period to " | Summary of Disburser | ments," line 10) | | | |

Schedule B(10), page____ of ____



REIMBURSEMENTS MADE: SCHEDULE B(11)

| | Recipie | nt Information | | Reimbursement Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|--------------------|--------------------|-------------------------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Services or Goods Reimbursed | | Reimbursement Date | □ Credit | | |
| | Name | | · | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | □ Cash | | |
| | Services or Goods Reimbursed | - | Reimbursement Date | ☐ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | □ Cash | | |
| | Services or Goods Reimbursed | Reimbursement Date | ☐ Cash | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | □ Cash □ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Services or Goods Reimbursed Reimbursement Date | | | □ Cash □ Credit | | |



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

| | Debt In | 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 | l | Date that Debt Accrued | | | |
| | Name | | | | | |
| | Street Address | | | - | | |
| 2 | City | State | ZIP | - | | |
| | Type of Account Payable or Debt Owed | | Date that Debt Accrued | - | | |
| | Name | <u> </u> | | | | |
| | Street Address | - | | | | |
| 3 | City | State | ZIP | - | | |
| | Type of Account Payable or Debt Owed | Date that Debt Accrued | - | | | |
| | Name | | | | | |
| | Street Address | | | - | | |
| 4 | City | State | ZIP | - | | |
| | Type of Account Payable or Debt Owed | | Date that Debt Accrued | - | | |
| | Name | | | | | |
| | Street Address | | | - | | |
| 5 | City | State | ZIP | - | | |
| | Type of Account Payable or Debt Owed | I | Date that Debt Accrued | - | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | | | | |
| | (transfer the total received this period to "Sum | mary of Receipts," I | ine 12) | | | |

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COMMITTEE ID NUMBER

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

| | I | I |
|---|---|--|
| | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Recipient of Surplus Monies / Source of Transferred Debt | | |
| Total (transfer the total disbursed this period to "Summary of Disbursements," line 13) | | |

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MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

| | | pient Informatior | 1 | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|----------------------------|-----------------------|-----------------|---|---|
| | Name Street Address | | | | | 1 |
| 1 | 1 City | | ZIP | | | 1 |
| | Disbursement Type | <u> </u> | Disbursement Date | □ Cash □ Credit | | |
| | Name | | | | | |
| 2 | Street Address City | | ZIP | | | 1 |
| | Disbursement Type | | Disbursement Date | □ Cash □ Credit | | 1 |
| | Name | | | | | |
| 3 | Street Address | 710 | | | 1 | |
| | Disbursement Type | ZIP Disbursement Date | □ Cash □ Credit | | 1 | |
| | Name | | | | | |
| | Street Address | | | | 1 | |
| 4 | City | | ZIP | □ Cash | | 1 |
| | Disbursement Type Name | Disbursement Date | Li Gredit | | | |
| | Street Address | Street Address | | | | 1 |
| 5 | 5 City | State | ZIP | □ Cash | | l |
| | Disbursement Type | , | Disbursement Date | □ Credit | | |
| | Enter total only if last page of sched (transfer the total disbursed this period t | dule o "Summary of Disl | oursements," line 14) | | | |

Schedule B(14), page____ of ____

COMMITTEE ID NUMBER

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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