



Committee Information:	Committee Name:	Commitee to Elect Rich Crayne	
TE INFORMATION (only if f	filing as a candidate com	nmittee):	
E INFORMATION (only if f Office Sought:	filing as a candidate com ☐ Statewide Office	W1000-10	☐ State Legislature:

REPORTING PERIOD (check one):

/	REPORTING PERIOD	REPORT DUE			
	2016 4th Quarter Report: October 28, 2016 to December 31, 2016	January 1, 2017 to January 15, 2017			
	2017 March Pre-Election Report (Local Only): January 1, 2017 to February 25, 2017	February 26, 2017 to March 4, 2017			
	2017 1st Quarter Report (Local Only): February 26, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017			
	2017 1st 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	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	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 1st Quarter Report (Local Only): February 25, 2018 to March 31, 2018	April 1, 2018 to April 16, 2018*			
	2018 1st 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	July 1, 2018 to July 16, 2018*			
	2018 2 nd Quarter Report: April 1, 2018 to June 30, 2018	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	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)	\$ 0.00	
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 0.00	
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 0.00	
(d)	= Balance at close of reporting period	\$ 0.00	

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		
j	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	(j) Monetary Contributions Subtotal (add 1(a) through 1(i))	\$ 0.00	
	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))	\$ 0.00	
	Loans		
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made	# 0 00	
	(e) Loans Subtotal (cash; add 2(a), 2(c) & 2(d))	\$ 0.00	
	Rebates and Refunds Received		
	Interest Accrued on Committee Monies		
	In-Kind Contributions Received (a) Individuals - More than \$50		
	Cine.		
	(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))		\$ 0.00
_	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
	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))		\$ 0.00
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
_	Outstanding Accounts Receivable / Debts Owed to Committee		
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
	Miscellaneous Receipts		
	Total Receipts (cash: add 1(i), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12)	\$ 0.00	\$ 0.00

SUMMARY OF DISBURSEMENTS (Schedule B):

/			
	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses		
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	\$ 0.00	
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))	\$ 0.00	
3.	Loans	\$ 0.00	
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))	\$ 0.00	\$ 0.00
4.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		
. ((a) Candidate Committees		
	(b) Political Action Committees		
1	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(j) Contributions Subtotal (add 5(a) through 5(f))		\$ 0.00
6.	Independent Expenditures Made		
7,	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
	Reimbursements Made		
	Outstanding Accounts Payable / Debts Owed by Committee		
	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
_	Miscellaneous Disbursements		
	Aggregate of Disbursements - \$250 or Less		-
10.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)	\$ 0.00	\$ 0.00



COMMITTEE ID NUMBER

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

SCHEDULE A(1)(a)

/	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			-		
2	City	State	ZIP	-		
	Occupation	Employer		-		
	Name	1.	Date Contribution Received			
	Sireet Address					
3	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address	Street Address				
4	City	Slate	ZIP	-		
	Occupation	Employer		-		
_	Name		Date Contribution Received			
	Street Address			-		
5		State	ZIP	-		
	Occupation	Employer		-		
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,	" line 1(a))				

*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)

Candidate Committee Contributor Information Amount Received Amount this A			134			
Street Address Committee ID Number Committee Name Street Address City State ZIP Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee ID Number Date Contribution Messeved Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee ID Number Date Contribution Messeved Committee ID Number Date Contribution Messeved Committee ID Number Date Contribution Messeved Street Address	Can	Candidate Committee Contributor In	nformation	Amount Received	Amount this	Cumulative Amount this Election Cycle
Tolly State Address Committee ID Number	mmillee Name					
Committee Number Streat Address 4 City Committee ID Number Date Contribution Received Committee ID Number Committee Number Committee Number Streat Address 4 City State ZIP Committee Number Committee Number State State ZIP Committee Number Committee Number State ZIP Committee Number State ZIP	eet Address					
Committee Name Street Address 2 City State 2IP Committee Name Street Address 3 City State 2IP Committee Name Street Address 4 City State 2IP Committee ID Number Date Contribution Naceived 5 Committee Name Street Address 4 City State 2IP Committee ID Number Date Contribution Naceived 5 Committee ID Number Date Contribution Received	У	State	ZIP			
Street Address City State 2IP Committee ID Number Uset Contribution Received Street Address City State 2IP Committee Name Street Address City State 2IP Committee Name Street Address City State 2IP Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name Street Address State 2IP Committee Name Street Address State 2IP Committee Name Street Address State 2IP	mmittee ID Number	Date Contribution Re	ceived			
City State 2IP Committee ID Number Date Contribution Received Street Address 2IP Committee Name Street Address 2IP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name Street Address Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name Street Address Committee Name Street Address Committee Name Street Address Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee Name Committee Name Street Address City State ZIP Committee Name Committee Name	mmittee Name	di-				
Committee ID Number Committee Name Street Address State ZIP	eet Address					
Committee Name Sireet Address City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received	у	State	ZIP			
Street Address City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received City State ZIP Committee ID Number Date Contribution Received	mmittee ID Number	Date Contribution Re	ceived			
City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP Committee Name Street Address	mmillee Name	11				
Committee ID Number Date Contribution Received	eel Address					
Committee Name Street Address City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address Total Contribution Received	у	State	ZIP			
Street Address City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP	mmittee ID Number	Date Contribution Re	ceived	_		
4 City State ZIP Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP	Committee Name					
Committee ID Number Date Contribution Received Committee Name Street Address City State ZIP ZIP	Street Address					
Committee Name Street Address City State ZIP	у	State	ZIP			
Sireet Address City State ZIP	mmittee ID Number	Dale Contribution Re	Date Contribution Received			
5 City State ZIP	Committee Name					
City State 211	Street Address			-		
Committee ID Number Date Contribution Received	у	State	ZIP			
	mmittee ID Number	Date Contribution Re	eceived	-		
Enter total only if last page of schedule	nter total only if last p	last page of schedule				

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

/	Political Action Com	nmittee Contributor II	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved			
	Committee Name					
	Street Address		¥			
2	City	State	ZIP			
	Committee ID Number	Date Contribution Recei	ved			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Dale Contribution Recei	ved			
	Committee Name	,,				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved			
	Committee Name					
	Street Address					
5	City	State	ZIP			
1	Committee ID Number	Date Contribution Receiv	ved			

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

/	Political Party Co	ontributor Informat	ion	Amount Received	Cumulative Amount this	Cumulative Amount this
_	Committee Name				Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	d			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
-	Committee Name					
	Street Address					
3	City	State	ZIP	-		
		Date Contribution Receive				
	Committee ID Number	Date Contribution Receive	90			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
5	City	State	ZIP	-		
Н	Committee ID Number	Date Contribution Receive		-		

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

	,						
/	/	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Partnership Name					
		Street Address					
	1	City	State	ZIP			
		Corporation Commission File Number	Uate Contribution Receive	ad .			
		Partnership Name			9		
		Street Address					
	2	City	Slate	ZIP			
		Corporation Commission File Number	Date Contribution Receive	I ed			
		Partnership Name					
		Street Address					
	3	City	Stale	ZIP			
	10	Corporation Commission File Number	Date Contribution Receive	l ed			
		Partnership Name					
		Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number Date Contribution Received					
		Partnership Name					
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	poration Commission File Number Date Contribution Received				
V.		Enter total only if last page of schedule	line 1(f)		l.		
X.	_	The second state of the second					

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

	.9						
/	/	Corporation / LLC C	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
		Corporation/LLC Name					
		Street Address					1
	1	City	Stale	ZIP			
		Corporation Commission File Number	Dale Contribution Receive	d .			
Ì		Corporation/LLC Name					
		Street Address					
	2	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
ł		Corporation/Lt.C Name					
		Street Address					
	3	City	State	ZIP			
		Corporation Commission File Number	Dale Contribution Receive	Ded .			
Ì		Corporation/LLC Name					
		Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number Date Contribution Received					
		Corporation/LLC Name					
		Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Enter total only if last page of schedule	line 1(a))				

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

6	Labor Organiz	ation Contributor Info	rmation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					reporting renou	Liection Cycle
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rece	beved				
	Labor Organization Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Reco	Bived				
_	Labor Organizalion Name				=		X
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rece	eived				
	Labor Organization Name						
	Street Address						
1	City	State	ZIP		-		
	Corporation Commission File Number	Date Contribution Rece	sived				
	Labor Organization Name						
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rece	eived				
4	Enter total only if last page of sche						

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

	Car	didate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
Ì	Street Address					
	Cily	State	ZIP			
ŀ	Occupation	⊫mployer				
1	Name		Date Contribution Received			
ŀ	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Sireel Address			_		
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
ŀ	Occupation	Employer				
	Name	-In	Date Contribution Received			
Ì	Street Address					
	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of sche					



COMMITTEE ID NUMBER

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

/	Contribute	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			20.
	Street Address		<u></u>	i i		
1	City	State	ZIF	i i		
	iD Number (if applicable)	1.	Date of Original Contribution			
	Name		Date Contribution Relunded			
	Street Address					
2	City	State	ZIP			
	ID Number (if applicable)	1	Date of Original Contribution	-	1	
	Name		Date Con(ribulion Refunded			
	Street Address			-		
3	City	State	ZIP	-		
	ID Number (# applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address			+		
5	City	Slate	ZIP	+		
	ID Number (f applicable)		Uale of Original Contribution	+		
	Enter total only if last page of schedule			<u> </u>		
_	(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)

/				Ĺ	Cumulative	Cumulative
	Lei	nder Information		Amount Received		Amount this Election Cyc
	Lender Name	Date Loan Received	Date Loan Received			
	Street Address			1		
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose	e? (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	Date Loan Received			
	Street Address			_		
3	City	State	ZIP			
	Guaranlor/Endorser Name		e? (PACs and Political Parties Only)			
1	Lender Name	Date Loan Received				
	Street Address					
4	City	Slale	ZIP			
	Guaranlor/Endorser Name	Non-Electoral Purpose	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address	-				
5	City	State	ZIP			
	Guaranlor/Endorser Name	Non-Electoral Purpose	e? (PACs and Political Parties Only)			

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



18-NP-011

FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

/	Lender	nformation		Amount Forgiven	Cumulative Amount this	Cumulative Amount this
_	Lender Name		Date Forgiveness Received		Reporting Period	Election Cycle
	Street Address					
1	Gity	State	ZIP			
	Original Amount of Loan	Amount Still Outslanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
2	City	State	ZIP			
	Onginal Amount of Loen	Amount Still Outstanding	Ļ			
	Lender Name	.ender Name				
	Street Address		•			
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
_	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule	line 2/h\\				

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

/		Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Borrower Name		Date Repayment Received			
		Street Address					
	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
ł		Borrower Name		Date Repayment Received			
		Street Address					
	2	City	State	ZIP			
	1	Original Amount Borrowed	Amount Still Outstanding				
ŀ		Borrower Name	İ	Date Repayment Received			
	Į.	Street Address					
1	3	City	State	ZIP			
		Onginal Amount Borrowed	Amount Still Outstanding				
ļ							
		Borrower Name		Date Repayment Received			
		Street Address					
	4	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	•			
		Borrower Name		Date Repayment Received			
		Street Address					
	5	City	State	ZIP			
	35	Original Amount Borrowed	Amount Still Outstanding				
1		Enter total only if last page of schedule					
\ L		(transfer the total received this period to "Summary of Receipts."	mie 2(C))				

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



COMMITTEE ID NUMBER

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/	Borro	ower 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			
	Original Amount Borrowed	Amount Still Outstandi	ng			
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Onginal Amount Borrowed	Amount Still Outstandii	ng			
F	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandii	ng			
	Borrower Name	- !	Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstandi	ng			
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	State	ZÌP			
			E.		I	

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



REBATES AND REFUNDS RECEIVED:

COMMITTEE ID NUMBER 18-NP-011

SCHEDULE A(3)

² ayor Name	Payor Information		Amount Rebated or Refunded	Cumulative Amount this	Cumulative Amount this
Payor Name				Reporting Period	Election Cycl
	Payor Name				
Bireet Address					
City	State	ZIP			
Onginal Purchase Amounl	Reason for Refund/	Rebate			
Borrower Name	<u> </u>	Date Rebate/Relund Received			
Street Address					
Sity	State	ZIP			
Original Purchase Amount Reason for Refunda		Rebale			
Borrower Name		Date Repate/Refund Received			
Street Address					
City	State	ZIP			
Onginal Purchase Amount	Reason for Refund/	Rebate			
Borrower Name		Date Rebate/Refund Received			
Ireet Address					
City	State	ZIP			
Original Purchase Amount	iginal Purchase Amount Reason for Refund/Rebate				
torrower Name		Date Rebate/Refund Received			
Street Address					
Sily	State	ZIP	-		
Original Purchase Amount	Reason for Refund/	Rebale	-		
	Fortower Name Silreet Address Dignal Purchase Amount Fortower Name Forteet Address Silty Diginal Purchase Amount Fortower Name Forteet Address Silty Fortiginal Purchase Amount Forteet Address Fortiginal Purchase Amount Forteet Address Fortiginal Purchase Amount Forteet Address Fortiginal Purchase Amount Fortiginal Purchase Amount	State Street Address Sity State Dinginal Purchase Amount Reason for Refund/ Street Address Sity State Street Address Sity State Dinginal Purchase Amount Reason for Refund/ Street Address Sity State State Sity State State Sity State	Fortower Name Date Rebate/Relund Received	Interest Address State ZIP Reason for Refundiffebate Corrower Name Date Rebate/Refund Received State ZIP Reason for Refundiffebate Corrower Name Date Rebate/Refund Received Reason for Refundiffebate State ZIP Reason for Refundiffebate Date Rebate/Refund Received Reason for Refundiffebate State ZIP Reason for Refundiffebate State ZIP Reason for Refundiffebate Date Rebate/Refund Received Reason for Refundiffebate Date Nabale/Natural Nacarved Date Nabale/Natural Nacarved	

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 / 1 ype of Account)		
Total (Iransfer 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)

/	li	ndividual Contributor Informa	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address			-		
1	City	State	ZIP	-		
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address			-		
4	Cily	State	ZIP			
	Occupation	Employer	Į.	-		
	Name		Date In-Kind Contribution Received			
	Sireel Address					
5	City	State	ZIP			
				1		

*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



18-NP-011

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		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

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

^{*}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	Committee Contributor Ir		Ĩ	Cumulative	Cumulative
			nformation	Amount Received		Amount this
8	Committee Name					
- 1	Streel Address					
1	City	State	ZIP			
C	Committee ID Number	Vale In-Kind ConInbulion Received				
C	Committee Name					
s	Street Address					
2 -	City	State	ZIP			
C	Committee ID Number	Date In-Kind Conlinb	ution Received			
C	Committee Name					
3	Street Address					
3 -	City	State	ZIP			
c	Committee ID Number	Date In-Kind Contrib	ulion Received			
C	Committee Name					
s	Streel Address					
4 0	City	State	ZIP			
c	Committee ID Number Date In-Kind Contribution Received					
c	Committee Name					
Street Address						
5 0	Cily	State	ZIP			
c	Committee ID Number	Date In-Kind Contrib	ulion Received			
F	Enter total only if last page of	schedule				

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

/	Political Action Committ	tee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	Stale	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	City	Stale	ZIP			
	Committee ID Number	Date In-Kind ConInbution	Received			
Г	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
T	Committee Name	1				
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule	line 5(d))				
_	Interested the roter unchined rure beared to , priminary of Heckibis',	mis 2(01)				

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Political Party Co	ntributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name			Troporting Fortou	Election Cycle	
ŀ	Street Address			1		
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received	-		
1	Committee Name					
ŀ	Street Address					
2	City	State	ZIP	_		
ŀ	Committee ID Number	Date In-Kind Contribution	Received	-		
+	Committee Name					
	Streel Address					
3	City	State	ZIP	-		
ŀ	Committee ID Number	Date In-Kind Contribution	Received	-		
+	Committee Name					
	Street Address			-		
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received	_		
+	Committee Name					
-	Street Address					
	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution		4		

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



COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

/	Partnership Co	ntributor Information	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address		_			
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
r	Partnership Name	1				
	Street Address		-			
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Received	-		
F	Partnership Name					
	Street Address		_			
3	3 City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
H	Partnership Name					
	Street Address			-		
4	1 City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	n Received	-		
F	Partnership Name					
	Street Address		-			
5	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
-	Enter total only if last page of schedule	<u></u>				
	(transfer the total received this period to "Summary of Receipt					

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

1						
	Corporation / L	LC Contributor Inform	nation	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 Contribution	n Received			
	Corporation/LLC Name					
	Street Address					
2	City	Stale	ZIP			
	Corporation Commission Hile Number	Date In-Kind Contribution	n Received			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
0	Corporation/LLC Name					
0	Street Address			_		
4	City	State	ZIP	_		
0	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Corporation/LLC Name					
	Street Address		-			
5	City	State	ZIP	-		
100	Corporation Commission File Number	Date In-Kind Contribution	n Received			
-	Enter total only if last page of sched	ule				

Schedule A(5)(g), page ____ of ___



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

	Labor Organ	ization Contributor I	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 Contri	ibulion Received			
	Labor Organization Name					
	Streel Address					
2	City	Stale	ZIP			
	Corporation Commission File Number	Dale In-Kind Conti	nbution Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Conti	nbulion Received			
	Labor Organization Name	J,				
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Conti	ribution Received			
	Labor Organization Name					
	Street Address					
9	City	Stale	ZIP			
	Corporation Commission File Number	Date In-Kind Conti	ribution Received			
	Enter total only if last page of scl	nedule				

Schedule A(5)(h), page ____ of ___



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

SCHEDULE A(5)(i)

<u>e</u>	Candida	te 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			
	Streel Address					
2	City	Slate	ZIP	1		
3	Asset or Property Contributed			-		
-	Name		Date In-Kind Contribution Received			
	Street Address			-		
3	City	State	ZIP	-		
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP	-		
	Asset or Property Contributed	1				
	Name		Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP	-		
	Asset or Property Contributed					
	Enter total only if last page of schedule			l		
	(transfer the total received this period to "Summary of Receipt	s," line 5(i))				



committee id number 18-NP-011

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

SCHEDULE A(5)(e)

0	Source I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Donation Received				
	Street Address					
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address		1	1		
2	City	State	ZIP			
	Type of Item Donaled		1			
	Name		Date In-Kind Donation Received			
	Street Address	1				
3	City	Slate	ZIP	1		
	Type of Item Donated					
	Name	Name				
	Street Address		L	1		
4	City	Slate	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address		1	1		
5	City	State	ZIP			
	Type of Item Donated	-				
- 1	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts,"	line 5(e))				



EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

Ö	Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Streel Address					
1	Спу	State	ZIP			
	Services or Goods Provided on Credit	1,	Date of Extension of Credit			
Ī	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit				
	Name		<u> </u>			
	Street Address					
4	City	Slate	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name		9			
	Street Address					
5	City	State	ZIP			
	Services or Goods Provided on Credit	11	Date of Extension of Credit			
	Enter total only if last page of schedule					



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Creditor	Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					
	Street Address	·	·			
1	City	State	ZIP			
	Services or Goods Originally Provided on Credil		Date of Onginal Extension of Credit			
	Name		··!			
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP	1		
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
4	City	State	ZIP			
2000	Services or Goods Originally Provided on Credit		Date of Onginal Extension of Credit			
1	Name					
	Street Address			-		
5	City	State	ZIP	-		
	Services or Goods Onginally Provided on Credit		Date of Original Extension of Credit	-		
4	Enter total only if last page of schedule					

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payor Co	ommittee Informatio	on	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name		Payment Date			
Street Address					
City	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (il applicable)			
Committee Name		Payment Dale			
Sireet Address					
City	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	se (il applicable)			
Committee Name		Payment Date			
Street Address					
City	Slate	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
Committee Name		Payment Date			
Street Address					
City	Stale	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
Committee Name		Payment Date			
Street Address					
City	Stale	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
Enter total only if last page of scheo					



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor I	nformation		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 Dale			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
İ	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased	<u> </u>	Payment Date			
	Name		<u> </u>			
	Street Address					
5	City	State	ZIP			
	Services or Goods Purchased		Раутеnt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts,"	line 9)				



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Infor	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	Stale	ZIP			
	Type of Account Receivable or Debt Owed	11-	Date that Debt Accrued			
	Name					
	Street Address			1		
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
3	City	State	ZIP			
	l ype of Account Receivable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule	line 10)				



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

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

Schedule A(11), page ___ of ___



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

		nformation		Amount	Amount this Reporting Period	Amount this Election Cycle
	Name					
	Street Address	treet Address				
1	City	State	ZIP			
	Receipt Type		Receipt Date			
1	Name					
Ì	Street Address					
2	City	Stale	ZIP	-		
,	Receipt Type	I.	Receipt Date			
1	Name					
ŀ	Street Address					
3	City	State	ZIP			
,	Receipt Type		Receipt Date			
1	Name					
ŀ	Street Address					
1	Cily	State	ZIP	_		
	Receipt Type		Receipt Date			
+	Name					
ŀ	Street Address					
;	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule		1			



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

		ient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursement Date				
	Street Address					
1	City	State ZIP				
	l ype ol Operaling Expense Paid	Non-Electoral Purpo	se? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address					
2	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpo	se? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address	I				
3	City	State	ZIP	☐ Cash		
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date				
	Street Address		-			
4	City	State	ZIP			
	Турв of Operating Expense Paid	Non-Electoral Purpo	se? (PACs and Political Parties Only)	☐ Cash☐ Credit		
_	Name	Disbursement Date				
	Street Address					
5	City	Slale	ZIP	-		
	Type of Operating Expense Paid	Non-Electoral Purpo	se? (PACs and Political Parties Only)	☐ Cash ☐ Credit		
- 1	Enter total only if last page of schedu transfer the total disbursed this period to "Summary of Dis					



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committe	e Recipient Inforr	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
1	Street Address		,			
1			ZIP	_ □ Cash		
	Committee ID Number	Dale Contribution Made		☐ Credit		
	Committee Name					
2	Streel Address		·			
-	City	State Date Contribution Made	ZIP	□ Cash		
	Committee ID Number		☐ Credit			
	Committee Name					
2	Street Address		.			
	City	State	ZIP	☐ Cash		
	Committee ID Number Dale Contribution Made Committee Name			☐ Credit		
			_			
4		Sireel Address				
	City	Slate	ZIP	☐ Cash☐ Credit		
	Committee ID Number	Date Contribution Made		LI Oredit		
	Committee Name			_		
5	Street Address	Clate	ZIP	_		
	City	State	ZIF	☐ Cash☐ Credit		
	Committee ID Number	Date Contribution Made		L Great		
- 1	Enter total only if last page of schedule (transfer the lotal disbursed this period to "Summary of Disbursements," line 2(a))					



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

nmittee Name pet Address nmittee ID Number nmittee Name pet Address nmittee ID Number	State Date Contribution Made State Date Contribution Made	ZIP	□ Cash □ Credit		
nmittee ID Number nmittee Name set Address	Date Contribution Made		□ Credit		
nmittee ID Number mmittee Name pet Address	Date Contribution Made		□ Credit		
nmittee Name pet Address nmittee ID Number	State	ZIP	□ Credit		
nmittee ID Number		ZIP	□ Cook		
nmittee ID Number		ZIP	□ Cook		
nmittee ID Number		ZIP	□ Coob		1
	Date Contribution Made		I 🗆 Cook		
nmittee Name		D Number Date Contribution Made			
	Committee Name				
et Address					
	State	ZIP			
nmillee ID Number	Date Contribution Made		☐ Cash☐ Credit		
Committee Name					
eel Address					
	State	ZIP			
nmittee ID Number	Date Contribution Made		□ Cash □ Credit		
nmittee Name					
vet Address					
	State	ZIP			
Committee ID Number Date Contribullon Made		□ Cash □ Credit			
Enter total only if last page of schedule					
nnn	nittee ID Number Address nittee ID Number er total only if last page of schedule	State Date Contribution Made inittee ID Number State State State Date Contribution Made	State ZIP Date Contribution Made Address State ZIP Date Contribution Made ZIP Date Contribution Made	State ZIP Cash Credit Credit Credit Credit Date Contribution Made Credit	State ZIP Cash Credit C



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party R	ecipient Information	on	Amount Contributed	Cumulative Amount this	Cumulative Amount this
	Committee Name				Reporting Period	Election Cycle
	Street Address			-		
1	City	State	ZIP			
	Committee ID Number	(Date Contribution Made		☐ Cash ☐ Credit		
	Committee Name			+		
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Streel Address					
3	City	Slate	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	Stale ZIP		_		
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
_	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disburse	ments," line 2(c))				



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnership	Recipient Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name					
	Streel Address					
	City	State	ZIP	7.		
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit		
	Partnership Name					
	Street Address					
	City	State	ate ZIP			
	Corporation Commission File Number	Dale Contribution Made		☐ Cash☐ Credit		
1	Partnership Name					
	Street Address					
	City	Slate	ZIP			
	Corporation Commission File Number	Dale Contribution Made		□ Cash □ Credit		
	Partnership Name					
ļ						
	Street Address		1			
	City	Slate	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name					
ı	Street Address					
l	City	State	ZIP	☐ Cash		
Ì	Corporation Commission File Number	Date Contribution Made	10	□ Credit		
1	Enter total only if last page of sched	Enter total only if last page of schedule				



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	/ LLC Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City Corporation Commission File Number	State Date Contribution Made	ZIP	☐ Cash☐ Credit		
	Corporation Commission File Number	Date Contribution Made		□ Credit		
	Corporation/LLC Name					
	Street Address					
2	Cily	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	е	☐ Credit		
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP	☐ Cash		I
	Corporation Commission File Number	mission File Number Date Contribution Made		☐ Credit		
	Corporation/LLC Name	orporation/LLC Name				
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	е	□ Credit		
1	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	9	□ Credit		
1	Enter total only if last page of schedule ransfer the total disbursed this period to "Summary of Disbursements," line 2(e))					-



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	nization Recipient Infor	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Labor Organization Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	e	□ Credit		
	Labor Organization Name					
	Street Address					
2	City State ZIP					
	Corporation Commission File Number	Date Contribution Mad	В	☐ Cash☐ Credit		
	Labor Organization Name					
100	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number Date Contribution Made			□ Credit		
	Labor Organization Name					
	Street Address			=====		
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	ie	□ Credit		
	Labor Organization Name					
	Street Address					
5	City	State ZIP		□ Cooh		
	Corporation Commission File Number	Date Contribution Mad	e	□ Cash □ Credit		
	Enter total only if last page of sch					



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl
	Committee Name		Date Refund Received			
	Street Address			=		
1	City	State	ZIP	_		
	Committee ID Number	V	Date of Original Contribution	-		
	Committee Name		Dale Refund Received			
Street Addre	Street Address					
2	City	State	ζIÞ			
	Committee ID Number		Đate of Original Contribution			
	Committee Name	Committee Name				
	Street Address					
3	City	Slale	ZIP	-		
	Committee ID Number		Date of Original 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	Street Address		-		
5	City	Slale	ZIP	-	8	
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule					

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



LOANS MADE:

SCHEDULE B(3)(a)

/	Borrov	ver Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address	eet Address				
1	City	State	ZIP			
	Guaranlor/Endorser Name	Date Loan Made	_l;			
	Borrower Name					
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
$\frac{1}{1}$	Borrower Name					
:	Street Address					
3			·			
	City	State	ZIP			
Ì	Guarantor/Endorser Name	Date Loan Made	Date Loan Made			
1	Borrower Name					
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
+	Borrower Name					
	Street Address					
5	Сну	Stale	ZIP	_		
	Guarantor/Endorser Nama	Date Loan Made				
1						

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



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

		Guarantor Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guarani	leed			
	Guarantor Name	Ų.				
	Street Address					
2	City	State	∃IP =			
	Borrower Name	Date Loan Guaran	leed			
8	Guarantor Name					
	Street Address					
3	Cily	State	ZIP			
	Borrower Name	Date Loan Guaran	leed			
Ì	Guaranlor Name	I.				
	Street Address					
4	City	State	ZIP			
	Borrower Name	Dale Loan Guaran	teed			
	Guarantor Name					
	Street Address					
5	City	Slate	ZIP			
	Borrower Name	Date Loan Guaran	teed			
	Enter total only if last page of	of schedule				

Schedule B(3)(b), page ___ of ___



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FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/						
	Borrower	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Uate Forgiveness Made			*:
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	1			
	Borrower Name		Date ⊢orgiveness Made			
	reel Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address		(,			
3	City	State	ZIP			
	Onginal Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
5	Cily	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	_			
	Enter total only if last page of schedule					

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender I	nformation		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ì	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP			
	Onginal Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
2	City State		ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding				
-	Lender Name		Date Repayment Made			
	Street Address					
3	City	Stale	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Repayment Made			
2	Street Address			_		
4	City	State	ZIP			
J	Original Amount Borrowed	Amount Still Outstanding		_		
	Lender Name		Date Repayment Made			
3	Street Address					
5	Сіту	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				

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



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

					20		
/	/.	Lender	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Lender Name		Date Interest Accrued			
		Street Address					
	1	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	1.			
F		Lender Name		Date Interest Accrued			
		Street Address					
	2	City	State	ZIP			
		Onginal Amount Borrowed	Amount Still Outstanding				
r		Lender Name	I.	Date Interest Accrued			
		Street Address		b _i			
:	3	City	State	ZIP			
	l	Original Amount Borrowed	Amount Still Outstanding		1		
r		Lender Name	Į.	Date Interest Accrued			
	ľ	Street Address					
4	4	City	State	ZIP			
	Ì	Original Amount Borrowed	Amount Still Outstanding				
F		Lender Name	I:	Date Interest Accrued			
		Streel Address		L			
5	5	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-	- 10	Enter total only if last page of schedule) = C =		- II. — — — — — — — — — — — — — — — — — —		
L	1	transfer the total disbursed this period to "Summary of Disburses	ments," line 3(e))				

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	Rec	ipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Uate Rebate/Refund Made			
	Street Address					
1	City	State	ZIP	1		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
2	City	State	219			
	Corporation Commission File Number (il applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Dale Rebate/Refund Made			
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Onginal Payment Amount	Name of Original Payor			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
4	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor		Dale Rebale/Refund Made			
	Street Address			-		
	City	State	ZIP	_		
5		I II	II.	1	1	l

Schedule B(4), page ____ of



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/.	/	Candidate Committe	e Recipient Inforr	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name					
		Street Address					
	1	City	State	ZIP			
		Committee (D Number	Date In-Kind Contribution	Made			
-		Committee Name					
		Street Address					
	2	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
ŀ		Committee Name					
		Street Address					
	3	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
Ī		Committee Name					
		Street Address					
	4	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
	1	Committee Name					
		Street Address					
	5	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
-	+	Enter total only if last page of schedule					
L		(transfer the total disbursed this period to "Summary of Disburser	ments," line 5(a))				

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/				ĭ	Ĩ ourselstins	Currelative
	Political Actio	n Committee Recipier	nt Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ΔIP			
7.5	Committee ID Number	Date In-Kind Cont	nbulion Made			
	Committee Name	L.				
	Street Address					
2	City	State	ZIP			
8	Committee ID Number	Date In-Kind Con	Inbulion Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			d.
	Committee ID Number	Date In-Kind Con	tribution Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	tribution Made		-	
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Dale In-Kind Con	tribution Made			
4	Enter total only if last page of s	ab a dula				

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/						
	Political Party Ro	ecipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Streel Address					
1	City State ZIP		ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	Slate	ZIP			
	Committee ID Number	Dale In-Kind Contribution	Made			
	Committee Name			_		
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Streel Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule	ments " line Stew				

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/						
/	Partnership Re	cipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Streel Address					
1	City	Slate	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name	1				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission ⊱ile Number	Date In-Kind Contribution	Made			
	Partnership Name	1:				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name	Partnership Name				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
П	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disburs	1				

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	/					er o	
/		Corporation / LLC i	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Cor	rporation/LLC Name					
	Str	reet Address			-		
1	City	у	State	ZIP			
	Cor	rporation Commission File Number	Date In-Kind Contribution	Made			
-	Cor	rporation/LLC Name					
	Stre	eel Address					
2	City	У	State	ZIP			
	Cor	rporation Commission File Number	Date In-Kind Contribution	Made			
-	Cor	rporation/LLC Name					
	Stre	eet Address	PP.				
3	City	y	Stale	ZIP			
	Cor	rporation Commission File Number	Date In-Kind Contribution	Made			
-	Соп	rporation/LLC Name					
	Stre	eel Address					
4	City	1	Slale	ZIP			
	Соп	poration Commission File Number	Date In-Kind Contribution	Made			
	Соп	poration/LLC Name					
	Stre	eet Address					
5	City		State	ZIP			
	Соп	poration Commission File Number	Date In-Kind Contribution	Made			
_		ter total only if last page of schedule					
	(tran	sfer the total disbursed this period to "Summary of Disburser	nents," line 5(e))				——— <u> </u>

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organia	zation Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
Ì	Street Address					
1	City	State	ZIP			
Ì	Corporation Commission File Number	Date In-Kind Contribu	ution Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Labor Organization Name					
3	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Made			
	Enter total only if last page of sche					
_	(transfer the total disbursed this period to "Summary of	Disbursements," line 5(f))				



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/	Expenditure	Recipient Informa	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		. <u>I</u> (=			
1	City	Stale	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	Lincluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (1V, mail, etc)			
	Street Address			-		
3	City	State	ZIP	-		
20	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
4	City	State	ZiP	-		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
-	Enter total only if last page of schedul		II.			

Schedule B(6), page ___ of ___



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure I	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		<u></u>			
1	City	State	ZIP			
	Hallot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % apposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	State	ZIP	1		
	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)			
	Street Address					
3	City	State	ZIP			
	Hallot Measure(s) Supported (including % supported)	Hallot Measure(s) Opposed	(including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name	L	Mode of Advertising (TV, mail, etc)			
	Street Address		i			
4	City	State	ŽIP			
	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		
	Enter total only if last page of schedul			1		



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

_	Expenditure	Recipient Inform	nation	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		3			
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to b	e Recalled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
-	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
2	City	Stale	ZIP	†		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to b	pe Recalled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
3	Cily	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to b	ne Recalled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
_	Recipient Name	1	Mode of Advertising (TV, mail, etc)			
	Street Address		- 4	1		
4	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled		_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	d Office Held		_ □ Credit		
-	Enter total only if last page of schedul					

Schedule B(8), page ___ of ___



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Benefitt	ed Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address					
1	City	State	KIB			
Ì	Type of Benefit Provided	ļ.				
	Notes:			1		
1	Candidate Name		Date Benefit Provided			
Ì	Street Address			-		
2	City	State	ZIP			
Ì	Type of Benefit Provided	i.	1	1		
	Notes:			-		
	Candidate Name		Date Benefit Provided			
Ì	Street Address					
3	City	State	ZIP			
Ì	Type of Benefit Provided	5				
	Notes:					
1	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
4	Enter total only if last page of schedule			1		

Schedule B(9), page ____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient	Committee Inform	nation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP	III Cook		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	rpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address		<u> </u>			
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	KIB	ПОоор		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	xpense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ďР			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	spense (if applicable)	☐ Cash☐ Credit☐ Credit☐ ☐ Cash☐ ☐ Credit☐ ☐ Cash☐ ☐ C		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
9	ite of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable)		pense (if applicable)	☐ Cash☐ Credit		
	Enter total only if last page of schedule					
	(transfer the total disbursed this period to "Summary of Disbursements," line 10)					



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REIMBURSEMENTS MADE:

SCHEDULE B(11)

•	Recipien	t Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	•	Reimbursement Date	☐ Credit		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City State		ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
_	Name					
	Street Address					
4						
	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	Reimbursement Date	☐ Credit			
	Name					
	Street Address					
5	City	State	ZIP	III Cook		
	Sorvices or Goods Reimbursed Reimbursement Date			☐ Cash☐ Credit		
	Enter total only if last page of schedule					
	(fransfer the total disbursed this period to "Summary of Disburs	ements," line 11)				



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

8	Debt Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Nama					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP	-		I
	Type of Account Payable or Debt Owed	<u></u>	Date that Debt Accrued			
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
_	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			

Schedule B(12), page ____ of ___



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 1/1)		



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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipient Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Addrass					
1	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
ı	Street Address					
2	City		ZIP	□ Cash		
İ	Disbursement Type		Disbursement Date	□ Credit		
1	Name					
İ	Street Address					
1	City		ZIP	□ Cash		
	Disbursement Type		Disbursement Date	□ Casii		
	lame					
İ	Street Address					
	City		ZIP	☐ Cash		
	Disbursement Type	A.	Disbursement Date	□ Credit		
1	Name					
	Street Address					
5	City	State	ZIP	- Cook		
	Disbursement Typo		Disbursement Date	☐ Cash☐ Credit		
- 1	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 12)					
	(transfer the total disbursed this period to 'Summary of Disburse	ments,* line 12)				