FOR OFFICE USE ONLY AUG 2 0 2014 CITY CLERK 3A. ID# Primary General

#### **POLITICAL COMMITTEE** CITY/TOWN OF CAMPAIGN FINANCE REPORT 2014 August/November Regular Election

Committee to Elect Jeni Ik Havasu Cuch Phone 2. Sponsoring Organization or Candidate and office Name of Candidate and Office Sought (if applicable) E-Mail Address Fax# 4. REPORTING PERIOD (Please check appropriate box) **DUE BETWEEN** January 31 Report - For Period of \_\_\_ \_\* thru December 31, 2013 ................................... January 1, 2014 and January 31, 2014 \*\*January 31, Report - For Period of November 25, 2014 thru December 31, 2015 ................................ January 1, 2016 and January 31, 2016 SUMMARY Column A Column B 5. Total This Reporting Election Period Total To Date Period Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee) Cash on Hand at the Beginning of this Reporting Period 5b Total Receipts (from corresponding columns on Detailed Summary Page, Line 8) Subtotal [add Lines b and c for Column A and add lines a and c for Column B] Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines] Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)

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

Cash on Hand at Close of Reporting Period [Subtract

Line 6b from Line 5d]

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

#### **DETAILED SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS	2. ID#	
1. Committee Name: Committee to Elect Jeni Cote	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Primary
3. Report covering period from 6-1-14 Thru 8-14-14		General
RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	450 00	45000
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	24000	24000
(c) Political Committees (Total from Schedule B)		270
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	69000	69000
(e) Refund of contributions (Total from Schedule F-2).		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	69000	69000
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	600 "	600"
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]	600"	600''
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]	1290"	1290"
DISBURSEMENTS		
		-
9. Expenditures for operating expenses (Total from Schedule D)	600"	600"
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	600"	600"
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]	600"	600''
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	1200 22	1200 37
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	1200 32	1200 02
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and complete.	to the best of my knowledge a	nd belief it is true and
Kristal Jacob		
Type or Print Name of Treasure		
$\mathcal Q$	10-14	

Signature of Treasurer or Candidate or Designating Individual

Page 2

#### CONTRIBUTIONS more than \$50 - from INDIVIDUALS\*

### SCHEDULE A

		2. ID#	
			Primary
	/		General
1. Committee Name Committee to Elect Jeni Co	oke		
3. Report covering period from 6-1-14	_thru <i>&amp;-14-</i>	14	
<u> </u>			<del></del>

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF	CONTRIBUTOR		THIS PERIOD	CAMPAIGN TO DATE
4a.	RI/ey Brian	MI [}]		2/:	טיט
	CITY STATE	ZIP	6-25-14	250	250
	LHC AZ OCCUPATION BANKER	86406 EMPLOYER MSBank			
b.	Jacob Kristal	M			
	STREET ANDRESS  CITY STATE	ZIP	7-9-14	200 00	200 00
	LHC AZ OCCUPATION Accountant	86406 EMPLOYER K. Jacob Accounting	· •		
C.	LAST FIRST	K- Jacob Mccounting			
		•••			
	STREET ADDRESS				
	CITY STATE	ZIP			
	OCCUPATION	EMPLOYER			
đ.	LAST FIRST	Mi			
	STREET ADDRESS				
	CITY STATE	ZIP	-		
	OCCUPATION	EMPLOYER			
е.	LAST FIRST	MI			
	STREET ADDRESS				
	CITY STATE	ZIP			
	OCCUPATION	EMPLOYER			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last ; Summary Page Line 4(z), Column A]	page of Schedule A, transfer total to Detailed		450 00	450 00

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

## SCHEDULE A-1

			2. 10	#
				Primary
1. Committee Name <u>Comm</u>	Hee to Elec:	+ Jeni Coke		General
3. Report covering period from _	6-1-14	thru_	8-14-14	/

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
Seposit 6/24/14	20 00	20 °V
Seposet 7/10/14	180 00	180 °
Suposit 7/10/14	40 07	40 00
5 YOTH TUS DEPLOYED The section had be partially Detailed Suppose Page Line 4(b)		6. CUMMULATIVE TOTAL THIS
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	240 00	CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B}

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

# CONTRIBUTIONS FROM POLITICAL COMMITTEES

### SCHEDULE B

2. ID#	
	Primary
	General

	1 Committee Name		L	
	i. Committee Name_		········	
	3. Report covering pe	riod fromthru		
4		CONTRIBUTIONS	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	II	DENTITY OF CONTRIBUTOR AND DATE RECEIVED	THIS PERIOD	CAMPAIGN TO DATE
4a	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
b.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
C.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP	****	
	DATE RECEIVED			
e.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF I	AST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to line 4(c), Column A]		

	CANDIDATE LOANS			SCHEDULE C		
1.				**		
	Committee to Elect Jeni Coke			Primary		
				General		
3.	Report covering period from $6-7-14$ thru $8$	-14-14				
4.	LOANS MADE OR GUARANTEED BY CANDIDATE	DATE	AMOUNT	CUMULATIVE		
	NAME AND ADDRESS FROM WHOM RECEIVED	RECEIVED	RECEIVED	TOTAL THIS CAMPAIGN TO DATE		
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP					
		7/16/14	600 "	600"		
	DESCRIPTION SIGNS ON The Cheap.					
b.	NAME, ADDRESS, CITY, STATE, AND ZIP					
	DESCRIPTION					
c.	NAME, ADDRESS, CITY, STATE, AND ZIP					
	DESCRIPTION					
d.	NAME, ADDRESS, CITY, STATE, AND ZIP					
	DESCRIPTION					
e.	NAME, ADDRESS, CITY, STATE, AND ZIP					
	DESCRIPTION					
f.	NAME, ADDRESS, CITY, STATE, AND ZIP					
	DESCRIPTION					
	DECOME TION					
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAG [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), C	E OF SCHEDULE C	600"	600"		

#### OTHER LOANS

## SCHEDULE C1

Primary General

1.	Committee Name COMMITTEL TO Elect VLM COK	<u>e</u>	·		
3.	Report covering period from 6-1-14 thru \$ 1414				
4	ALL OTHER LOANS  NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		·		
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# .				
	DESCRIPTION				
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		·		
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION				
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION				
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION				
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Page, Line 5(a), Column A]	Detailed Summary			

#### **EXPENDITURES FOR OPERATING EXPENSES\***

#### SCHEDULE D

Primary

2. ID#

	Committee to Fleat Towi Cate	General	
	1. Committee Name Committee to Elect Jeni Coke  3. Report covering period from 6-1-14 thru 8-14-14	<del></del>	
4	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP  SIGNS ON YLE CLEAP - COM  11525A Stone hollow Dr  Austin TX 78758  DESCRIPTION OF ITEMS OR SERVICES PURCHASED  51975	7/10/10	600"
4b.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP  DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

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

#### LOANS MADE BY REPORTING COMMITTEE

## SCHEDULE D-2

2	. ID#	
		Primary
		General

1. Committee Name		General
3. Report covering period from	thru	

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

#### OFFSETS TO OPERATING EXPENSES \*

### SCHEDULE D-3

		2. ID#		
		Primary		у
	1. Committee Name		Genera	al
	3. Report covering period fromthru			
ſ	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		ATE FUND	AMOUNT OF THE
ľ	NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	REC	CEIVED	REFUND
a.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION OF REFUND			
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION OF REFUND			
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION OF REFUND			
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION OF REFUND			
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION OF REFUND			
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION OF REFUND .			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [if last page of Schedule D-3, [transfer total to Detailed Summary Page I	ine 17 Colum	nn A]	
*	Includes return of contributions made by reporting committee			

### REPAYMENT OF CANDIDATE LOANS

#### SCHEDULE D-4

		Primary		ry			
	1. Committee Name Committee to Elect Jeni Coke	Genera		ral			
3. Report covering period from 6-/-/4 thru 8-/4-/4							
	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE		ATE YMENT	AMOUNT OF THE			
	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		ADE	REPAYMENT			
а.	NAME, ADDRESS, CITY, STATE, AND ZIP						
	Jeni Coke	/	,				
	Jeni Coke LHC 82406	7/14	/1 <del>4</del>	600''			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP						
l							
c.	NAME, ADDRESS, CITY, STATE, AND ZIP						
	NAME ADDRESS CITY OTATE AND TO						
d.	NAME, ADDRESS, CITY, STATE, AND ZIP						
е.	NAME, ADDRESS, CITY, STATE, AND ZIP						
f.	NAME, ADDRESS, CITY, STATE, AND ZIP						
l							
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]						
				600"			

#### REPAYMENT OF ALL OTHER LOANS

# SCHEDULE D-5

		2. ID#	2. ID#	
			Primary	
1. Committee Name			General	
r. Committee Name				
3. Report covering period from	thru			
		5		AMOUNT OF

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

### TRANSFERS TO OTHER POLITICAL COMMITTEES

### SCHEDULE D-6

	اِ			Primary		
	1. Committee Name	1. Committee Name			neral	
	3. Report covering period fromthru					
4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE	TRAN	SFER	AMOUNT OF THE	
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL		MADE		TRANSFER	
	COMMITTEE)  TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE					
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		-			
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	·					
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	77-74-6-7-30-7-8-4-4-5					
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	·					
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D.S. Troopfor total to Dobilod Summon Dana Line 44 Cell and		· · · · · · · · · · · · · · · · · · ·			
υ.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A] ,					

#### ANY OTHER DISBURSEMENT

## SCHEDULE D-7

2. ID#

			<u> </u>	Pnm	ary	
	1. Committee Name			Gene	eral	
	3. Report covering period from thru		····			
4.	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT MADE		EMENT	AMOUNT OF THE DISBURSEMENT	
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			'E		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION					
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
					;	
	DESCRIPTION					
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION					
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION					
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
	DESCRIPTION					
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]					

Page\_\_\_of \_\_\_

### IN-KIND CONTRIBUTIONS and EXPENDITURES

### SCHEDULE E

					Prima	ary
	1. Committee Name		_ [		Gene	eral
	Report covering period from	thru				
4	IN-KIND CONTRIBUTION			DAT	E	FAIR
	NAME AND ADDRESS OF INDIVIDUAL				:	MARKET VALUE
	POLITICAL COMMITTEE) FROM WH					
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION				
		EXPENDITURE				
	DESCRIPTION					
	OCCUPATION	EMPLOYER				
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION				
		EXPENDITURE				
	DESCRIPTION					
	OCCUPATION	ENDLOYED				
	OCCUPATION	EMPLOYER				
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION	:			
		EXPENDITURE				
,	DESCRIPTION					
	OCCUPATION	EMPLOYER				
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					
		CONTRIBUTION  EXPENDITURE				
	DESCRIPTION					
	OCCUPATION	EMPLOYER				
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGLine 6, Column A)	E OF SCHEDULE E [If last page of Schedule E, transfer	total to Detailed	Summa	y Page	
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGLINE 11, Column A]	E OF SCHEDULE E [if last page of Schedule E, transfer	total to Detailed	Summa	y Page	

Page	of
rage	

### DIVIDENDS, INTEREST, AND OTHER RECEIPTS

## SCHEDULE F-1

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

### OFFSETS TO CONTRIBUTIONS RECEIVED \*

### SCHEDULE F-2

Page\_\_\_of \_\_\_

		Primary	
	1. Committee Name	General	
	3. Report covering period fromthru		
4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE	AMOUNT
7		REFUND MADE	OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		·
	DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
	SESSIVI HONGI KET GNO		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
	BESCHI HONOR KET UND		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
	SESSITI NOTO REPORT		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		The second secon
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4	(E), Column A]	
*	Includes return of contributions received by reporting committee		