



Committee	Information:	Committee Name:	Protect the Public from S	Special Interests
CANDIDATE INFORMATION (only if filing as a candidate committee):  Office Sought:   County Office:   Special District Office:				
Office Soug	Office Sought: ☐ County Office:			☐ Special District Office:
		☐ City/Town Office		☐ School Board District:
Cumulative	Report:		- ve '-e u m	
☐ Check	here if this is th	e candidate committees	first, cumulative report for the ele	ection cycle. Also select appropriate Reporting Period below.
Cumulative	e reporting perio	od start date (which supe	ersedes the start date for the Rep	orting Period selected below):
EPORTING PERIOD	(check one)			

/	REPORTING PERIOD	REPORT DUE
	2020 4th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 2021
	2021 March Post-Election (Q1) Report (Local Only): February 21 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021*
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2021 to February 26, 2022
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
<b>√</b>	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
	2022 Post-Primary Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2021 to October 29, 2022
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

\*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
<ul> <li>a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)</li> </ul>	\$ 15,000.00	
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	\$ 15,000.00	



Under A.R.S. § 16-926(B)(5), a campaign finance report must be certified by the committee treasurer under penalty of perjury that the contents of the report are true and correct.

By filing this report, you certify that, under penalty of perjury, you have examined the contents of this report, and the contents are true and correct.

James McGue

Printed Name of Committee Treasurer

Signature of Committee Treasurer

04/04/2022

Date

SUMMARY OF RECEIPTS (Schedule A):

	Receipts		Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committees	<del></del>	
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Monies (Candidate Committees Only)		
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		
	(I) Refunds Given Back to Contributors		
	(m) Net Monetary Contributions (subtract 1(l) from 1(k))		
2	Loans		
	(a) Loans Received		
	(b) Forgiveness on Loans Received		
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
) <u>.</u>	Rebates and Refunds Received		
<u> .                                    </u>	Interest Accrued on Committee Monies		
5.	In-Kind Contributions Received	<del></del>	
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals (d) Candidate Committees		
	(e) Political Action Committees (f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)	<u> </u>	
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
). 	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
<u>'.                                    </u>	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))	<u> </u>	
3.	Joint Fundraising / Shared Expense Payments Received		
). 	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)		
	Miscellaneous Receipts (use cash and/or equity as applicable)		

# SUMMARY OF DISBURSEMENTS (Schedule B):

/		1 0	
	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses		
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties	1 1	
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
***********	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3.	Loans		
	(a) Loans Made		
	(b) Loan Guarantees Made		The state of the s
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4.	Rebates and Refunds Made (Non-Contributions)		10 TO
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
_	(c) Political Parties		
	(d) Partnerships		
	3.1. (Constant report of the Constant of the C		
_	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
6.	(g) Contributions Subtotal (add 5(a) through 5(f)) 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	1 3	
11.			
12.			
13.			
-			
14.			1 1 - 1.5
15.			-
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)		



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

SCHEDULE A(1)(a)

/	Ind	lividual Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
			1			
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
_	Name		Date Contribution Received			
	Street Address			_		
3	City	State	ZIP	_		
	Occupation	Employee		_		
	Cecupacan	Employer				
	Name		Date Contribution Received			
	Street Address	Street Address				
4	City	State	ZIP			
	Occupation Employer					
	Name	Name				
	Street Address	Street Address				
5	City	State	ZIP			
	Occupation	Employer				

\*If in-state individual contributions of \$100 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

Schedule A(1)(a), page\_\_\_\_ of \_\_\_



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

SCHEDULE A(1)(b)

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

\*If in-state individual contributions of more than \$100 are listed on Schedule A(1)(a), do not include them.



#### MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

/	Individua	l Contributor Informat	ion	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					
r	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name Date Contribution Re					
	Street Address			-		1
4	City	State	ZIP	-		
	Occupation	Employer		-		1
	Name		Date Contribution Received			
	Street Address	Street Address				
5	City	State	ZIP	-		= -
	Occupation	Employer				
	Enter total only if last page of scholtransfer the total received this period to	edule to "Summary of Receipts	s," line 1(c))	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	77.30 11.49	

Schedule A(1)(c), page\_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

	Candidate Committee	e Contributor Infor	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	=		
	Committee ID Number	Date Contribution Receive	I ed			
	Committee Name			-		
	Street Address				= =	
2	City	State	ZIP	11		
	Committee ID Number	Date Contribution Received		=		
	Committee Name					
	Street Address					
3	City	State	ZIP	-	-	
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address			at a		
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed	п	-	
	Committee Name				To the	
	Street Address	Street Address				
5	City	State	ZIP	1		
	Committee ID Number	Date Contribution Receiv	ed	-		
	Enter total only if last page of schedule (transfer the total received this period to "Su	mmary of Receipts."	ine 1(d))			

Schedule A(1)(d), page\_\_\_\_ of \_\_\_

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/		ommittee Contributo	or Information	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 R	eceived			
	Committee Name					
	Street Address	·				
2	City	State	ZIP		-	
	Committee ID Number	Date Contribution 6	Received	=	-	
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution F	Received			
	Committee Name	Committee Name				-
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution f	Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	ittee ID Number Date Contribution Received				

Schedule A(1)(e), page\_\_\_\_ of \_\_\_

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

Political Party Co	entributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP	1 1		
Committee ID Number	Date Contribution Receive	I.			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Receive	ed			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Receive	ed			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Received				
Committee Name					
Street Address			-		
City	State	ZIP			
	Date Contribution Receiv				
	Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  Committee ID Number  Street Address  City  Committee ID Number  Committee Name  Street Address  Street Address	Committee Name  City State  Committee ID Number Date Contribution Receive  Committee Name  Street Address  City State  Committee ID Number Date Contribution Receive  Committee Name  Street Address  City State  Committee Name  Street Address  City State  Committee ID Number Date Contribution Receive  Committee ID Number Date Contribution Receive	Street Address  City State ZiP  Committee ID Number Date Contribution Received  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 ID Number Date Contribution Received  Committee ID Number Date Contribution Received	Street Address   State   ZiP	Political Party Contributor Information  Amount Received Amount this Reporting Period  Committee Name  Street Address  City State Z.P  Committee Name  Street Address  City State Z.P  Committee ID Number Date Contribution Received  Committee ID Number Date Contribution Received

Schedule A(1)(f), page\_\_\_\_ of \_\_\_\_



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnersh	ip Contributor Inform	ation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name		- ×				
	Street Address				ā.		
1	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Rea	ceived				
	Partnership Name	-	_				
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number Date Contribution Received						
	Partnership Name						
	Street Address	_					
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Re	eceived				
	Partnership Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	ommission File Number Date Contribution Received					
	Partnership Name						
Street Address				-			
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Re	eceived			-	
	Enter total only if last page of sch (transfer the total received this period	ledule to "Summary of Receipt	s," line 1(g))				11.00

Schedule A(1)(g), page\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

Corporation / LLC C	antributor Inform	ation	Amount Bossiyad	Cumulative	Cumulative
	Ontributor inform	auon	Amount Received	Amount this Reporting Period	Amount this Election Cycle
Corporation/LLC Name					
Street Address		·····	•		
City	State	ZIP	-		
Corporation Commission File Number Date Contribution Received					
Corporation/LLC Name					
Street Address				-	
City	State	ZIP			
Corporation Commission File Number	Date Contribution Receive	ed	1		
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date Contribution Receive	ed			
Corporation/LLC Name					
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date Contribution Received				
Corporation/LLC Name	<u> </u>				
Street Address					
City	State	ZIP			
Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation Commission File Number  Corporation/LLC Name  Street Address  City  Corporation/LLC Name	Corporation Commission File Number  Corporation/LLC Name  Street Address  City State  Corporation Commission File Number Date Contribution Receive  Corporation/LLC Name  Street Address  City State  Corporation/LLC Name	City State   ZIP   Corporation Commission File Number   Date Contribution Received   CorporationALC Name Street Address   City   State   ZIP   CorporationALC Name Street Address   City   State   ZIP   CorporationALC Name  Street Address   City   State   ZIP   CorporationALC Name  Street Address   City   State   ZIP   CorporationALC Name  Street Address   City   State   ZIP   CorporationALC Name  Street Address   City   State   ZIP   CorporationALC Name   Street Address   City   State   ZIP   CorporationALC Name   Street Address   City   State   ZIP   CorporationALC Name   Street Address   City   State   ZIP   CorporationALC Name   Street Address   City   State   ZIP   CorporationALC Name   Street Address   City   State   ZIP   CorporationALC Name   Street Address   City   State   ZIP   CorporationALC Name   CorporationALC Na	City State   ZIP   Corporation Commission File Number   Date Contribution Received   CorporationALC Name   Street Address   City   State   ZIP   Corporation Commission File Number   Date Contribution Received   CorporationALC Name   Street Address   City   State   ZIP   CorporationALC Name   Cor	City  State  Obts Contribution Received  Obts Contribution Received  Corporation Commission File Number  Obts Contribution Received  Obts Contribution Received  Obts Contribution Received  Corporation Commission File Number  Obts Contribution Received  Corporation Commission File Number  Obts Contribution Received  City  State  Date Contribution Received  Corporation Commission File Number  Obts Contribution Received

Schedule A(1)(h), page\_\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

/		zation Contributor In	formation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name						
	Street Address						
1	City	State	ZIP		-		
	Corporation Commission File Number  Date Contribution Received						
	Labor Organization Name						11
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution F	Received				
	Labor Organization Name						
	Street Address						
3	City	State	ZIP		-		
	Corporation Commission File Number	Date Contribution F	Received		-		
	Labor Organization Name						
	Street Address				-		
4	City	State	ZIP		-		
	Corporation Commission File Number	Date Contribution F	Date Contribution Received				
	Labor Organization Name						
	Street Address			1			
5	City	State	ZIP		1		
	Corporation Commission File Number Date Contribution Received		-				

Schedule A(1)(i), page\_\_\_\_ of \_\_\_



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

/	/		Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name		Date Contribution Received			
		Street Address	L	1			
	1	City	State	ZIP			
		Occupation	Employer				
		Name		Date Contribution Received		, and a	
		Street Address					
	2	City	State	ZIP	× ×		
		Occupation	Employer				
ľ		Name		Date Contribution Received			
		Street Address					
	3	City	State	ZIP			
		Occupation	Employer				
r		Name		Date Contribution Received			
		Street Address					
	4	City	State	ZIP			
		Occupation	Employer			ä	
r		Name		Date Contribution Received			
		Street Address					
	5	City	State	ZIP			
		Occupation	Employer				
		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(j))		-> - 1	



**REFUNDS GIVEN BACK TO CONTRIBUTORS:** 

SCHEDULE A(1)(I)

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			
	Street Address			1		
1	City	State	ZIP			
	ID Number (if applicable)	<u> </u>	Date of Original Contribution			
	Name		Date Contribution Refunded			,
	Street Address					
2	City	State	ZiP	1		
	ID Number (if applicable)	Date of Original Contribution	1			
┢	Name		Date Contribution Refunded			_
	Street Address			1		
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address		<u>. I</u>			
4	City	State	ZiP			:
	ID Number (if applicable)	<u> </u>	Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address			1		
5	City	State	ZIP			
	ID Number (if applicable)	D Number (if applicable)				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(l))			:

Schedule A(1)(I), page \_\_\_\_ of\_\_\_



LOANS RECEIVED:

SCHEDULE A(2)(a)

/	Lender	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	der Name Date Loan Received				
	Street Address		<del>1900 (1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 -</del>			
1	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				
	Street Address					
4	City	State	ZIP	-		
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
	Lender Name	Date Loan Received				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (	PACs and Political Parties Only)			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	nmary of Receipts "	line 2(a))	5 . 4	2 - 1 -	

Schedule A(2)(a), page\_\_\_\_ of \_\_\_\_



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

/		Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
	Street Address	2				
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding			9	
	Lender Name		Date Forgiveness Received			
	Street Address					
2	City	State	ZIP		× -	
	Original Amount of Loan	Amount Still Outstanding			-	
	Lender Name		Date Forgiveness Received			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received	-		
	Street Address				-	
4	City	State	ZIP		-	
	Original Amount of Loan	Amount Still Outstanding		-		
	Lender Name		Date Forgiveness Received			
	Street Address			-		
5	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		_		

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
Γ	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP			
ĺ	Original Amount Borrowed	Amount Still Outstanding		1		
r	Borrower Name	<u>l</u>	Date Repayment Received			-
	Street Address		<u> </u>	-		
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
r	Borrower Name		Date Repayment Received			
	Street Address	-		1		
3	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding	I			
r	Berrower Name	L	Date Repayment Received			
	Street Address			-		
4	City	State	ZIP	1		
	Original Amount Borrowed	Amount Still Outstanding		1		
	Borrower Name	<u> </u>	Date Repayment Received			
	Street Address		<u> </u>	1		
5	City	State	ZiP	-		
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>	-		
$\vdash$	Enter total only if last page of schedule	mone of Description	Fine 2(a)\	<u> </u>		
$\Box$	(transfer the total received this period to "Sum	inally of Receipts,			L	

Schedule A(2)(c), page\_\_\_\_ of \_\_\_\_

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/_	_	Вогтоwer	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Ì		Borrower Name		Date Interest Accrued			
		Street Address					
	1	City	State	ZIP			
		Original Amount Berrowed	Amount Still Outstanding				
t		Borrower Name		Date Interest Accrued			-
		Street Address					
	2	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding			,	
ŀ		Borrower Name		Date Interest Accrued			
		Street Address					
	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-		Borrower Name		Date Interest Accrued			
l		Street Address		<u> </u>			
ı	4	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-		Borrower Name		Date Interest Accrued			
		Street Address		<u> </u>			
	5	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
ŀ		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," f	ine 2(d))	l		



REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

_		Payor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Street Address					
1	City	State	ZIP		\$ 15,000.00	
	Original Purchase Amount	Reason for Refund/R	ebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address	Street Address				
2	City	State	ZIP		=	
	Original Purchase Amount	Reason for Refund/Re	ebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address			-		
3	City	State	ZIP	-	2	
	Original Purchase Amount	Reason for Refund/Re	ebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
4	City	State	ZIP	-		
	Original Purchase Amount	Reason for Refund/R	ebate	-		
_			Date Rebate/Refund Received			
		Payor Name		_		
5	Street Address					
J	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Re	ebate			
_	Enter total only if last page of so (transfer the total received this period	chedule od to "Summary of Receipt	s," line 3)			9. 7

Schedule A(3), page \_\_\_\_ of \_\_\_

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	2	
	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 Eamed (Bank Name / Type of Account)		
Account with Interest Eamed (Bank Name / Type of Account)		
Account with Interest Eamed (Bank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)		

Schedule A(4), page\_\_\_\_ of \_\_\_\_



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

SCHEDULE A(5)(a)

_	_	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
l		Name		Oate In-Kind Contribution Received			
		Street Address					
	1	City	State	ZIP			
		Occupation	Employer				
ľ		Name		Date In-Kind Contribution Received			
		Street Address					
1	2	City	State	ZIP			
		Occupation	Employer	<u> </u>			
r		Name	<u> </u>	Date In-Kind Contribution Received			
		Street Address					
;	3	City	State	ZIP			
		Occupation	Employer	<u></u>			
r		Name	<u> </u>	Date In-Kind Contribution Received			
		Street Address		<u></u>			
'	4	City	State	ZIP			
		Occupation	Employer				
r		Name	<u> </u>	Date In-Kind Contribution Received			
		Street Address					
;	5	City	State	ZIP			
		Occupation	Employer	I			
-		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(a))	L		

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

Schedule A(5)(a), page\_\_\_\_ of \_

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

SCHEDULE A(5)(b)

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

<sup>\*</sup>If contributions of more than \$100 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).



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

SCHEDULE A(5)(c)

	Individual Cont	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
į	Name Street Address		Date In-Kind Contribution Received			
1	Cay	State	ZIP		\$ 15,000.00	
	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					
'	City	State	ZIP			
	Occupation	Occupation Employer				
	Name	Date In-Kind Contribution Received				
5	Street Address	Street Address				
1	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 5(c))	<u>.</u>		



#### IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

/	Candidate Co.	mmittee Contributor I	nformation	Amount Receive	Cumulative d Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contrib	ution Received			
	Committee Name	I				
	Street Address					
2	City	State	ZiP			
	Committee ID Number	Date In-Kind Contril	oution Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contril	bution Received			
	Committee Name	I	<del>.</del>			
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Centril				
	Committee Name	Committee Name				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contril				

Schedule A(5)(d), page\_\_\_\_ of \_\_\_

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/	Political Action Committe	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	Received			
	Committee Name					
	Street Address		¥			
2	City	State	ZIP	*	-	6
	Committee ID Number	Date In-Kind Contribution	Received	Ť		-
	Committee Name					- 4
	Street Address					
3	City	State	ZIP	1 2		J.
	Committee ID Number	Date In-Kind Contribution	Received	1 9		
_	Committee Name					
	Street Address					
4	City	State	ZIP	, 0	-	
	Committee ID Number	Date In-Kind Contribution	Received	104		
-	Committee Name					
	Street Address			a 3 E		
5	City	State	ZIP	1 1		
	Committee ID Number	Date In-Kind Contribution	Received			
_	Enter total only if last page of schedule (transfer the total received this period to "Sum					n es

Schedule A(5)(e), page\_\_\_\_ of \_\_\_



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Political F	Party Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		=			1941 - 27
	Street Address					
1	City	State	ZIP	1		
	Committee ID Number	Date In-Kind Contribu	tion Received			
	Committee Name					
	Street Address	i i		1		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ution Received			
	Committee Name					
	Street Address	1	P		= = .	
3	City	State	ZIP			7.
	Committee ID Number	Date In-Kind Contribu	ution Received			
	Committee Name					
	Street Address				-	=
4	City	State	ZIP		_ = =	12 g
	Committee ID Number	Date In-Kind Contribu	ution Received	7. 1 at 1		7 1
_	Committee Name					
	Street Address					- 1
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribu	ution Received			. 1

Schedule A(5)(f), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

		ip Contributor Infor	mation	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 Contr	bution Received			
	Partnership Name	-				
	Street Address					
2	City	State	ZIP	110		
	Corporation Commission File Number	Date In-Kind Cont	ribution Received	1 1		
	Partnership Name					
	Street Address					u .
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Received		α	
	Partnership Name					
	Street Address					_
4	City	State	ZIP	3		
	Corporation Commission File Number	Date In-Kind Cont	ribution Received	1		=
	Partnership Name					
	Street Address					
5	City	State	ZIP			g 1
	Corporation Commission File Number Date In-Kind Contribution Received					

Schedule A(5)(g), page\_\_\_ of \_\_\_

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation / LLC	Contributor Inform	ation	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	I Received			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	-	==	
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Corporation/LLC Name					
	Street Address			-		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Corporation/LLC Name					
	Street Address				-	
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sur	mmary of Receipts "	line 5(h))			

Schedule A(5)(h), page\_\_\_\_ of \_\_\_\_



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organization (	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name			=		
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
Г	Labor Organization Name			- 1		
	Street Address					
3	City	State	ZIP	-	± 1	
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name	<u> </u>			-	
	Street Address			-		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	=		
	Labor Organization Name	I			= =	-
	Street Address			-		
5	City	State	ZIP	-	11	
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	line 5(i))			189
_						

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

SCHEDULE A(5)(j)

/				7		
	Can	didate Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name		Date In-Kind Contribution Received			
	Street Address		I			
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 Property Contributed				=	
	Name		Date In-Kind Contribution Received			
	Street Address			1		
4	City	State	ZIP	1		
	Asset or Property Contributed					
	Name	Name				
	Street Address			1		
5	City	State	ZIP	1		
	Asset or Property Contributed			-		
	Enter total only if last page of sche (transfer the total received this period to				1.5	

Schedule A(5)(j), page\_\_\_\_ of \_\_\_

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

SCHEDULE A(6)

_	Source I	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP			:1
	Type of Item Donated					
r	Name		Date In-Kind Donation Received	= -	=	-
	Street Address				-	-
2	City	State	ZIP			
	Type of Item Donated			-		9
	Name		Date In-Kind Donation Received			
	Street Address			-		
3	City	State	ZIP			,
	Type of Item Donated					1 1
H	Name		Date In-Kind Donation Received		-	1-
	Street Address		,		_	
4	City	State	ZIP			
	Type of Item Donated					
H	Name		Date In-Kind Donation Received			
	Street Address					
5	5 City State ZIR		ZIP			
	Type of Item Donated					
-	Enter total only if last page of school de	W				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"		-		

\_\_ of \_\_

Schedule A(6), page\_\_\_\_

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

/						
Creditor Information				Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ar	me					
re	eet Address					
ty	у	State	ZIP	-		
n	rvices or Goods Provided on Credit		Date of Extension of Credit			
ar	me					
re	reet Address					
ty	ly	State	ZIP			
n	rvices or Goods Provided on Credit		Date of Extension of Credit	-		
ar	nme					
re	reet Address					
ty	ty	State	ZIP	-	=	
n	rvices or Goods Provided on Credit		Date of Extension of Credit	_		
ar	ime					
70	reet Address	<u> </u>		-		
ty	ty	State	ZIP	_		
n	rvices or Goods Provided on Credit		Date of Extension of Credit	-		
Name						
Street Address				-	=	
ty	ty	State	ZIP	-		
n	rvices or Goods Provided on Credit		Date of Extension of Credit	-		
n	nter total only if last page of schedule ansfer the total received this period to "Sumi	mary of Receipts."			, ,	

Schedule A(7)(a), page\_\_\_\_ of \_\_\_\_

# PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

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

Schedule A(7)(b), page\_\_\_\_ of \_\_\_\_

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

_	Payor Comm	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name		Payment Date			
1	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	if applicable)			
2	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	[if applicable)		_	
3	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	(if applicable)			
4	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	(if applicable)			
5	Committee Name		Payment Date			= 1
	Street Address					
	City	State	ZIP		= -	
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	(if applicable)			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 8)				ř.	H. C.

Schedule A(8), page\_\_\_\_ of \_\_\_\_

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor Information			Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
1	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
2	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address				-	
3	City	State	ZIP			
	Services or Goods Purchased		Payment Date	# = # = # = # = # = # = # = # = # = # =		
H	Name					
4	Street Address					_
	City	State	ZIP			
	Services or Goods Purchased		Payment Date	.1		
5	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased Payment Date		Payment Date		1	
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 9)					

Schedule A(9), page\_\_\_\_ of \_\_\_\_

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	State	ZIP			
	Type of Account Receivable or Debt Owed	7	Date that Debt Accrued			
	Name					
	Street Address			_		
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-	-	
Г	Name				- 1	
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 10)			



COMMITTEE ID N	IUMBER
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# 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			:		
1	City	State	ZIP			
	Receipt Type	<u> </u>	Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Receipt Type	l	Receipt Date			
	Namo					
	Street Address	-				
4			· <del></del>			
	City	State	ZIP			
	Receipt Type	Receipt Date				
	Name					
	Street Address					
5	City	State	ZIP			
	Receipt Type	·L	Receipt Date			
_	Enter total only if last page of sched (transfer the total received this period to	lule				

Schedule A(12), page\_\_\_\_ of \_\_\_\_

### DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	nt Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Disbursement Date				
Address					
	State	ZIP			
of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Cash☐ Credit		
	Disbursement Date				
Address					
	State	ZIP			
of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Cash☐ Credit		
	Disbursement Date				
Street Address					
	State	ZIP			
of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Cash☐ Credit		
	Disbursement Date				
Address					
	State	ZIP	☐ Cash		
of Operating Expense Paid	Non-Electoral Purpose?	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Disbursement Date				
Street Address					
	State	ZIP	☐ Cash		
f Operating Expense Paid	Non-Electoral Purpose?	Non-Electoral Purpose? (PACs and Political Parties Only)			
f Op	perating Expense Paid	State  Perating Expense Paid  Non-Electoral Purpose?	State ZIP  Derating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)	State ZIP   Cash  Credit  Non-Electoral Purpose? (PACs and Political Parties Only)	State ZIP Cash Derrating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only)

Schedule B(1), page\_\_\_\_ of \_\_\_

### MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate Com	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name					
	Street Address		У			
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number	umber Date Contribution Made				
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made	e	□ Credit		1
	Committee Name					
	Street Address					* le
5	City	State	ZIP	□ Cash		- '_
	Committee ID Number	Date Contribution Made		☐ Cash		- 1
	Enter total only if last page of sche (transfer the total disbursed this period	dule	10° A00446   10°00 10°00		E 8   L1   11	erde the

Schedule B(2)(a), page\_\_\_\_ of \_\_\_

# MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

/		on Committee Recipient	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 Ma	de	□ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP		, ,	
				☐ Cash		
	Committee ID Number	Date Contribution Ma	ade	☐ Credit		
	Committee Name				17	
	Street Address					
3	City	State	ZIP	□ Cash		8- 1
	Committee ID Number	Date Contribution Made				'
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Ma	Date Contribution Made			
-	Committee Name					
	Street Address			=		
5	Sity State ZIP					
				☐ Cash☐ Credit		

Schedule B(2)(b), page\_\_\_\_ of \_\_\_

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party R	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name				,	4.00
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit	,	
Ī	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			□ Cash		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number Date Contribution Made			☐ Cash☐ Credit		
_	Committee Name					
	Street Address					
4	City	State	ZIP	5 T T		,
	Committee ID Number Date Contribution Made			☐ Cash☐ Credit	-	. 7 3
	Committee Name					
	Street Address			: 0		
5	City	State	ZIP			-
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit	-	-8

Schedule B(2)(c), page\_\_\_\_ of \_\_\_\_



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

,	Partnership	Recipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
_	Partnership Name			-		
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Partnership Name					
	Street Address					
2	City	State	ZiP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		□ Credit		
	Partnership Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number Date Contribution Made			□ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	Date Contribution Made			
	Partnership Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	rporation Commission File Number Date Contribution Made		□ Credit		
	Enter total only if last page of schedu	ule	ments," line 2(d))	<u> </u>		<u>-</u> :



COMMITTEE ID NUMBER	

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Corporation/LLC Name					
	Street Address					
١	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	de .	□ Credit		
	CorporationALC Name	<u> </u>				
	Streat Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	de	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	de	□ Credit		
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mar	Date Contribution Made			
-	Corporation/LLC Name					
	Street Address					
,	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	☐ Cash		
	Enter total only if last page of sch (transfer the total disbursed this perio	<u> </u>				

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orga	nization Recipient Information	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	□ Credit		
	Labor Organization Name				
	Street Address				
2	City	State ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		<u> </u>
	Labor Organization Name				-
	Street Address				
3	City	State ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		
	Labor Organization Name				
	Street Address				
1	City	State ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		
	Labor Organization Name				
	Street Address				
5	City	State ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Cash		
	Enter total only if last page of scl (transfer the total disbursed this perio	nedule			1

Schedule B(2)(f), page\_\_\_\_ of \_\_\_\_

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address					
1	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
2	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	-		
	Committee Name		Date Refund Received			
	Street Address		1			
3	City	State	ZIP	-		
	Committee ID Number		Date of Original Contribution			
	Committee Name	Date Refund Received			- Curte in	
	Street Address	1				
4	City	State	ZIP	1		
	Committee ID Number		Date of Original Contribution	1		- 0
	Committee Name		Date Refund Received			1 11 17
	Street Address					
5	City	State	ZIP	-		
	Committee ID Number		Date of Original Contribution			= t = 4
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburse	ments " line 2(h))	- 2.32	E1 # 518 1	

Schedule B(2)(h), page\_\_\_\_ of \_\_\_\_



LOANS MADE:

SCHEDULE B(3)(a)

/		Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					i
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				i
	Borrower Name					
	Street Address					
2	City	State	ZiP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name			,	<u> </u>	
-	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Street Address					
4			•			
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
5	City	State	ZIP			
]	Guarantor/Endorser Name Date Loan Made			l i		

Schedule B(3)(a), page\_\_\_of \_\_



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

	Guaranto	r Information	Amount Guaranteed	Cumulative Amount this	Cumulative Amount this	
Г	Guarantor Name				Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name	.1	-			
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name	Guarantor Name				
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
Γ	Guarantor Name					
	Street Address					
4	City	State	ZIP		:	
	Borrower Name	Borrower Name Date Loan Guaranteed				
Γ	Guarantor Name					
_ ا	Street Address	Street Address				
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Disburseme				

Schedule B(3)(b), page\_\_\_\_ of \_\_\_\_



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/		orrower 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 Outsta	anding			
	Borrower Name		Date Forgiveness Made			
	Street Address					
2	City	State	ZIP	1		
	Original Amount of Loan Amount Still Outsta		inding			
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsta	inding			
	Borrower Name		Date Forgiveness Made			
	Street Address	Street Address				
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsta	nding			
	Borrower Name		Date Forgiveness Made			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outsta	nding			

Schedule B(3)(c), page\_\_\_\_ of \_\_\_\_



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

Lende	r Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name	Date Repayment Made	-			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstan	nding			
Lender Name		Date Repayment Made			-
Street Address	reet Address			3	
City	State	ZIP		_	
Original Amount Borrowed	Amount Still Outstan	nding			
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outsta	nding		-	
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			11
Original Amount Borrowed Amount Still Outstanding				-	
Lender Name		Date Repayment Made			
Street Address				_	
City	State	ZIP		1 =	= 1/2
Original Amount Borrowed	Amount Still Outsta	nding			
	Lender Name  Street Address  City  Original Amount Borrowed  Lender Name  Street Address  City  Criginal Amount Borrowed	Street Address  City State  Original Amount Borrowed Amount Still Outstat  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstat  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstat  Lender Name  Street Address  City State  Original Amount Borrowed Amount Still Outstat  Lender Name  Street Address  City State  City State  City State  Original Amount Borrowed Amount Still Outstat  Lender Name  Street Address	Lender Name  City  State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Lender Name  Date Repayment Made  Street Address  City  State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Lender Name  Date Repayment Made  Street Address  City  State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Lender Name  Date Repayment Made  Street Address  City  State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Lender Name  Date Repayment Made  Street Address  City  State  ZIP  Original Amount Borrowed  Amount Still Outstanding  Lender Name  Date Repayment Made	Center Name   Date Repayment Made	Lender Information Date Repayment Made    Continue

Schedule B(3)(d), page\_\_\_\_ of \_\_\_\_

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

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

Schedule B(3)(e), page\_\_\_\_ of \_\_\_\_

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

ame of Original Payor  treet Address  ity  orporation Commission File Number (if applicable)  fame of Original Payor	State Original Payment Amount	Date Rebate/Refund Made  ZIP  Date of Original Payment	Refunded	Reporting Period	Election Cycle
orporation Commission File Number (if applicable)					
corporation Commission File Number (if applicable)					
lame of Original Payor	Original Payment Amount	Date of Original Payment			
treet Address		Date Rebate/Refund Made			- 3
And a company of the Control of the	Street Address			-	
sity	State	ZIP	-		
Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	_		
lame of Original Payor		Date Rebate/Refund Made			
street Address			-	-	
Sity	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
Name of Original Payor Date Rebate/R					
Street Address		-			
Sity	State	ZIP		-	= ,
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			-
lame of Original Payor		Date Rebate/Refund Made			н - [
Street Address					4
Sity	State	ZIP	-	=	r i
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Street Address  Corporation Commission File Number (if applicable)  Jame of Original Payor  Street Address  City  Corporation Commission File Number (if applicable)	Iame of Original Payor  Street Address  State  Corporation Commission File Number (if applicable)  Original Payment Amount  Iame of Original Payor  Street Address  State	Jame of Original Payor  Date Rebate/Refund Made  Street Address  ZIP  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address  Street Address  ZIP  Original Payor  Date Rebate/Refund Made  Original Payor  Original Payor  Name of Original Payor	Jame of Original Payor  Date Rebate/Refund Made  Street Address  Date Rebate/Refund Made  ZIP  Corporation Commission File Number (if applicable)  Original Payment Amount  Name of Original Payor  Date Rebate/Refund Made  Street Address  Date Rebate/Refund Made  Original Payor  Date Rebate/Refund Made  Original Payor  Date Rebate/Refund Made  Original Payor  Original Payor  Original Payor  Original Payor  Original Payor	Date Rebate/Refund Made  Street Address  Street Address  Street Address  Street Address  Original Payor  Date Rebate/Refund Made  ZIP  Original Payor  Date Rebate/Refund Made  Street Address  Street Address  Street Address  Street Address  Original Payor  Date Rebate/Refund Made  Street Address  Original Payor  Date Rebate/Refund Made  Original Payor  Date Rebate/Refund Made

Schedule B(4), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	Candidate Committee	e Recipient Inform	mation	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	<u> </u> Made		e .	
	Committee Name			7		
	Street Address	1				
2	City	State	ZIP	1	-	
	Committee ID Number	Date In-Kind Contribution	Made	1		
	Committee Name				ACT IN	
	Street Address			-	- 100 = -	
3	City	State	ZIP		-	
	Committee ID Number	Date In-Kind Contribution	Made	1	1 2	
-	Committee Name					
	Street Address			1		
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	) Made			
	Committee Name					
	Street Address			1		
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made		-	
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburser	nents," line 5(a))	1	- R*5.	16 1

Schedule B(5)(a), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/		on Committee Recipie	nt Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		-			
	Street Address	<del></del>				
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	tribution Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Con	ntribution Made			
	Committee Name					
	Street Address					
3	City	State	ZIP	х -		
	Committee ID Number	Date In-Kind Con	ntribution Made		-	
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Cor	ntribution Made	-		
	Committee Name	-				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Cor	ntribution Made			

Schedule B(5)(b), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/	Political Party Re	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		reporting remod	Election Cycl		
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
_	Committee Name					
	Street Address	1				
2	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	n Made	1		
	Committee Name					
	Street Address					
3	City	State	ZIP	+		
	Committee ID Number	Date In-Kind Contribution	n Made	-		
	Committee Name					
	Street Address			-		
4	City	State	ZIP	1		
	Committee ID Number	Date In-Kind Contribution	Made	-		
	Committee Name					
	Street Address			-		
5	City State ZIP			-		
	Committee ID Number	Date In-Kind Contribution	Made	-		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur					

Schedule B(5)(c), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

Partnership Recipient Information  Amount Insert Address  Date 1-Address  Tony  Corporation Commission File Number  Date 1-Address  Date 1-Add							
Street Address  1 City State 2P Corporation Commission File Number Oate In Kind Contribution Made  Partnership Name Street Address  2 City State 2P Corporation Commission File Number Oate In Kind Contribution Made  Partnership Name Street Address  3 City State 2P Corporation Commission File Number Oate In Kind Contribution Made  Partnership Name Street Address  4 City State 2P Corporation Commission File Number Oate In Kind Contribution Made  Partnership Name Street Address  5 City State 2P Corporation Commission File Number Oate In Kind Contribution Made  File In Kind Contribution Made		Partnership Red	cipient Information	n		Amount this	Amount this
The Corporation Commission File Number  Date in Kind Contribution Made  Direct Address  City Corporation Commission File Number  Date in Kind Contribution Made  Parthership Name  Street Address  City Corporation Commission File Number  Date in Kind Contribution Made		Partnership Name					ы
Corporation Commission File Number  Date In Kind Contribution Made  Pathership Name  Sheet Address  City State Zip  Corporation Commission File Number  Date In Kind Contribution Made  Pathership Name  Sheet Address  City State Zip  Corporation Commission File Number  Date In Kind Contribution Made  Pathership Name  Sheet Address  City State Zip  Corporation Commission File Number  Date In Kind Contribution Made  Pathership Name  Sheet Address  City State Zip  Corporation Commission File Number  Date In Kind Contribution Made  Pathership Name  Sheet Address  Date In Kind Contribution Made  Enter total only if last page of schedule  Enter total only if last page of schedule  Enter total only if last page of schedule		Street Address					
Partnership Name  Street Address  2	1	City	State	ZIP			
2 City State ZIP Corporation Commission File Number Date In-Kind Contribution Made  Pattership Name Street Address  3 City State ZIP Corporation Commission File Number Date In-Kind Contribution Made  Pattership Name Street Address  4 City State ZIP Corporation Commission File Number Date In-Kind Contribution Made  Pattership Name Street Address  5 City State ZIP Corporation Commission File Number Date In-Kind Contribution Made  Pattership Name Street Address  5 City State ZIP Corporation Commission File Number Date In-Kind Contribution Made		Corporation Commission File Number	Date In-Kind Contribution	I Made			
City State   ZiP    Corporation Commission File Number   Date In-Kind Contribution Made    Partnership Name    Street Address    City   State   ZiP    Corporation Commission File Number   Date In-Kind Contribution Made    Partnership Name    Street Address    City   State   ZiP    Corporation Commission File Number   Date In-Kind Contribution Made    Partnership Name    Street Address    City   State   ZiP    Corporation Commission File Number   Date In-Kind Contribution Made    Partnership Name    Street Address    City   State   ZiP    Corporation Commission File Number   Date In-Kind Contribution Made    Enter Idal only if last page of schedule    Enter Idal only if last page of schedule		Partnership Name					
City State		Street Address					
Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made	2	City	State	ZIP			
Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Enter total only if last page of schedule		Corporation Commission File Number	Date In-Kind Contribution	Made			
Corporation Commission File Number  Date in-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date in-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date in-Kind Contribution Made  Enter total only if last page of schedule		Partnership Name					,
Corporation Commission File Number  Date In-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Enter total only if last page of schedule		Street Address					
Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made	3	City	State	ZIP			
Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Partnership Name Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made		Corporation Commission File Number Date In-Kind Contribution Made					
Corporation Commission File Number   Date In-Kind Contribution Made		Partnership Name			41 =		
City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made		Street Address					
Partnership Name  Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made	4	City	State	ZIP			
Street Address  City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Enter total only if last page of schedule		Corporation Commission File Number	Date In-Kind Contribution	Made	2	=	= +
City State ZIP  Corporation Commission File Number Date In-Kind Contribution Made  Enter total only if last page of schedule		Partnership Name					9 ]
City  State  ZIP  Corporation Commission File Number  Date In-Kind Contribution Made  Enter total only if last page of schedule		Street Address			-		
Enter total only if last page of schedule	5	City	State	ZIP		-	
Enter total only if last page of schedule  (transfer the total disbursed this period to "Summary of Disbursements" line 5(d))		Corporation Commission File Number	Date In-Kind Contribution	Made			-
Russiana and analysis and an analysis and a committee of the property of the p		Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	L				

Schedule B(5)(d), page\_\_\_\_ of \_\_\_



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation / LLC	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made	1		
	Corporation/LLC Name	ı				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Corporation/LLC Name					
	Street Address			- 1		
3	City	State	ZIP	Tv.		
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
r	Corporation/LLC Name					
	Street Address			1		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made		-	
	Corporation/LLC Name					
	Street Address			-		
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmary of Disburser	ments," line 5(e))	1		

Schedule B(5)(e), page\_\_\_\_ of \_\_\_\_

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organization	Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				-	
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	I Made			
	Labor Organization Name		7			
	Street Address		_			
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name			- i		
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
-	Enter total only if last page of schedule					- H
	(transfer the total disbursed this period to "Summary of Disbursements," line 5(f))					

Schedule B(5)(f), page\_\_\_\_ of \_\_\_\_

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/		Recipient Informa		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 (i	ncluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	□ 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 (i	including % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
3	City	State	ZIP		-	
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (i	including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
_	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	l		-	~	
4	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (i	including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/	2	Recipient Informatio		Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	[including % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			·- ir
	Street Address					
2	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	l	Mode of Advertising (TV, mail, etc)			
	Street Address			-		
3	City	State	ZIP			= =
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name	1	Mode of Advertising (TV, mail, etc)			- 1
	Street Address			1		1
4	City	State	ZIP	1		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Enter total only if last page of schedul (transfer the total disbursed this period to "5			911		

Schedule B(7), page\_\_\_\_ of \_\_\_

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

/	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					
1	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	called	☐ 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	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		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rea	called	☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ L Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			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	Office Held		☐ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "	e Summary of Disburser	ments," line 8)	1		

Schedule B(8), page\_\_\_\_ of \_\_\_

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address					
1	City	State	ZIP			
	Type of Benefit Provided					
	Notes:				_	
_	Candidate Name		Date Benefit Provided			-
	Street Address					
2	City	State	ZIP			
	Type of Benefit Provided					-
	Notes:					
	Candidate Name Date Benefit Provided					100
	Street Address		4.7			
3	City	State	ZIP			
	Type of Benefit Provided			-		
	Notes:					i i
	Candidate Name		Date Benefit Provided			
	Street Address	Street Address				
4	City	State	ZIP	-		
	Type of Benefit Provided	-		_		
	Notes:				_	
-	Enter total only if last page of schedul (transfer the total disbursed this period to "5"	e				-1
	(transfer the total disbursed this period to "\$			1 a - 10% II		

Schedule B(9), page\_\_\_\_ of \_\_\_\_

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

		Committee Informate	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Committee Name		Payment Date			
1	Street Address			1		
	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expen	nse (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exper	nse (if applicable)	□ Credit		
	Committee Name		Payment Date			-1 1
	Street Address					
3	City	State	ZIP		-	
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exper	nse (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address			1 +2		
4	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exper	nse (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP	T 01-		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exper	nse (if applicable)	☐ Cash☐ Credit		
-	Enter total only if last page of sched	dule				
	(transfer the total disbursed this period to	o "Summary of Disbur	sements," line 10)			

Schedule B(10), page\_\_\_\_ of \_\_

REIMBURSEMENTS MADE: SCHEDULE B(11)

_	Recipient	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed  Name		Reimbursement Date	□ Credit		- I
,	Street Address					
2	City  Services or Goods Reimbursed	State	ZIP  Reimbursement Date	☐ Cash☐ Credit	-	- ÷ =
H	Name					
3	Street Address  City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit	_	-
	Name					b
4	Street Address  City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		3
	Name Street Address				-	
5	City	State	ZIP	□ Cash	-	
	Services or Goods Reimbursed Reimbursement Date			□ Cash □ Credit	1	
L	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 11)					

# OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

		formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	City	State	ZIP	1		
	Type of Account Payable or Debt Owed		Date that Debt Accrued	1	170	
	Name					
	treet Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued	1		
	Name					1
	Street Address					
4	City	State	ZIP	1		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address		1			
5	City	State	ZIP	1		
	Type of Account Payable or Debt Owed Date that it		Date that Debt Accrued	1		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	12 0 0				
	(transfer the total received this period to "Sum	mary of Receipts," I	line 12)			

Schedule B(12), page\_\_\_\_ of \_\_\_\_

### TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

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

Schedule A(13), page\_\_\_\_ of \_\_\_\_

MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

Recipient Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1						
	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name		1 3	- #	F = 2/2	
	Street Address			-		
2	City	State	ZIP	- Cook		
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name		_	7.2		
	Street Address					
3	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City	State	ZIP			
	Disbursement Type Disbursement Date		☐ Cash☐ Credit			
	Name					
	Street Address					
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Enter total only if last page of s (transfer the total disbursed this per					

Schedule B(14), page\_\_\_\_ of \_\_\_\_



COMMITTEE	ID NUMBER

AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative of Disbursements - \$250 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line	÷ 15)	

Schedule B(15), page\_\_\_ of \_\_\_