STATE OF ARIZONA COMMITTEE CAMPAIGNUL FINANCE REPORT

1 3 2018

COMMITTEE ID NUMBER
8-NP-005

CITY CLERK

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Norona for Mayor

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

Office Sought:	☐ Statewide Office:	□ State Legislature:
	☐ County Office:	■ City/Town Office: LHC- mayor

REPORTING PERIOD (check one):

	January 1, 2017 to January 15, 2017
	- 1
2017 March Pre-Election Report (Local Only): January 1, 2017 to February 25, 2017	February 26, 2017 to March 4, 2017
2017 1 st Quarter Report (Local Only): February 26, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
2017 1 st Quarter Report: January 1, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
2017 May Pre-Election Report (Local Only): April 1, 2017 to April 29, 2017 A	April 30 , 2017 to May 6, 2017
2017 2 nd Quarter Report (Local Only): April 30, 2017 to June 30, 2017	July 1, 2017 to July 15, 2017
2017 2 nd Quarter Report: April 1, 2017 to June 30, 2017 J	July 1, 2017 to July 15, 2017
2017 August Pre-Election Report (Local Only): July 1, 2017 to August 12, 2017	August 13, 2017 to August 19, 2017
2017 3 rd Quarter Report (Local Only): August 13, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
2017 3 rd Quarter Report: July 1, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
2017 October Pre-Election Report (Local Only): October 1, 2017 to October 21, 2017	October 22, 2017 to October 28, 2017
2017 4 th Quarter Report (Local Only): October 22, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
2017 4 th Quarter Report: October 1, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
2018 March Pre-Election Report (Local Only): January 1, 2018 to February 24, 2018	February 25, 2018 to March 3, 2018
2018 1 st Quarter Report (Local Only): February 25, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
2018 1 st Quarter Report: January 1, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*
2018 May Pre-Election Report (Local Only): April 1, 2018 to April 28, 2018	April 29 , 2018 to May 7, 2018*
■ 2018 2 nd Quarter Report (Local Only): April 29, 2018 to June 30, 2018 J	July 1, 2018 to July 16, 2018*
2018 2 nd Quarter Report: April 1, 2018 to June 30, 2018 J	July 1, 2018 to July 16, 2018*
2018 August Pre-Election Report: July 1, 2018 to August 11, 2018	August 12, 2018 to August 20, 2018*
2018 3 rd Quarter Report: August 12, 2018 to September 30, 2018	October 1, 2018 to October 15, 2018
2018 October Pre-Election Report: October 1, 2018 to October 20, 2018	October 21, 2018 to October 29, 2018*
2018 4 th Quarter Report: October 21, 2018 to December 31, 2018 J	January 1, 2019 to January 15, 2019
Final Campaign Finance Report Prior to Committee Termination	End of Previous Period through Today's Date

*Effective April 15, 2018, reporting deadline extended to next business day, A.R.S. §§ 1-243(A) and 1-303.

FINANCIAL SUMMARY (required):

	Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a)	Committee value at the beginning of this reporting period (i.e, ending balance from the previous reporting period)	\$500.00	
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$1,000.00	
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$823.46	
(d)	= Balance at close of reporting period	\$676.54	

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity.

All reports are deemed to be filed under penalty of perjury by the committee treasurer (all committees) and candidate (candidate committees only).

SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate)		
	(c) Candidate Committees		
	(d) Political Action Committees		
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Monies (Candidate Committees Only)	\$1,000.00	
	(j) Monetary Contributions Subtotal (add 1(a) through 1(i))		
	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))	\$1,000.00	
2.	Loans		
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
_	(d) Interest Accrued on Loans Mado	0	
_	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	0	
3.	Rebates and Refunds Received		
1.	Interest Accrued on Committee Monies		
5	In-Kind Contributions Received		
	(a) Individuals - More than \$50		
	(b) Individuals - \$50 or Less (Aggregate) (c) Candidate Committees		
	(d) Political Action Committees		
_	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(h) Labor Organizations (PACs & Political Parties Only)		
	(i) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))		0
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		0
B	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12.	Miscellaneous Receipts		
13.	Total Receipts (cash: add 1(i), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)	\$1,000.00	0

SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1. [Disbursements for Operating Expenses	\$823.46	
2. (Contributions Made		
(a) Candidate Committees		
	b) Political Action Committees		7
-	c) Political Parties		
_	d) Partnerships		
_	e) Corporations & Limited Liability Companies (PAC & Political Parlies Only)	_	
(f) Labor Organizations (PAC & Political Parties Only)		
(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	0	
(h) Contribution Refunds Provided to the Reporting Committee		
(i) Monetary Contributions Total (subtract 2(h) from 2(g))	0	
3. L	oans		
(a) Loans Made		
(b) Loan Guarantees Made		
(c) Forgiveness on Loans Made		
(d) Repayment of Loans Received		
(e) Accrued Interest on Loans Received		
(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equily: add 2(b) & 2(c))	0	0
4. F	Rebates and Refunds Made (Non-Contributions)		
5. \	/alue of In-Kind Contributions Provided		
(6	a) Candidate Committees		
(b) Political Action Committees		
(c) Political Parties		
(d) Partnerships		
(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
(f) Labor Organizations (PAC & Political Parties Only)		
() Contributions Subtotal (add 5(a) through 5(f))		0
6. li	ndependent Expenditures Made		
7. E	Ballot Measure Expenditures Made		
8. F	Recall Expenditures Made		
9. 5	Support Provided to Party Nominees (Political Parties Only)		
10. J	oint Fundraising / Shared Expense Payments Made		
11. F	Reimbursements Made		
12. 0	Outstanding Accounts Payable / Debts Owed by Committee		
13. T	ransfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14. N	/liscellaneous Disbursements		
15. A	aggregate of Disbursements - \$250 or Less		
16. T	otal Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)	\$823.46	0



MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(1)(a)

	ibutor Informatio	n	Amount Received	Amount this	Amount this
Name	-	Date Contribution Received		Reporting Period	Election Cycle
Street Address					
		Taro			
Cily	State	ZIP			
Occupation	Employer				
Name		Date Contribution Received			
Street Address					
Cily	State	ZIP			
Occupation	Employer				
		1.			
Name		Date Contribution Received			
Street Address					
City	State	ZIP			
Occupalion	Employer				
Name		Dale Contribution Received			
Street Address					
City	State	ZIP	-		
Occupation Employer					
Name		Date Contribution Received			
Street Address					
City	State	ZIP			
Occupation	Employer				
	Street Address City Cocupation Name Street Address City Cocupation Name	Street Address City State Decupation Employer Street Address City State Decupation Employer Street Address City State Cocupation Employer Street Address City State Cocupation Employer Street Address City State Cocupation Employer Name Street Address City State City State	Street Address Street Address Date Contribution Received Street Address Street Address	Street Address Street Address	Street Address Street Address

*If contributions of \$50 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

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



MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from Individuals - \$50 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

Schedule A(1)(b), page ___ of ___

^{*}If contributions of more than \$50 are listed on Schedule A(1)(a), do not include them on Schedule A(1)(b).



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

1						
/ T		committee Contributor	Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1 7	Cily	State	ZIP			
0	Committee ID Number	Date Contribution I	Received			
0	Committee Name					
	Street Address					
2	Cily	State	ZIP			
	Committee ID Number	Dale Contribution I	Received			
1						
	Commiltee Name					
1	Street Address					
3	City	State	ZIP			
0	Committee ID Number	Date Contribution	Received			
0	Committee Name					
5	Street Address					
4	City	State	ZIP			
0	Commiltee ID Number	er Date Contribution Received				
	Committee Name					
	Streel Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution	Received			

Schedule A(1)(c), page ____ of ___



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

_	Political Actio	n Committee Contributor Ir	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Committee Name					
	Streel Address					
3	City	State	ZIP			
	Committee ID Number	Dale Contribution Receive	red			
	Committee Name	<u>I</u>				
	Streel Address					
4	City	State	ZIP			
	Committee ID Number	ommittee ID Number Date Contribution Received				
	Committee Name					
	Streel Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv				

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

.3						
/	Political Party C	ontributor Informat	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	1 City	State	ZIP			
	Committee ID Number	Date Contribution Receive	J			
F	Committee Name					
	Street Address					
2	2 City	State	ZIP	-		
	Committee ID Number	Date Contribution Receiv	ed			
r	Committee Name	U				
	Street Address					
3	3 City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed	-		
H	Committee Name					
	Street Address					
4	4 Gity	State	ZIP	-		
	Committee ID Number	Date Contribution Receiv	red			
-	Committee Name					
	Street Address	Street Address				
5	5 City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved	-		
-	Enter total only if last page of schedule			I		
	(transfer the total received this period to "Summary of Receip	is, line 1(e))				

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

	Partnershi	p Contributor Informa	ation		Amount Received		Cumulative Amount this
	Partnership Name					Reporting Period	Election Cycle
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rece	elved				
	Partnership Name						
	Streel Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rec	eived				
	Partnership Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rec	elved				
	Partnership Name						
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Number Date Contribution Received					
	Parlnership Name						
	Street Address						
	City	Slale	ZIP				
	Corporation Commission File Number	Date Contribution Rec	havia				

Schedule A(1)(f), page ___ of ___



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

/					Cumulative	Cumulative
	Corporation / LLC	C Contributor Infor	Amount Received	Amount this Reporting Period	Amount this Election Cycle	
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Dale Contribution Recei	ved			
	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
Ì	Corporation Commission File Number	Date Contribution Rece	ived			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	wed.			
	Corporation/LLC Name					
	Corporation/CCC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Rece	ived			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	_		
	Corporation Commission File Number	Dale Contribution Race	ived			
_ [Corporation Commission File Number Date Contribution Received			1		

Schedule A(1)(g), page ____ of ___



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

/				216: 2	12	
/	Labor Organizatio	on Contributor Inforr	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City State ZIP		ZIP			
	Corporation Commission File Number	Date Contribution Receive	ad ed			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receiv	ed	1		
	Labor Organization Name					
	Streel Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed	1		
	Labor Organization Name					
	Street Address			-		
4	Cily	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Labor Organization Name	L				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
-	Enter total only if last page of schedul	le		-		

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

	Car	ndidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Nicole Norona Street Address	Date Contribution Received 06/19/18				
1	Lake Havasu City	State AZ	86403	\$1,000.00	1,000.00 1,000.00	\$1,500.00
	President	The Not	rona Effect			
	Name	·····	Date Contribution Received			
	Street Address					
2	City State		ZIP			
	Occupation	Employer	.1			
	Name		Date Contribution Received			
	Street Address)- I			
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address	Street Address				
4	City	State	ZIP			
	Occupation	Employer				
	Name	*	Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation Employer					
	Enter total only if last page of sche					



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

/	Contribut	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			
	Street Address					
1	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
2	2 City	State	ZIP			
	ID Number (if applicable)		Date of Onginal Contribution			
Ī	Name	Date Contribution Refunded				
	Street Address	Street Address				
3	Gity City	State	ZIP			
	ID Number (if applicable)	ID Number (if applicable)				
	Name		Date Contribution Refunded			
	Street Address		<u></u>			
4	City	State	ZIP			
	ID Number (if applicable)		Date of Onginal Contribution			
_	Name		Date Contribution Refunded			
	Street Address	Street Address		-		
5	City	State	ZIP	-		
	(U Number (# applicable)		Date of Original Contribution	+		
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts	," line 1(k))				

Schedule A(1)(k), page ____ of



LOANS RECEIVED:

SCHEDULE A(2)(a)

_	Lender	Information		Amount Received	Amount this Reporting Period	Amount this Election Cycle
	Lender Name	Date Loan Received				
	Street Address	<u>],</u>				
	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
	Lender Name	Date Loan Received				
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)		=		
	Lender Name	Date Loan Received				
İ	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
5	City	Stale	ZIP	1		
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
- 1	Enter total only if last page of schedule					



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

/	Le	ender Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstan	ding			
	Lender Name	,	Date Forgiveness Received			
	Streel Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstan	ding			
	Lender Name		Date Forgiveness Received			
	Street Address	1				
3	City	State	ZIP			
	Onginal Amount of Loan	Amount Still Outstan	ding			
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstan	ding	-		
	Lender Name		Date Forgiveness Received			
	Street Address			-		
5	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstan	ding			

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

ŀ		Information		Amount Repaid	Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
1	Street Address					
1	Dity	State	ZIP			
-	Original Amount Borrowed	Amount Still Outstanding		-		
-	Gorrower Name		Date Repayment Received			
Street Address						
2	Sity	State	ZIP	-		
0	Original Amount Borrowed	Amount Still Outstanding				
-	dorrowor Nama		Data Rapaymont Received			
	Streel Address					
3	Sity	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
-	Borrower Name		Date Repayment Received			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		+		
-	Borrower Name		Date Repayment Received			
	Street Address			-		
5	aity	State	ZIP	-		
	Driginal Amount Borrowed	Amount Still Outstanding				

Arizona Secretary of State Revision 4/10/18

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



INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Onginal Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Dale Interest Accrued			
	Street Address					
2	2 City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address	Street Address				
3	City	State	ZIP			
	Onginal Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address		<u> </u>			
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u></u>			
	Borrower Name		Date Interest Accrued			
	Street Address	Street Address				
5	5 City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding	L			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	ina 7/4))		1)		
_	Business to the main compared to the period to approximate or indications.	THE PARTY OF THE P				

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

REBATES AND REFUNDS RECEIVED:

COMMITTEE ID NUMBER

18-NP-005

SCHEDULE A(3)

/				n i		Committee
•	Pa	yor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Streel Address	Streel Address				
1	City	State	ZIP			
	Onginal Purchase Amount	Reason for Refund	Rebate			
	Borrower Name		Date Rebate/Relund Received			
	Street Address		- 1			
2	City	State	ZIP			
	Original Purchase Amount Relation for Re		Rebate			
-	Borrower Name	L.	Date Rebate/Refund Received			
	Street Address					
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refund	Rebate			
	Borrower Name	<u> </u>	Date Rebate/Refund Received			
	Streel Address			1		
1	City	State	ZIP			
	Original Purchase Amount	nginal Purchase Amount Reason for Refund/Re				
	Borrower Name		Date Rebate/Refund Received			
	Street Address		1			
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund	Rebate	-		

Schedule A(3), page ____ of



INTEREST ACCRUED ON COMMITTEE MONIES

SCHEDULE A(4)

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

Schedule A(4), page ____ of ____



IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(5)(a)

/	/	Individual Contr	ibutor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
7		Name		Date In-Kind Contribution Received			
	İ	Street Address					
1	ŀ	City	State	ZIP			
	ŀ	Occupation	Employer				
-	+	Name		Date In-Kind Contribution Received			
		Street Address					
2	}	City	State	ZIP			
		Occupation	Employer				
-		Name		Date in-Kind Contribution Received			
				Date III-Mild Continuation Necessed			
3		Street Address		4			
		City	State	ZIP			
		Occupation	Employer				
		Name		Date In-Kind Contribution Received			
	ľ	Street Address					
4		City	State	ZIP			
	Ì	Occupation	Employer		•		
	1	Name		Date In-Kind Contribution Received			
		Street Address					
5	;	City	State	ZIP			
		Occupation	Employer				
-	+	Enter total only if last page of schedule					
		(Iransfer the total received this period to "Summary of Receipts,"	line 5(a))				

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Schedule A(5), page ____ of



IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$50 or Less	ð	
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," fine 1(b))		

^{*}If contributions of more than \$50 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

/	Candidate C	ommittee Contributor Ir	nformation	Amo	unt Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name						
	Street Address						
1	City	State	ZIP				
İ	Committee ID Number	Date In-Kind Contribu	ultron Received				
	Committee Name						
	Street Address						
2	City	State	ZIP				
	Committee ID Number	Date In-Kind Contrib	ulion Received				
1	Committee Name						
	Street Address	Street Address					
3	City	State	ZIP				
	Committee ID Number	Date In-Kind Contrib	ulion Received				
1	Committee Name						
İ	Street Address						
4	City	State	ZIP				
Ì	Committee ID Number	Date In-Kind Contrib	ulion Received				
	Committee Name						
	Street Address	Street Address					
5	City	State	ZIP				
	Committee ID Number	Date In-Kind Contrib	ution Received				
+	Enter total only if last page of s	chedule					

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES

SCHEDULE A(5)(d)

Committee Name State Address State ZIP	/	Political Acti	on Committee Contribut	or Information	Amount Received	Cumulative Amount this	Cumulative Amount this	
Committee 10 Number Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee ID Number Date In Nort Combuton National Street Address Committee ID Number Date In Nort Combuton National Street Address Committee ID Number Date In Nort Combuton National Street Address Committee ID Number Date In Nort Combuton National Street Address Committee ID Number Date In Nort Combuton National Street Address Committee ID Number Date In Nort Combuton National Street Address Committee ID Number Date In Nort Combuton In Resolved Committee ID Number Date In Nort Combuton In Resolved Committee ID Number Street Address Committee ID Number Date In Nort Combuton In Resolved Committee ID Number Date In Nort Combuton In Resolved Committee ID Number Street Address Street Address Street Address Street Address			on committee contribut	or information	Amount Neceived		Election Cycle	
Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Street Address Coly State ZIP Committee ID Number Committee ID Number Date In-Number Received Committee ID Number Committee ID Number Street Address Coly State ZIP Committee ID Number Date ID Number Date ID Number Date ID Number Date ID Number Date ID Number ZIP Committee ID Number Street Address Coly State ZIP		Committee Name						
Committee ID Number Committee Name Street Address City State Convention ID Number Date in-Knet Contribution Recoved Convention ID Number Date in-Knet Contribution Recoved Convention ID Number Committee ID Number Date in-Knet Contribution Recoved Committee ID Number Date in-Knet Contribution Recoved Committee ID Number Date in-Knet Contribution Recoved Committee ID Number Date in-Knet Contribution Recoved Committee ID Number Date in-Knet Contribution Recoved Committee ID Number Date in-Knet Contribution Recoved Committee ID Number Date in-Knet Contribution Recoved		Street Address						
Committee Name	1	City	State	ZIP				
Street Address 2 City State 2/IP Committee ID Number Delete in Fund Contribution Macewed Committee Name Street Address 3 City State 2/IP Committee ID Number Delete in Fund Contribution Received Committee ID Number Delete in Fund Contribution Received Committee ID Number Delete in Fund Contribution Received Committee ID Number Delete in Fund Contribution Received Committee ID Number Delete in Fund Contribution Received Committee ID Number Delete in Fund Contribution Received Committee ID Number Delete in Fund Contribution Received		Committee ID Number	Date In-Kind Contr	ibution Received				
Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee Name Street Address Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received	Ī	Committee Name						
Committee ILD Number Date In-Kind Contribution Received Street Address Gly State ZIP Committee ID Number Date in-Kind Contribution Received Committee ID Number Date in-Kind Contribution Received Committee Name Street Address Gly State ZIP Committee ID Number Dete in-Kind Contribution Received Street Address Gly State ZIP Committee ID Number Dete in-Kind Contribution Received Street Address Street Address Street Address Street Address Street Address Street Address		Street Address						
Committee Name Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received Committee Name Street Address City State ZIP Committee Name Street Address Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received Street Address Committee Name Street Address Street Address Committee Name	2	City State ZIP						
Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received Committee ID Number Date in-Kind Contribution Received Committee ID Number Date in-Kind Contribution Received Committee ID Number Date in-Kind Contribution Received		Committee ID Number	Date In-Kind Conti	nbution Received				
State ZIP	_	Committee Name						
State ZIP		District Address						
Committee ID Number Date In-Kind Contribution Received	2	Street Address						
Committee Name Street Address Gity State ZIP Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP	J	City	State	ZIP				
Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP		Committee ID Number	Date In-Kind Cont	nbulion Received				
Gity State ZIP Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP		Committee Name						
Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP ZIP		Street Address						
Committee Name Street Address City State ZIP	4	City	State	ZIP				
Street Address City State ZIP		Committee ID Number	Date In-Kind Cont	ribution Received				
5 City State ZIP		Committee Name						
Uily State ZIP		Street Address						
Committee ID Number Date In-Kind Contribution Received	5	City	State	ZIP				
		Committee ID Number	Date In-Kind Cont	ribution Received				
		Enter total only if last page of						



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Politica	l Party Contributor Infor	mation	Amo	ount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name						
	Street Address						
1	City	State	ZIP				
	Committee ID Number	Dale In-Kind Contro	pulion Received				
	Committee Name						
	Street Address						
2	City	Stale	ZIP				
	Committee ID Number	Date In-Kind Contril	pution Received				
	Committee Name						
	Street Address						
3	City	State	ZłP				
	Committee ID Number	Date In-Kind Contri	oution Received				
+	Committee Name						
	Street Address				**		
4	City	State	ZIP				
	Committee ID Number	Date In-Kind Contril	pution Received				
1	Committee Name						
	Street Address	Street Address					
5	City	State	ZIP				
	Committee ID Number	Dale In-Kind Contri	oution Received	====			
-	Enter total only if last page of	Pohodulo.					



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

	Partnershi	p Contributor Informa	ation	Amount Rec	eived Cumulative Amount this Reporting Perio	Cumulative Amount this d Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Dale In-Kind Contribut	tion Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	tion Received			
	Partnership Name	I				
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	Ilion Received			
19	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Received					
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	Ition Received			

Schedule A(5)(f), page ___ of ___



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

	Corporation /	LLC Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					*
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bulion Received			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibution Received			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibulion Received			
	Corporation/LLC Name					
	Street Address					
4	Gily	Stale	ZIP			
	Corporation Commission File Number	Dale in-Kind Contri	ibution Received			
	Corporation/LLC Name					
	Street Address					
5	City	Slate	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Received					
-	Enter total only if last page of sche	edule				



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

	Labor Organia	zation Contributor In	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	button Received			
	Labor Organization Name					
	Street Address					
2	City State ZIP					
	Corporation Commission File Number	Date In-Kind Contri	button Received			
	Labor Organization Name				,	
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	ibution Received			
	Labor Organization Name	1				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Dale In-Kind Contri	ibution Received			
	Labor Organization Name		-			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number					
- 1	Enter total only if last page of scho					



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

SCHEDULE A(5)(i)

6	Candidate	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received		,	
	Street Address					
1	City	State	ZIP	-		
	Asset or Property Contributed			_		
	Name		Date In-Kind Contribution Received			
	Street Address		-			
2	City	State	ZIP	_		
	Asset or Property Contributed		_			
	Name	Date In-Kind Contribution Received				
	Street Address			_		
3	City	State	ZIP	_		
	Asset or Properly Contributed			_		
	Name		Date In-Kind Contribution Received			
	Street Address		-			
4	City	State	ZIP	_		
	Asset or Property Contributed			-		
	Name	Date In-Kind Contribution Received				
	Street Address		_			
5	City	Slate	ZIP			
	Asset or Property Contributed			-		
						1
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,	line 5(i))				



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

SCHEDULE A(5)(e)

8		Source Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address		1			
	City	State	ZIP			
	Fype of Item Donaled					
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donaled					
	Name		Date In-Kind Donation Received			
	Streel Address			-		
3	City	State	ZIP			
	Type of Item Donated			-		
	Name		Date In-Kind Donation Received			
	Street Address					1
1	City	State	ZIP	-		
	Type of Item Donated		t.	-		
	Name		Date In-Kind Donation Received			
	Street Address	-				
	City	State	ZIP	-		
	Type of Item Donated					
	Enter total only if last page of s (transfer the total received this period to 'Summa					

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



EXTENSIONS OF CREDIT RECEIVED

SCHEDULE A(7)(a)

	Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit	1.	Date of Extension of Credit			
	Name					
	Street Address					
2	City State		ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit	-			
	Name					
ŀ	Street Address					
3	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit	-		
	Name					
	Street Address		-			
4	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit	-			
	Name					
	Street Address					
5	City	Slate	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit				
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts,	line 7(a))				



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Credito	r Information		Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Streel Address					
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit	-		
Ì	Namo					
	Street Address					
3	City	State	ZIP	_		
9	Services or Goods Originally Provided on Gredit		Date of Original Extension of Credit			
-	Name					
	Street Address					
1	City	State	ZIP			
5	Services or Goods Originally Provided on Credit		Date of Original Extension of Credi			
_	Name					
	Street Address	-				
5	City	State	ZIP	_		
3	Services or Goods Onginally Provided on Credit		Date of Original Extension of Credi			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipt					

Schedule A(7)(b), page ___ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Co	mmittee Informatio	on	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Payment Dale				
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
	Committee Name		Payment Date			
	Streel Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (il applicable)			
	Committee Name		Payment Date			
	Streel Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
- 1	Enter total only if last page of schedu					



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor	Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Streel Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Dale			
	Name		1			
1	Street Address					
4	City	State	ZIP			
70	Services or Goods Purchased	Payment Date				
	Name					
27	Street Address					
5	City	State	ZIP			
3	Services or Goods Purchased	Payment Date				
	Enter total only if last page of schedule	* les Q				



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

		nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
İ	Street Address					
1	City	State	ZIP			
Ì	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address			_		
3	City	State	ZIP			
İ	Type of Account Receivable or Debt Owed		Dale that Debt Accrued			
	Name					
	Street Address			=		
1	City	State	ZIP			
ŀ	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
+	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedu			1		



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

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



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Source	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address	eet Address				
1	City	State	ZIP			
	Raceipt Туре		Receipt Date			
	Name					
	Streel Address					
2	City	State	ZIP			
	Receipt Lype		Receipt Date			
1	Name					
	Streel Address					
3	City	Slate	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
1	Name					
	Streel Address					
5	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule			I I		



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

		ient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Printing Plus	06/22/18				
	2069 McCulloch Blvd N	#1			\$823.46	\$823.46
1	Lake Havasu City	AZ ZIP 86403		□ Cash		
	Type of Operaling Expense Paid marketing	Non-Electoral Purpo	ose? (PACs and Political Parties Only)	■ Credit		
	Name	Disbursement Date	9			
	Street Address	1				
2	City	State	ZIP	□ Cook		
	Type of Operating Expense Paid	Non-Electoral Purpo	ose? (PACs and Pointical Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date	9			
	Street Address	1				
3	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpo	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpo	ose? (PACs and Political Parties Only)	☐ Cash☐ Credit		
	Name	Disbursement Date	9			
	Street Address					
5	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid		ose? (PACs and Political Parties Only)	_ □ Credit		
	Enter total only if last page of sched	ule				
	(transfer the total disbursed this period to "Summary of Di	sbursements," line 1)				



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committe	ee Recipient Inforr	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address		_			
2	City State ZIP		ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Streel Address					
3	City	State	ZIP			
	Committee ID Number Date Contribution Made			☐ Cash☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address			_		
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Enter total only if last page of schedule	sements." line 2/a\\				
_	AND TOTAL ORDERINGS WITH JUSTICE TO COMMITTER Y OF DISSUITS	mio Zidiji				



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Actic	on Committee Recipien	t Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	□ Credit				
	Committee Name					
	Street Address					
2	City State ZIP					
	Committee ID Number	Date Contribution I	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	Stale	ZIP	□ Cash		
	Committee ID Number	Date Contribution (Date Contribution Made			
	Committee Name					
	Streel Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution I	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State ZIP				
	Committee ID Number Date Contribution Made		☐ Cash☐ Credit			
	Enter total only if last page of s					



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party R	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Streel Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Streel Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	Committee Name				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State ZIP				
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
1	Enter total only if last page of schedule					



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	hip Recipient Informat	tion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Dale Contribution Med	le	□ Cash □ Credit		
1	Partnership Name					
	Street Address					
	City	State	ZIP	- Cook		
	Corporation Commission File Number	Oate Contribution Mad	de	□ Cash □ Credit		
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	de	☐ Cash☐ Credit		
1	Partnership Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mai	de	☐ Cash		
	Partnership Name					
	Street Address	Street Address				
Ì	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Man	de	□ Credit		
1	Enter total only if last page of sch	edule		- 1		



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

		LC Recipient Inform	ation	Amount Contributed	Amount this Reporting Period	Amount this Election Cycle
1	Corporation/LLC Name					
1	Street Address					
	City Corporation Commission File Number	Slate Date Contribution Made	ZIP	☐ Cash☐ Credit		
-	Corporation/LLC Name					
-						
	Street Address					
2	City State ZIP		ZIP	☐ Cash		
d	Corporation Commission File Number	Dale Contribution Made	-	Credit		
(Corporation/LLC Name	lii .				
5	Street Address					
3	City	State	ZIP			
-	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
(Corporation/LLC Name	orporation/LLC Name				
3	Street Address			-		
4	City	State	ZIP			
c	Corporation Commission File Number	Dale Contribution Made		□ Cash □ Credit		
0	Corporation/LLC Name					
5	Street Address	-				
5	City	State	ZIP			
c	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Enter total only if last page of sched					



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	ization Recipient Info	rmation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Streel Address					
1	City State ZIP		□ Cash			
	Corporation Commission File Number	Dale Contribution Mad	de	☐ Credit		
	Labor Organization Name					
	Street Address					
2	City State ZIP		□ Cash			
	Corporation Commission File Number	☐ Credit				
	Labor Organization Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	de	☐ Credit		
	Labor Organization Name	,1				
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	de	□ Credit		
	Labor Organization Name					
	Street Address					
5	City	State	ZIP	П 0		
	Corporation Commission File Number Date Contribution Made		□ Cash □ Credit	8		
- 1	Enter total only if last page of sch					



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Contribut	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name C				
ì	Street Address					
1	City	State	ZIP			
	Committee ID Number		Date of Onginal Contribution			
	Committee Name		Dale Refund Received			
	Street Address	-	+			
2	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
-	Committee Name		Date Refund Received			
	Street Address	Street Address				
3	City	State	ZIP	-		
	Committee ID Number		Date of Onginal Contribution			
	Committee Name		Date Retund Received			
	Street Address			-		
4	City	State	ZIP	-		
	Committee ID Number		Date of Onginal Contribution	-		
	Committee Name		Date Refund Received			
	Street Address			-		
5	Cily	State	ZIP			
	Committee ID Number	I.	Date of Onginal Contribution	-		



LOANS MADE:

SCHEDULE B(3)(a)

	Borrow	er Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	Stale	ZIP			
	Guarantor/Endorser Name	Date Loan Made	1			
	Borrower Name	- L:		1		
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Dale Loan Made				
	Borrower Name	- J.				
	Street Address			1		
3	City	State	ZIP			
	Guarantor/Endorser Name	Dale Loan Made	,			
	Borrower Name					
	Street Address			_		
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made		<u>-</u>		
	Borrower Name	1				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Dale Loan Made				
	Enter total only if last page of schedule					
=	(transfer the total received this period to "Summary of Receig	is. : iife 3)				



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

6	G	Guarantor Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name	Guarantor Name				
	Street Address					
l d	City	State	ZIP			
ĺ	Borrower Name	Date Loan Guarantee	d			
	Guarantor Name	ll.				
	Streel Address					
2	City	State	ZIP			
	Borrower Name	Dale Loan Guarantee	dd			
	Guarantor Name					
	Street Address		÷			
3	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d d			
	Guarantor Name	Ji,				
	Street Address					
·	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	d			
1	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guarantee	dd .			
- 1	Enter total only if last page of so					



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/	Borrowe	r Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	Cily	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	1	Date Forgiveness Made			
	Street Address		<u></u>			
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	9			
	Borrower Name		Date Forgiveness Made			
	Street Address					
5	City	Stale	ZIP	-		
- 111	Original Amount of Loan	Amount Still Outstanding				

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Lender Name				
	Street Address	1				
1	City	State	ZIP			
	Onginal Amount Borrowed	Amount Still Outstanding	L			
	Lender Name		Date Repayment Made			
	Street Address			<u> </u>	1	
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		_		
_	Lender Name		Dale Repayment Made	-		
	Street Address					
3	City	State	ZIP	_		
	Onginal Amount Borrowed	Amount Still Outslanding	L			
	Lender Name					
			Date Repayment Made			
4	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
_	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	entre entre entre entre entre entre entre entre entre entre entre entre entre entre entre entre entre entre en			

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



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Onginal Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Lender Name		Date Interest Accrued			
	Street Address			-		
2	City	State	ZIP			
	Onginal Amount Borrowed	Amount Still Outstanding				
1	Lender Name		Date Interest Accrued			
	Street Address	*2		-		
3	Cily	Slate	ZIP			
ļ	Original Amount Borrowed	Amount Still Outstanding				
+	Lender Name		Date Interest Accrued			
	Street Address			=		
4	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Interest Accrued			
	Street Address		-			
5	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

Recipient Information Amount Rebated Refunded Refunded Amount his Reporting Period Cougard Poyre Cougard Formation Total RebateRefunded Media Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation Cougard Formation						
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Name of Original Payor Date Rebate/Return Made Street Address 24	1	City	State	ZIP		
Sheet Address 2 Oby State		Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Onginal Payment		
2 City State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State		Name of Original Payor		Date Rebale/Refund Made		
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Name of Original Payor Date Rehater@elevation Medie	2	City	Stale	ZIP		
Street Address City State ZIP Corporation Commission File Number (if applicable) Ongnal Payment Amount Name of Ongnal Payor Name of Ongnal Payor Date Rebate/Refund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Ongnal Payment Amount Name of Ongnal Payor Date Rebate/Refund Made Street Address Date Rebate/Refund Made		Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Onginal Payment		
3 City State ZIP Corporation Commission File Number (if applicable) Onginal Payment Amount Name of Original Payor Name of Original Payor Date Rebate/Relund Made Street Address City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Name of Original Payor Date Rebate/Relund Made Street Address 5 City State ZIP City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Relund Made	\forall	Name of Ooginal Payor	II.	Trate Retrate/Refund Marie		
Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Retund Made Street Address City Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Retund Made Street Address Tup Original Payor Date Rebate/Retund Made Street Address City Street Address Tup		Streel Address				
Name of Ongnal Payor Date Rebate/Refund Made Street Address City State ZIP Corporation Commission File Number (il applicable) Ongnal Payment Amount Name of Ongnal Payor Name of Ongnal Payor Date Rebate/Refund Made Street Address Title Address Street Address Street Address	3	City	State	ZIP		
Street Address City State ZIP Corporation Commission File Number (il applicable) Original Payment Amount Name of Original Payor Name of Original Payor Date Rebate/Refund Made Street Address City State ZIP		Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor		
4 City State ZIP Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Name of Original Payor Date Rebate/Refund Made Street Address City State ZIP		Name of Onginal Payor		Date Rebate/Relund Made		:4
Corporation Commission File Number (if applicable) Original Payment Amount Name of Original Payor Date Rebate/Relund Made Street Address City State ZIP		Streel Address				
Name of Onginal Payor Date Rebate/Relund Made Street Address City Slate ZIP	4	City	State	ZIP		
Street Address City State ZIP		Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Onginal Payor	1	
5 City State ZIP		Name of Original Payor		Date Rebate/Relund Made		
State ZIP		Street Address				
Corporation Commission File Number (if applicable) Original Paymont Amount Name of Original Payor	5	City	State	ZIP		
		Corporation Commission File Number (il applicable)	Original Payment Amount	Name of Original Payor		
		Enter total only if last page of sche				



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

				17	27. III	
/	Candidate Committe	e Recipient Inforr	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Streel Address					
1	City	Slate	ZIP			
	Commillee ID Number	Dale In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Confinbution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	,				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name			1		
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule	meets * line K/all				

Schedule B(5)(a), page ____ of ____



COMMITTEE ID NUMBER

18-NP-005

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

1	Political Action Co	ommittee Recipient	Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	lion Made			
	Committee Name	l.				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ilion Made			
	Committee Name					
	Streel Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Continbu	itron Made			
	Committee Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number	Dale In-Kind Contribu	tion Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	tion Made			
	Enter total only if last page of scheo			<u> </u>		



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party	Recipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	Cily	State	ZIP			
	Commillee ID Number	Date In-Kind Contribution	n Made			
1	Committee Name					
	Street Address					
3	City	State	ZIP			
	Commillee ID Number	Date In-Kind Contribution	n Made			
	Commiltee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name	Committee Name				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Enter total only if last page of schedule	 e				



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partnersh	ip Recipient Informat	tion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
1	Partnership Name				1	
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	lion Made	_		
1	Partnership Name					
:	Street Address					
	Cily	Stale	ZIP			
	Corporation Commission File Number	Date In-Kind Continbut	tion Made			
1	Parfnership Name					
	Street Address					
	City	State	ZĮP			
	Corporation Commission File Number	Dale In-Kind Contribut	tion Made	_		
1	Pertnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
+	Enter total only if last page of sche	dula				



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corneration /	_LC Recipient Inform	action	ľ	Amount	Cumulative Amount this	Cumulative Amount this
	Corporation / I	LC Recipient inform	iation		Contributed	Reporting Period	Election Cycle
	Corporation/LLC Name	orporalion/LLC Name					
	Street Address						
1		Sity State ZIP					
	City	State	ZIP				
	Corporation Commission Hile Number	Dale In-Kind Contributio	n Made				
_	Corporation/LLC Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	on Made				
	Corporation/LLC Name						
	Street Address			*			
3	City	Stale	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	on Made				
_	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	on Made				
_	Corporation/LLC Name						
_	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	on Made				
_	Enter total only if last page of sched						

Schedule B(5)(e), page ___ of ___



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

6	Labor Organ	nization Recipient Info	rmation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name	Labor Organization Name				
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	lion Made			
Ì	Labor Organization Name					
	Street Address					
2	City State ZIP					
	Corporation Commission File Number	Dale In-Kind Contribu	lion Made			
	Labor Organization Name					
	Street Address					
3	Cily	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	lion Made	-		
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	lion Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribu	lion Made			
- 1	Enter total only if last page of sch					
					*	



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

<u> </u>	Expenditure	Recipient Informa	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	ncluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	Slate	ZIP			
	Candidate(s) Supported (including % supported) Gandidate(s) Opposed (including % supported)		ncluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	Slate	ZIP			
	Candidate(s) Supported (including % supported)	adidate(s) Supported (including % supported) Candidate(s) Opposed (including % supported)		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	ncluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Enter total only if last page of schedu	le				
	(transfer the total disbursed this period to "Summary of Disb	ursements," line 6)				



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
İ	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	1	,I			
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
İ	Street Address					
2	City	State	ZIP			
İ	of Measure(s) Supported (including % supported) Bailot Measure(s) Opposed (including		(Including % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, elc)			
Ì	Street Address		<u></u>			
3	City	State	ZIP			
ŀ	Ballof Measure(s) Supported (including % supported)	Ballol Measure(s) Opposed	(including % opposed)	☐ Cash		
ŀ	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
ŀ	Street Address					
1	City	State	ZIP	-		-
	Bailot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
- 1	Enter total only if last page of schedul					



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

/	Expenditure	Recipient Informat	ion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
1	City	Stale	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Streel Address		1			
2	City	State	ZIP	1		
ļ	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Re		ecalled	□ Cash □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		Credit		
	Recipient Name	ii ki	Mode of Advertising (TV, mail, etc)			
	Street Address		'	_		
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled	□ Cash □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
_	Enter total only if last page of schedul					
_	(transfer the total disbursed this period to "Summary of Disb	ursements," line 8)				



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Bene	fitted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address	1				
1	City	State	ŹΙΡ			
	Type of Benefit Provided	ype of Benefit Provided				
	Notes:					
	Candidate Name	_	Date Benefit Provided		,	
	Street Address	ılı.	1			
2	City	State	ZIP			
	Type of Benefit Provided	J				
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address			1		
3	City	State	ZIP			
	Type of Benefil Provided	1 = = =	-			
	Notes:		-			
	Candidate Name		Date Benefit Provided			
	Street Address			==		
4	City	State	ZIP			
	Type of Benefit Provided	Type of Benefit Provided				
	Notes:		-			
- 111	Enter total only if last page of schedu			I.		



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient Co	mmittee Inforn	nation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address	Address				
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	Stale	ZIP			
	Pale of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	□ Cash □ Credit		
-	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared E	xpense (if applicable)	□ Cash □ Credit		
_	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disbursements," line 10)					



REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient Information			Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address				100	
2	City	Blate	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
3	City	Blale	ZIP	□ Cash		
	Services or Goods Reimbursed	Reimbursement Date	□ Credit			
	Name					
	Street Address					
4	City	State	ZIP	☐ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
Ī	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed Reimbursed			☐ Cash☐ Credit		
	Enter total only if last page of schedule					
	transfer the total disbursed this period to "Summary of D			l,		



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	De	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	ame					
	Street Address					
1	City	Stale	ZIP			
	Type of Account Payable or Debt Owed		Dale that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name			Č.		
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
4	City	Stale	ZIP	-		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
_	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of sched	dule				
	(transfer the total received this period to "Summary of Re	ecelpts," line 12)				



TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 14)		

Schedule A(13), page ___ of ___



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

6	Recipient	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	Cily		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
	Street Address					
2	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Dale	Credit		
1	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type	I	Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
1	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	□ Casn		
	Name	/				
	Sireet Address	3				
,	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 12)					