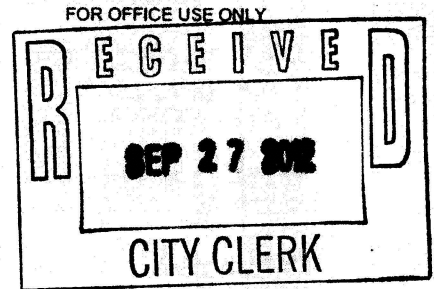


**POLITICAL COMMITTEE**  
**CITY/TOWN OF LAKE HAVASU CITY**  
**CAMPAIGN FINANCE REPORT**  
**2012 August/November Regular Election**



1. **COMMITTEE TO ELECT DONNA BRISTER**

Full Name of Committee  
 Address  
**LAKE HAVASU CITY, AZ 86403 MOHAVE**  
 City ZIP Code County Phone

2. Sponsoring Organization or Candidate and office  
 Name of Candidate and Office Sought (if applicable)  
 E-Mail Address Fax #

3A. ID#  
**12-NP-108**

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

- January 31 Report - For Period of \_\_\_\_\_ \* thru December 31, 2011 ..... January 1, 2012 and January 31, 2012
- June 30 Report - For Period of January 1, 2012 thru May 31, 2012 ..... June 1, 2012 and June 30, 2012
- Pre-Primary Election Report - For Period of June 1, 2012 thru August 16, 2012 ..... August 17, 2012 and August 24, 2012
- Post-Primary Election Report - For Period of August 17, 2012 thru September 17, 2012 ..... September 18, 2012 thru September 27, 2012
- Pre-General Election Report - For Period of September 18, 2012 thru October 25, 2012 ..... October 26, 2012 and November 2, 2012
- Post-General Election Report - For Period of October 26, 2012 thru November 26, 2012 ..... November 27, 2012 and December 6, 2012
- \*\*January 31, Report - For Period of November 27, 2012 thru December 31, 2013 ..... January 1, 2014 and January 31, 2014

| 5. SUMMARY                                                                                                                                                                                                                          | Column A<br>Total This Reporting<br>Period | Column B<br>Election Period<br>Total To Date |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------|
| 5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)                                                                                                                            |                                            |                                              |
| 5b Cash on Hand at the Beginning of this Reporting Period                                                                                                                                                                           | \$1388.65                                  |                                              |
| 5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)                                                                                                                                                     | 70.00                                      | \$3426.00                                    |
| 5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]                                                                                                                                                     | \$1458.65                                  | \$3426.00                                    |
| 6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines] |                                            |                                              |
| 6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)                                                                                                                                               | \$1198.00                                  | \$3165.35                                    |
| 7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]                                                                                                                                                        | \$260.65                                   | \$260.65                                     |

\*Insert date which is 21 days after date of last election (A.R.S. §16-913).  
 \*\*Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: COMMITTEE TO ELECT DONNA BRISTER  
 3. Report covering period from AUG 17 Thru SEPTEMBER 17, 2012

2. ID#  
12-NP-108

| RECEIPTS                                                                                      | COLUMN A<br>THIS PERIOD | COLUMN B<br>CAMPAIGN TO DATE |
|-----------------------------------------------------------------------------------------------|-------------------------|------------------------------|
| 4. Contributions other than loans and in-kind:                                                |                         |                              |
| (a) Individuals - more than \$25 (Total from Schedule A)                                      | \$70.00                 | \$2995.00                    |
| (b) Individuals - aggregate \$25 or less (Total from Schedule A-1)                            | -                       | 231.00                       |
| (c) Political Committees (Total from Schedule B)                                              |                         |                              |
| (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]                                         | -                       | 3226.00                      |
| (e) Refund of contributions (Total from Schedule F-2)                                         |                         |                              |
| (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]                | \$70.00                 | 3226.00                      |
| 5. (a) Loans made or guaranteed by candidate (Total from Schedule C)                          |                         |                              |
| (b) All other loans (Total from Schedule C-1)                                                 |                         |                              |
| (c) Total Loans [add 5(a) and 5(b)]                                                           |                         |                              |
| 6. In-kind contributions (Total from Schedule E)                                              |                         | 200.00                       |
| 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)                 |                         |                              |
| 8. Total Receipts [add 4(f), 5(c), 6, and 7]                                                  | \$70.00                 | \$3426.00                    |
| <b>QUALIFYING CONTRIBUTION RECEIPTS</b>                                                       |                         |                              |
| Qualifying Contributions of \$5 from Individuals (Total from Schedule A2)                     |                         |                              |
| <b>DISBURSEMENTS</b>                                                                          |                         |                              |
| 9. Expenditures for operating expenses (Total from Schedule D)                                | \$1198.00               | \$2965.35                    |
| 10. Independent Expenditures (Total from Schedule D-1)                                        |                         |                              |
| 11. Value of In-kind expenditures (Total from Schedule E)                                     |                         | 200.00                       |
| 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)          |                         |                              |
| (b) Repayment of all other loans (Total from Schedule D-5)                                    |                         |                              |
| (c) Total Loan Repayments [add 13(a) and 13(b)]                                               |                         |                              |
| 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]                       | \$1198.00               | \$3165.35                    |
| 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)        |                         |                              |
| 18. Total disbursements [subtract line 17 from line 16]                                       | \$1198.00               | \$3165.35                    |
| 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 to the best of my knowledge and belief it is true and complete.

*Amber Whitaker*

Type or Print Name of Treasurer

09.27.2012

Signature of Treasurer or Candidate or Designating Individual

Date



**CONTRIBUTIONS more than \$25 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID#  
12-NP-108

3. Report covering period from AUGUST 17, 2012 thru SEPTEMBER 17, 2012

| 4   | CONTRIBUTIONS                                                                                                                                              | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|----------------------------------------|
|     | NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR                                                                                                      |               |                             |                                        |
| 4a. | LAST FIRST MI<br>DUKES, TAMMI A<br>STREET ADDRESS<br>[REDACTED]<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ<br>OCCUPATION EMPLOYER<br>SKIN CARE SELF         | 06/04/12      |                             | \$50.00                                |
| b.  | LAST FIRST MI<br>SCHROER, GEORGE H<br>STREET ADDRESS<br>[REDACTED]<br>CITY STATE ZIP<br>SAN CLEMENTE, CA 92672<br>OCCUPATION EMPLOYER<br>RETIRED           | 06/01/12      |                             | \$250.00                               |
| c.  | LAST FIRST MI<br>CAMPBELL, ANDREW<br>STREET ADDRESS<br>[REDACTED]<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86406<br>OCCUPATION EMPLOYER<br>ACCOUNTANT NSC | 06/04/12      |                             | \$390.00                               |
| d.  | LAST FIRST MI<br>HUDSON, RICHARD<br>STREET ADDRESS<br>[REDACTED]<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86406<br>OCCUPATION EMPLOYER<br>V.P. PARKER OIL | 06/14/12      |                             | \$100.00                               |
| e.  | LAST FIRST MI<br>HEREDIA, EDDIE<br>STREET ADDRESS<br>[REDACTED]<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86404<br>OCCUPATION EMPLOYER<br>RETIRED          | 06/02/12      |                             | \$100.00                               |
| 5.  | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]                      |               |                             |                                        |

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

**CONTRIBUTIONS more than \$25 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID#  
12-NP-108

3. Report covering period from AUGUST 17, 2012

thru

SEPTEMBER 17, 2012

| 4   | CONTRIBUTIONS<br>NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR                                                                                   | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|----------------------------------------|
| 4a. | LAST FIRST MI<br>FRASER, HELEN<br>STREET ADDRESS<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86404<br>OCCUPATION EMPLOYER<br>RETIRED                       | 06/14/12      |                             | \$25.00                                |
| b.  | LAST FIRST MI<br>MCATLIN, CAROLYN<br>STREET ADDRESS<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86403<br>OCCUPATION EMPLOYER<br>OFFICE MANAGER SAM NICHOLS | 6/20/12       |                             | \$25.00                                |
| c.  | LAST FIRST MI<br>HOLLAND, MARCIA<br>STREET ADDRESS<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86406<br>OCCUPATION EMPLOYER<br>RETIRED                     | 07/05/12      |                             | \$100.00                               |
| d.  | LAST FIRST MI<br>RADTKE, H.R.<br>STREET ADDRESS<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86403<br>OCCUPATION EMPLOYER<br>RETIRED                        | 07/09/12      |                             | \$20.00                                |
| e.  | LAST FIRST MI<br>WHITE, MARILYN J<br>STREET ADDRESS<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86406<br>OCCUPATION EMPLOYER<br>RETIRED                    | 6/26/12       |                             | \$100.00                               |
| 5.  | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A)                    |               |                             |                                        |

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

**CONTRIBUTIONS more than \$25 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID#  
12-NP-108

3. Report covering period from AUGUST 17, 2012 thru SEPTEMBER 17, 2012

| 4                          | CONTRIBUTIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                            | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|----------------------------------------|----------------------|--|--|----------------|--|--|------------|--|--|------|-------|-----|----------------------------|--|--|------------|----------|--|--------------------|-------------|--|----------|-----|----------|
|                            | NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR                                                                                                                                                                                                                                                                                                                                                                                                                    |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| 4a.                        | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">COWPER, VICTORIA</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>EXECUTIVE DIRECTOR</td> <td colspan="2">WAHS</td> </tr> </table> | LAST          | FIRST                       | MI                                     | COWPER, VICTORIA     |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | EXECUTIVE DIRECTOR | WAHS        |  | 6/20/12  | \$0 | \$20.00  |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| COWPER, VICTORIA           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| LAKE HAVASU CITY, AZ 86406 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| EXECUTIVE DIRECTOR         | WAHS                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| b.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">BENTON-PELLATON, REA</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RETIRED</td> <td colspan="2"></td> </tr> </table>            | LAST          | FIRST                       | MI                                     | BENTON-PELLATON, REA |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | RETIRED            |             |  | 06/21/12 | \$0 | \$25.00  |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| BENTON-PELLATON, REA       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| LAKE HAVASU CITY, AZ 86406 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| RETIRED                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| c.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">DESMARETZ, DON</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RETIRED</td> <td colspan="2"></td> </tr> </table>                  | LAST          | FIRST                       | MI                                     | DESMARETZ, DON       |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | RETIRED            |             |  | 06/15/12 | \$0 | \$50.00  |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| DESMARETZ, DON             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| LAKE HAVASU CITY, AZ 86406 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| RETIRED                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| d.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">TALLEY, MARK</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>POOL TECH</td> <td colspan="2">SELF</td> </tr> </table>              | LAST          | FIRST                       | MI                                     | TALLEY, MARK         |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | POOL TECH          | SELF        |  | 07/21/12 | \$0 | \$210.00 |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| TALLEY, MARK               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| LAKE HAVASU CITY, AZ 86406 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| POOL TECH                  | SELF                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| e.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">NAGEL, SANDRA D</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>SECRETARY</td> <td colspan="2">DL CAMPBELL</td> </tr> </table>    | LAST          | FIRST                       | MI                                     | NAGEL, SANDRA D      |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | SECRETARY          | DL CAMPBELL |  | 07/21/12 | \$0 | \$100.00 |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| NAGEL, SANDRA D            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| LAKE HAVASU CITY, AZ 86406 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| SECRETARY                  | DL CAMPBELL                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |
| 5.                         | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]                                                                                                                                                                                                                                                                                                                                    |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |                    |             |  |          |     |          |

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

**CONTRIBUTIONS more than \$25 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID#  
12-NP-108

3. Report covering period from AUGUST 17, 2012 thru SEPTEMBER 17, 2012

| 4   | CONTRIBUTIONS                                                                                                                                                                         | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|----------------------------------------|
|     | NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR                                                                                                                                 |               |                             |                                        |
| 4a. | <p>LAST FIRST MI<br/>ALDRIDGE, MIKE</p> <p>STREET ADDRESS<br/>[REDACTED]</p> <p>CITY STATE ZIP<br/>LAKE HAVASU CITY, AZ 86406</p> <p>OCCUPATION EMPLOYER<br/>INSURANCE AGENT SELF</p> | 7/13/2012     |                             | \$100.00                               |
| b.  | <p>LAST FIRST MI<br/>CAMPBELL, DORTHY</p> <p>STREET ADDRESS<br/>[REDACTED]</p> <p>CITY STATE ZIP<br/>LAKE HAVASU CITY, AZ 86406</p> <p>OCCUPATION EMPLOYER<br/>RETIRED</p>            | 7/18/12       |                             | \$400.00                               |
| c.  | <p>LAST FIRST MI<br/>MAUCH, TAMI</p> <p>STREET ADDRESS<br/>[REDACTED]</p> <p>CITY STATE ZIP<br/>LAKE HAVASU CITY, AZ 86403</p> <p>OCCUPATION EMPLOYER<br/>CHP STATE OF CALIFORNIA</p> | 7/13/12       |                             | \$100.00                               |
| d.  | <p>LAST FIRST MI<br/>MYERS, LORRAINE</p> <p>STREET ADDRESS<br/>[REDACTED]</p> <p>CITY STATE ZIP<br/>LAKE HAVASU CITY, AZ 86406</p> <p>OCCUPATION EMPLOYER<br/>RETIRED</p>             | 7/16/12       |                             | \$50.00                                |
| e.  | <p>LAST FIRST MI<br/>VIGNONI, JANE B</p> <p>STREET ADDRESS<br/>[REDACTED]</p> <p>CITY STATE ZIP<br/>LAKE HAVASU CITY, AZ 86406</p> <p>OCCUPATION EMPLOYER<br/>RETIRED</p>             | 7/07/12       |                             | \$10.00                                |
| 5.  | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]                                                 |               |                             |                                        |

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

**CONTRIBUTIONS more than \$25 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID#  
12-NP-108

3. Report covering period from AUGUST 17, 2012 thru SEPTEMBER 17, 2012

| 4                                                     | CONTRIBUTIONS                                                                                                                                                                                                                                                                                                                                                                                                                                             | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|----------------------------------------|-------------------|--|--|----------------|--|--|------------|--|--|------|-------|-----|----------------------------|--|--|------------|----------|--|---------|------|--|----------|-----|----------|
| NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| 4a.                                                   | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">ATWELL, TAMI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>TEACHER</td> <td colspan="2">CCA</td> </tr> </table>  | LAST          | FIRST                       | MI                                     | ATWELL, TAMI      |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | TEACHER | CCA  |  | 07/16/12 | \$0 | \$100.00 |
| LAST                                                  | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                     | MI            |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| ATWELL, TAMI                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| STREET ADDRESS                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| [REDACTED]                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| CITY                                                  | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ZIP           |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| LAKE HAVASU CITY, AZ 86406                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| OCCUPATION                                            | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| TEACHER                                               | CCA                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| b.                                                    | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">THOMPSON, KARL</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86404</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RETIRED</td> <td colspan="2"></td> </tr> </table>   | LAST          | FIRST                       | MI                                     | THOMPSON, KARL    |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86404 |  |  | OCCUPATION | EMPLOYER |  | RETIRED |      |  | 5/22/12  | \$0 | \$25.00  |
| LAST                                                  | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                     | MI            |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| THOMPSON, KARL                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| STREET ADDRESS                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| [REDACTED]                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| CITY                                                  | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ZIP           |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| LAKE HAVASU CITY, AZ 86404                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| OCCUPATION                                            | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| RETIRED                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| c.                                                    | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">HAND, OCIE</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86405</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RETIRED</td> <td colspan="2"></td> </tr> </table>       | LAST          | FIRST                       | MI                                     | HAND, OCIE        |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86405 |  |  | OCCUPATION | EMPLOYER |  | RETIRED |      |  | 5/23/12  | \$0 | \$50.00  |
| LAST                                                  | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                     | MI            |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| HAND, OCIE                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| STREET ADDRESS                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| [REDACTED]                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| CITY                                                  | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ZIP           |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| LAKE HAVASU CITY, AZ 86405                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| OCCUPATION                                            | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| RETIRED                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| d.                                                    | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">SCHULTE, MARYANNE</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>CPA</td> <td colspan="2">NSC</td> </tr> </table> | LAST          | FIRST                       | MI                                     | SCHULTE, MARYANNE |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | CPA     | NSC  |  | 5/29/12  | \$0 | \$75.00  |
| LAST                                                  | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                     | MI            |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| SCHULTE, MARYANNE                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| STREET ADDRESS                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| [REDACTED]                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| CITY                                                  | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ZIP           |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| LAKE HAVASU CITY, AZ 86406                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| OCCUPATION                                            | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| CPA                                                   | NSC                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| e.                                                    | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">BRISTER, DONNA</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86403</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2">SELF</td> </tr> </table>      | LAST          | FIRST                       | MI                                     | BRISTER, DONNA    |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86403 |  |  | OCCUPATION | EMPLOYER |  |         | SELF |  | 2/15/12  | \$0 | \$100.00 |
| LAST                                                  | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                     | MI            |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| BRISTER, DONNA                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| STREET ADDRESS                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| [REDACTED]                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| CITY                                                  | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ZIP           |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| LAKE HAVASU CITY, AZ 86403                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| OCCUPATION                                            | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
|                                                       | SELF                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |
| 5.                                                    | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]                                                                                                                                                                                                                                                                                                                     |               |                             |                                        |                   |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |         |      |  |          |     |          |

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**CONTRIBUTIONS more than \$25 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID #  
12-NP-108

3. Report covering period from AUGUST 17, 2012 thru SEPTEMBER 17, 2012

| 4                          | CONTRIBUTIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|----------------------------------------|----------------------|--|--|----------------|--|--|------------|--|--|------|-------|-----|----------------------------|--|--|------------|----------|--|------------|---------------|--|---------|-----|----------|
|                            | NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| 4a.                        | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">DE LA CRUZ, DANIELLE</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86405</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>PUBLISHING</td> <td colspan="2">HAVASU LIVING</td> </tr> </table> | LAST          | FIRST                       | MI                                     | DE LA CRUZ, DANIELLE |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86405 |  |  | OCCUPATION | EMPLOYER |  | PUBLISHING | HAVASU LIVING |  | 5/22/12 | \$0 | \$100.00 |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| DE LA CRUZ, DANIELLE       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| LAKE HAVASU CITY, AZ 86405 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| PUBLISHING                 | HAVASU LIVING                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| b.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">FOXX, JOSEPH</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86405</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2">SELF</td> </tr> </table>                            | LAST          | FIRST                       | MI                                     | FOXX, JOSEPH         |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86405 |  |  | OCCUPATION | EMPLOYER |  |            | SELF          |  | 5/22/12 | \$0 | \$100.00 |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| FOXX, JOSEPH               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| LAKE HAVASU CITY, AZ 86405 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
|                            | SELF                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| c.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">REEVES, CLYDE</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86405</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RETIRED</td> <td colspan="2"></td> </tr> </table>                        | LAST          | FIRST                       | MI                                     | REEVES, CLYDE        |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86405 |  |  | OCCUPATION | EMPLOYER |  | RETIRED    |               |  | 5/22/12 | \$0 | \$50.00  |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| REEVES, CLYDE              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| LAKE HAVASU CITY, AZ 86405 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| RETIRED                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| d.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">SANDOVAL, SISTO</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>                             | LAST          | FIRST                       | MI                                     | SANDOVAL, SISTO      |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  |            |               |  | 5/22/12 | \$0 | \$50.00  |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| SANDOVAL, SISTO            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| LAKE HAVASU CITY, AZ 86406 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
|                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| e.                         | <table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">BROSTROM, JEAN</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">LAKE HAVASU CITY, AZ 86406</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RETIRED</td> <td colspan="2"></td> </tr> </table>                       | LAST          | FIRST                       | MI                                     | BROSTROM, JEAN       |  |  | STREET ADDRESS |  |  | [REDACTED] |  |  | CITY | STATE | ZIP | LAKE HAVASU CITY, AZ 86406 |  |  | OCCUPATION | EMPLOYER |  | RETIRED    |               |  | 5/23/12 | \$0 | \$50.00  |
| LAST                       | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MI            |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| BROSTROM, JEAN             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| STREET ADDRESS             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| [REDACTED]                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| CITY                       | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ZIP           |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| LAKE HAVASU CITY, AZ 86406 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| OCCUPATION                 | EMPLOYER                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| RETIRED                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |
| 5.                         | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(2), Column A]                                                                                                                                                                                                                                                                                                                                         |               |                             |                                        |                      |  |  |                |  |  |            |  |  |      |       |     |                            |  |  |            |          |  |            |               |  |         |     |          |

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

**CONTRIBUTIONS more than \$25 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID#  
12-NP-108

3. Report covering period from AUGUST 17, 2012 thru SEPTEMBER 17, 2012

| 4                                                     | CONTRIBUTIONS                                                                                                                                                           | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|----------------------------------------|
| NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR |                                                                                                                                                                         |               |                             |                                        |
| 4a.                                                   | LAST FIRST MI<br>BOLSTER, DAVID<br>STREET ADDRESS<br>[REDACTED]<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86406<br>OCCUPATION EMPLOYER<br>APPRAISER                     | 09/14/12      | \$20.                       | \$20.00                                |
| b.                                                    | LAST FIRST MI<br>IMHAUSEN, DONNA<br>STREET ADDRESS<br>[REDACTED]<br>CITY STATE ZIP<br>LAKE HAVASU CITY, AZ 86406<br>OCCUPATION EMPLOYER<br>ESCROW OFFICER PIONEER TITEL | 09/14/12      | \$50.00                     | \$50.00                                |
| c.                                                    | LAST FIRST MI<br><br>STREET ADDRESS<br><br>CITY STATE ZIP<br><br>OCCUPATION EMPLOYER                                                                                    |               |                             |                                        |
| d.                                                    | LAST FIRST MI<br><br>STREET ADDRESS<br><br>CITY STATE ZIP<br><br>OCCUPATION EMPLOYER                                                                                    |               |                             |                                        |
| e.                                                    | LAST FIRST MI<br><br>STREET ADDRESS<br><br>CITY STATE ZIP<br><br>OCCUPATION EMPLOYER                                                                                    |               |                             |                                        |
| 5.                                                    | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(f), Column A]                                   | \$70.00       | \$2995.00                   |                                        |

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

**EXPENDITURES FOR OPERATING EXPENSES\***

**SCHEDULE D**

1. Committee Name COMMITTEE TO ELECT DONNA BRISTER

2. ID#  
**12-NP-108**

3. Report covering period from AUGUST 17 thru SEPTEMBER 17

| 4   | EXPENDITURES                                                                                                                                                           | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------|
|     | NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE                                                                                                           |                       |                           |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP<br>HAVASU LIVING MAGAZINE<br>PO BOX 3012<br>LAKE HAVASU CITY, AZ 86405<br>DESCRIPTION OF ITEMS OR SERVICES PURCHASED<br>ADVERTISING | 09/06/12              | \$199.00                  |
| b.  | NAME, ADDRESS, CITY, STATE AND ZIP<br>SMART SHOPPER<br>PO BOX 3012<br>LAKE HAVASU CITY, AZ 86405<br>DESCRIPTION OF ITEMS OR SERVICES PURCHASED<br>ADVERTISING          | 09/12/12              | \$999.00                  |
| c.  | NAME, ADDRESS, CITY, STATE AND ZIP<br><br>DESCRIPTION OF ITEMS OR SERVICES PURCHASED                                                                                   |                       |                           |
| d.  | NAME, ADDRESS, CITY, STATE AND ZIP<br><br>DESCRIPTION OF ITEMS OR SERVICES PURCHASED                                                                                   |                       |                           |
| e.  | NAME, ADDRESS, CITY, STATE AND ZIP<br><br>DESCRIPTION OF ITEMS OR SERVICES PURCHASED                                                                                   |                       |                           |
| f.  | NAME, ADDRESS, CITY, STATE AND ZIP<br><br>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)                                       |                       | \$1198.00                 |

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