LHC-21-001-REF

## COMMITTEE INFORMATION (required):

REPORTING PERIOD (check one):

	Committee Information:	Committee Name:	Protect the Public from Special Interests					
DIDATE INFORMATION (only if filing as a candidate committee);								
	Office Sought:	□ County Office:	Special District Office:					
		☐ City/Town Office:	::					

	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, 202
	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
1	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, 202
	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
	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

# 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)	\$ 10,000.00				
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 10,000.00				
(d) = Balance at close of reporting period	\$ 15,000.00	W 1- 1			
Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page and the following page need to be filed.					

\*Reporting deadline extended to next business day, A.R.S. §§ 1-243(A) and 1-303.



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

01/15/2022

Date

SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		9E 1 7
	(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)	10,000.00	90 Sept.
	(i) Labor Organizations (PACs & Political Parties Only)		- Y 6.5 K St.
	(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(I) 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))		
3,:	Rebates and Refunds Received		
<b>4</b> .	Interest Accrued on Committee Monies In-Kind Contributions Received		
J.			
-	(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)		
	(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))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))	9 1 1 1	
8.	Joint Fundraising / Shared Expense Payments Received		A
9.	Payments Received for Goods / Services		janifika a Eusaika
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
11,	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12.	Miscellaneous Receipts (use cash and/or equity asapplicable)		
13.	Total Receipts (cash, add 1(m), 2(e), 3-4, 8-9, 11-12; equity, add 2(b), 5(k), 6-7(c), 10-12)	10,000.00	

## SUMMARY OF DISBURSEMENTS (Schedule B):

/	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	10,000.00	
2.	Contributions Made	and the second second	DIAN AND O
	(a) Candidate Committees		aleriko 6 la
	(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))		
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3.	Loans	المراز الأراج المراجع الم	Special Parties
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		THE PARTY OF
	(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)		
5.	Value of In-Kind Contributions Provided	CONTRACTOR OF	
	(a) Candidate Committees		
	(b) Political Action Committees		1
	(c) Political Parties		
	(d) Partnerships		
	(c) Corporations & Limited Liability Companies (PAC & Political Partice Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		S was deposit to be
10.	Joint Fundraising / Shared Expense Payments Made		
11:	Reimbursements Made		
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements		
15.	Aggregate of Disbursements - \$250 or Less		
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)

/	Individ	ual Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			,= <b>,</b> = ,= ,=
	Street Address					
1	City	State	ZIP			
	Occupation	Employer		===		
	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			_		
3	City	State	ZIP	_		
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address			_		
4	City	State	ZIP			
	Occupation	Emolover				
		Occupation Employer				
	Name Date Contribution					
5	Street Address					
J	City	Slate	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))		

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

<sup>\*</sup>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)

/	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name	Name					
1	Street Address						
	City	State	ZIP				
	Occupation	Employer					
	Name		Date Contribution Received				
	Street Address						
2	City	State	ZIP				
	Occupation	Employer					
	Name	Name					
	Street Address						
3	City	State	ZIP				
	Occupation	Employer	•				
	Name		Date Contribution Received				
	Street Address						
4	City	State	ZIP				
	Occupation	Employer	,				
	Name	•	Date Contribution Received				
	Street Address	Street Address					
5	City	State	ZIP				
	Оссирайоп	Employer					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	ine 1(c))					
Schedule A(1)(c), page of							



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

Carnillate Committee Contributor Information  Amount Received Amount this Reporting Period  Committee Name  Social Address  Committee ID Number  Date Contributor Received  Co								
Committee Name   Comm	/	/	Candidate Committee	Contributor Infor	mation	Amount Received	Amount this	Amount this
1 City Gate ZIP Committee ID Numberr Date Contribution Received  Committee Name State Address  2 City State ZIP Committee ID Number Date Contribution Received  Committee Name Street Address  4 City State Committee ID Number Date Contribution Received  Committee Name Street Address  Committee Name Street Address  Committee Name Date Contribution Received  Date Contribution Received  Committee Name Date Contribution Received			Committee Name					
Committee ID Number  Carchidadion Received  Committee Name  Storet Address  2 City  Committee ID Number  Committee ID Number  Committee ID Number  Data Contribution Received			Street Address					
Convolities Name  Street Address  2 Caly State 21P Convolities ID Number Date Contribution Received  Convolities ID Number Date Contribution Received  3 Caly State 21P Convolities ID Number Date Contribution Received  Convolities ID Number Date Contribution Received  Convolities Name  Street Address  4 City State 21P Convolities Name  Date Contribution Received  Convolities Name  Street Address  5 City State 21P Convolities Name  Otreet Address  5 City State 21P Convolities ID Number Date Contribution Received	'	1	City	State	ZIP			
Size of Address  2 Cary State ZIP  Committee ID Number Date Contribution Received  3 Cary State ZIP  Committee ID Number Date Contribution Received  4 City State ZIP  Committee ID Number Determine State Address  5 Cary State ZIP  Committee ID Number Date Contribution Received	İ		Committee ID Number	Date Contribution Receive	ed			
2 City Slate ZIP Committee ID Number Date Contribution Received  3 City Slate ZIP Committee ID Number Date Contribution Received  4 City Slate ZIP Committee Name Street Address  5 City Slate ZIP Committee Name Street Address	ľ		Committee Name					
Committee ID Number  Committee ID Number  Date Contribution Received  Street Address  3 Cay State ZIP  Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received  4 City State ZIP  Committee ID Number  Date Committee ID Number			Street Address					
Committee Name  Street Address  3	2	2	City	State	ZIP			
Steet Address  Gity State ZiP  Committee ID Number Date Contribution Received  Steet Address  4 City State ZIP  Committee ID Number Date Contribution Received  Committee ID Number Date Contribution Received			Committee ID Number	Date Contribution Receive	I ed			
Committee ID Number  Date Contribution Received  Committee Name  Street Address  City  Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received	r		Committee Name	J				
Committee ID Number  Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  Street Address  Committee Name  Street Address  City State ZIP  Committee Name  Date Contribution Received		Street Address						
Committee Name  Street Address  4 City State ZIP  Committee ID Number Date Contribution Received  Street Address  5 City State ZIP  Committee Name  Date Contribution Received	1	3	City	State	ZIP			
Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  5 City State ZIP  Committee ID Number Date Contribution Received			Committee ID Number	Date Contribution Receive	Ied			
4 City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  5 City State ZIP  Committee ID Number Date Contribution Received			Committee Name					
Committee ID Number  Date Contribution Received  Committee Name  Street Address  City  State  ZIP  Committee ID Number  Date Contribution Received			Street Address					
Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received	1	4	City	State	ZIP			
Street Address  City State ZIP  Committee ID Number Date Contribution Received			Committee ID Number	Itee ID Number Date Contribution Received				
5 City State ZIP  Committee ID Number Date Contribution Received			Committee Name	ļ				
Committee ID Number  Date Contribution Received			Street Address					
		5	City	State	ZIP			
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(d))			Committee ID Number	Date Contribution Receiv	ed			
		Enter total only if last page of schedule  (transfer the total received this period to "Summary of Receipts." line 1(d))						

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/	Political Action Comm	ittee Contributor In	iformation	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	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP	-		
	Committee ID Number	Date Contribution Receiv	ved	-		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ved	-		
	Committee Name					
	Street Address	Street Address				
4		r	T.			
7	City	State	ZIP			
	Committee ID Number Date Contribution Received					
	Committee Name	Committee Name				
	Streel Address					
5	City	State	ZIP	1		
	Committee ID Number	Date Contribution Receiv	ved			
	Enter total only if last page of schedule			1		
	(transfer the total received this period to "Su	mmary of Receipts,"	line 1(e))			

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

1						
/	Political Party C	ontributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u></u>			
H	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
L	Committee Name	Committee Name				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv		-		
L	Committee Name					
4	Street Address	1				
	City	State	ZIP			
L	Committee ID Number	Date Contribution Receiv	red			
Γ	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	red			
	Enter total only if last page of schedule (transfer the total received this period to "Su	mmary of Receipts,"				

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS

SCHEDULE A(1)(g)

/	/	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Partnership Name					
		Street Address		_			
	1	City	Stale	ZIP			
		Corporation Commission File Number	Date Contribution Receive	d	•		
		Partnership Name					
		Street Address					
	2	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Partnership Name					
		Street Address					
	3	City	Slate	ZIP	•		
		Corporation Commission File Number	Date Contribution Receive	l ed			
		Partnership Name	<u>L</u>				
	9	Street Address					
	4	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Partnership Name		=			
		Street Address					
;	5	City	State	ZIP			
		Corporation Commission File Number	Date Contribution Receive	ed			
		Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," l				

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

~					
Corporation	/ LLC Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
A Inc.					
39 N 31st Ave			40,000,00	40,000,00	
penix	State AZ	85009	10,000.00	10,000.00	
tion Commission File Number	Date Contribution F 12/8/20				
tion/LLC Name					
ddress					
	State	ZIP			
tion Commission Fite Number	Date Contribution	Received			
tion/LLC Name					
ddress					
	State	ZIP			
tion Commission File Number	Date Contribution	Received			
tion/LLC Name					
ddress					
	State	ZIP			
tion Commission File Number	Date Contribution	Received			
tion/LLC Name					
ddress					
	State	ZIP			
lion Commission File Number	Date Contribution	Received			
tota	I only if last page of sch	Date Contribution I	ommission File Number Date Contribution Received	Date Contribution Received  Londy if last page of schedule	Date Contribution Received  I only if last page of schedule

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organization	Contributor Inform	mation	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 Receive	ed			
	Labor Organization Name					
	Street Address					
2	City	Stale	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address			_		
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	<b>I</b> ed			
	Labor Organization Name					
2	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	led			
-	Enter total only if last page of schedule (transfer the total received this period to "Sum					

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

Candidate	Information		Ť i	Cumulative	Cumulative
e			Amount Received	Amount this Reporting Period	Amount this Election Cycle
		Date Contribution Received			
el Address		<u> </u>	-		
	State	ZIP			
upation	Employer	l.	-		
e	L	Date Contribution Received			
at Address					
	State	ZIP			
pation	Employer		_		
8	<u></u>	Date Contribution Received			
al Address			-		
	State	ZIP			
pation	Employer				
e	k	Date Contribution Received			
at Address			=:		
	State	ZIP			
pation	Employer				
е		Date Contribution Received			
et Address			-		
	State	ZIP	-		
pation	Employer				
e et	Address	Address State Employer	Address  State ZIP	Address  State ZIP  Employer	Address  State ZIP  Employer

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

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

/_	/		r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name		Date Contribution Refunded			
		Street Address					
	1	City	State	ZIP			
		ID Number (if applicable)		Date of Original Contribution			
r		Name		Date Contribution Refunded			
		Street Address					
2	2	City	State	ZIP			
		ID Number (if applicable)		Date of Original Contribution			
r		Name		Dale Contribution Refunded			
	İ	Street Address					
3	3	City	State	ZIP			
		ID Number (if applicable)		Date of Original Contribution			
-	1	Name		Date Contribution Refunded			
		Street Address					
4	1	City	State	ZIP			
		ID Number (if applicable)		Date of Original Contribution			
-	1	Name		Date Contribution Refunded			
		Street Address					
5	5	City	State	ZIP			
		ID Number (if applicable)		Date of Original Contribution			
_							
		Enter total only if last page of schedule (transfer the total received this period to "Sumr	nary of Receipts," li	ne 1(I))			

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	Date Loan Received				
	Street Address	, W				
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			
	Guaranlor/Endorser Name	Non-Electoral Purpose	? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address	,U,				
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose	? (PACs and Political Parties Only)			

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

#### FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

/	Lender I	nformation		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			
	Street Address					
1	City	Slate	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outslanding				
	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	1	Date Forgiveness Received			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
_	Enter total only if last page of schedule (transfer the total received this period to "Sum	Imary of Receipts "	line 2(b))	l .		
_	The same state of the pariet to dam	,			li	S

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			
	11	Street Address					
	1	City	State	ZIP			
	178	Original Amount Волоwed	Amount Still Outstanding				
ŀ		Borrower Name		Date Repayment Received			
	200	Street Address					
	2	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-		Borrower Name		Date Repayment Received			
		Street Address					
	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
ŀ		Borrower Name	II.	Date Repayment Received			
		Street Address					
Ì	4	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
ŀ		Borrower Name		Date Repayment Received			
		Street Address					
	5	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding				
-		Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Resolute " !	line 2(c))			
L		(transfer the total received this period to "Sum	mary or receipts, 1	mie 2(6))			

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

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

		Borrower Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name Date Interest Accrued		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding	_		
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	Stale	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding			
	Borrower Name	ļ	Date Interest Accrued			
	Sireet Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsb	anding			
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding			
	Borrower Name		Date Interest Accrued			
	Street Address					
5	City	Stale	ZIP			
	Original Amount Borrowed	Amount Still Outst	anding			
-	Enter total only if last page of (transfer the total received this per	schedule				

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



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		77			
1	City	State	ZIP		\$ 15,000.00	
	Original Purchase Amount	Reason for Relur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
2	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refur	nd/Rebale			
	Payor Name	l <sub>a</sub>	Date Rebate/Refund Received			
	Street Address					
3	City	Slate	ZIP			
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address		<u> </u>			
4	City	State	ZIÞ	1		
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebale/Refund Received			
	Sireet Address					
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	nd/Rebate	1		
1	Enter total only if last page of (transfer the total received this pe	schedule	sinto " lino 3)			

#### 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 Eamed (Bank Name / Type of Account)		
Account with Interest Earned (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 \_\_\_\_

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
	Name		Date In-Kind Contribution Received			
	Street Address		A)			
1	City	State	ZIP			
	Occupation	Employer				
r	Name	J.	Date In-Kind Contribution Received		,	
	Street Address		I			
2	City	State	ZIP			
	Occupation	Employer				
r	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	J.	Date In-Kind Contribution Received			
	Street Address		I.			
4	City	State	ZIP			
	Occupation	Employer	<u>                                     </u>			
	Name		Date In-Kind 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,"	ine 5(a))			

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

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

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)

		ributor Informatio		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Sireet Address					
İ	City	State	ZIP		\$ 15,000.00	
	Occupation	Employer				
1	Name		Date In-Kind Contribution Received			
Ì	Street Address		I			
ļ	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address		I.			
Ì	City	State	ZIP			
Ì	Occupation	Employer	l,			
İ	Name	Date In-Kind Contribulion Received				
İ	Street Address					
	City	State	ZIP			
	Occupation	Employer	I.			
1	Name		Date In-Kind Contribution Received			
l	Street Address		I			
Ì	City	State	ZIP			
İ	Occupation	Employer	I,.			
1	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(c))	1		

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

SCHEDULE A(5)(d)

·	mittee Contributor Info	ormation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Iл-Kind Contributio	n Received			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribulio	on Received			
Committee Name					
Street Address		=			
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	on Received			
Committee Name	<u> </u>				
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution	on Received			
Committee Name	Committee Name				
Street Address					
City	State	ZIP			
			_		
	Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Committee Name	Committee Name  Street Address  City State  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Street Address  City State  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Date In-Kind Contribution  Committee ID Number Street Address	Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received  Committee Name  Street Address  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received	Committee Name  Street Address  City State ZIP  Committee ID Number Oate In-Kind Contribution Received  Committee ID Number ZIP  Committee ID Number Date In-Kind Contribution Received  City State ZIP  Committee ID Number Date In-Kind Contribution Received  City State ZIP  Committee ID Number Date In-Kind Contribution Received  City State ZIP  Committee ID Number Date In-Kind Contribution Received  City State ZIP  Committee ID Number Date In-Kind Contribution Received  Committee ID Number Date In-Kind Contribution Received  City State ZIP  Committee ID Number Date In-Kind Contribution Received  City State ZIP  Committee ID Number Date In-Kind Contribution Received	Candidate Committee Contributor Information  Committee Name  Street Address  City State ZUP  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Committee ID Number  Date In-Kind Contribution Received  Elect Address  City  State ZIP  Committee ID Number  Date In-Kind Contribution Received  Elect Address  City  State ZIP  Committee ID Number  Date In-Kind Contribution Received  Elect Address  City  State ZIP  Committee ID Number  Date In-Kind Contribution Received

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

#### IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/	Political Action Committ	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	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received	:		
	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			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Peccipts " I	ine 5(e))			

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

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

/	Political Party Co	ntributor Informat	ijon	Amount Received	Cumulative Amount this	Cumulative Amount this
	Committee Name			, modilit todaya	Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	rme .				
	Street Address					
2	City	Stale	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address	Street Address				
3	City	State	ZIP			e
	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					
5	City	State	ZIP			
	Committee ID 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."	line 5(f))			

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

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	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	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
ĺ	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
4	City	State	ZIP	1		
	orporation Commission File Number Date In-Kind Contribution Received					
	Partnership Name	l:				
	Street Address	1				
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribulion	Received	-		

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

#### IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

					4 12	
	Corporation / LLC C	Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address	reet Address				
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Corporation/LLC Name	l				
	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	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	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," l	line 5(h))			



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

/	Labor Organization	Contributor Inforr	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Sireet Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
r	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
Г	Labor Organization Name	I.				
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name	<u>.</u>				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sun	nmary of Receipts,"	line 5(i))			
_	M					

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

SCHEDULE A(5)(j)

	Са	ndidate Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP	-		
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Assel or Property Contributed		4	1		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
3	City	State	ZIP	-		
	Asset or Property Contributed					
	Asset of Property Communication					
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP	+		
	Asset or Property Contributed					
_	Name		Date In-Kind Contribution Received			
	Street Address					
5	Succi Aduless					
	City	State	ZIP			
Ì	Asset or Property Contributed					



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

SCHEDULE A(6)

	Source	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Date In-Kind Donation Received				
	Street Address		L			
1	City	State	ZIP			
	Type of Item Oonated	ļ.————————————————————————————————————	- I,			
	Name		Date In-Kind Donation Received			
0	Street Address			1		
2	City	State	ZIP			
	Type of Item Donated	<u></u>	-			
	Name		Date In-Kind Donation Received			
Ì	Street Address			1		
3	City	Slate	ZIP			
	Type of Item Donated					
	Name	Date In-Kind Donation Received				
	Street Address		1.	-		
4	City	State	ZIP	-		
	Type of Item Donaled		-			
	Name		Date In-Kind Donation Received			
	Street Address			-		
5	City	State	ZIP	-		
	Type of Item Donated	Type of Ilem Donated				
_	Enter total only if last page of schedule (transfer the total received this period to "Sun					

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

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

/	C	editor Information	1	Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address			_		
2			T.			
	City	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit				
	Name	lame				
ŀ	Street Address					
3	City	Stale	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
_	Name					
	Street Address					
4	City	State	ZIP			
	Services ar Goads Provided on Credit		Date of Extension of Credit			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Provided on Credit	<u> </u>	Date of Extension of Credit			
_	Enter total only if last page of sch (transfer the total received this period	- 4.1-				

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

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

_	Credito	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 Credit		Date of Original Extension of Credi	1		
	Name					
	Street Address					
2	City	State	ZIP			
100	Services or Goods Originally Provided on Credit	<u></u>	Date of Original Extension of Credi			
_	Name					
	Streel Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credi	1		
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credi	1		
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credi			
_						
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipt	s," line 7(b))			

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

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Co	mmittee Informatio	on	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date		, ,	
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (il applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (If applicable)	Type of Shared Expe	nse (if applicable)			
_	Committee Name		Payment Dale			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	nse (if applicable)			
	Enter total only if last page of schedu (transfer the total received this period to "	ula.				

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					
	Streel Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
3	City	ZIP				
	2000	State				
	Services or Goods Purchased Payment Date					
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
5	City	Slate	ZIP	1		
49	Services or Goods Purchased		Payment Date			

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		Date that Debt Accrued	-		
	Name					
	Street Address			_		
2	City	Slale	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address	_				
	City	Slate	ZIP			
		Siate	Date that Debt Accrued			
	Type of Account Receivable or Debt Owed					
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed  Date that Debt Accrued					
	Name					
	Street Address			1		
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		L		-	

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



# 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 Montes / 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)		

Schedule A(11), page\_\_\_\_ of \_\_\_



COMMITTEE ID NUMBER

LHC-21-001-REF

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Arizona Dispensaries Association Inc				
330 E. Thomas Road	10 000 00				
Phoenix	AZ	85012	10,000.00		
Charitable Contribution	12/8/2021				
Name					
Street Address					
City	State	ZIP			
Receipt Type	<u> </u>	Receipt Date			
Name					
Street Address		-			
City	State	ZIP			
Receipt Type Receipt Date			-		
Name					
Streel Address					
City	Slate	ZIP			
Receipt Type	I.	Receipt Dale			
Name					
Street Address			-		
City	State	ZIP			
Receipt Type		Receipt Dale	-		
Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts."	line 12)		10,000	10,000
	Name Arizona Dispensaries Associated Address 330 E. Thomas Road City Phoenix Receipt Type Charitable Contribution Name Street Address City Receipt Type Name Street Address City Receipt Type Name Street Address City Receipt Type Name Street Address City Receipt Type Name Street Address City Receipt Type Name Street Address City Receipt Type Name Street Address City Receipt Type Name Street Address	Arizona Dispensaries Association Inc  Street Address 330 E. Thomas Road  City State Phoenix AZ  Receipt Type Charitable Contribution  Name  Street Address  City State  Receipt Type  Name  Street Address  City State  Receipt Type  Name  Street Address  City State  Receipt Type  Name  Street Address  City State  Receipt Type  Name  Street Address  City State  Receipt Type  Name  Street Address  City State  Receipt Type  Name  Street Address  City State  Receipt Type  Enter total only if last page of schedule	Arizona Dispensaries Association Inc  Street Address 330 E. Thomas Road  City Phoenix AZ 85012  Receipt Type Receipt Date  Charitable Contribution 12/8/2021  Name  Street Address  City State ZIP  Receipt Type Receipt Date  Clay State ZIP  Receipt Type Receipt Date  Street Address  City State ZIP  Receipt Type Receipt Date  Street Address  City State ZIP  Receipt Type Receipt Date  Name  Street Address  City State ZIP  Receipt Type Receipt Date  Street Address  City State ZIP  Receipt Type Receipt Date  Receipt Type Receipt Date  Receipt Type Receipt Date	Name Arizona Dispensaries Association Inc  Sized Address 330 E. Thomas Road  City State Receipt Date Charitable Contribution  Name  Street Address  City State ZiP  Receipt Type Receipt Date  Street Address  City State ZiP  Receipt Type Receipt Date  Street Address  City State ZiP  Receipt Date  Street Address  City State ZiP  Receipt Date  Street Address  City State ZiP  Receipt Date  Street Address  City State ZiP  Receipt Type Receipt Date  Street Address  City State ZiP  Receipt Type Receipt Date  Street Address  City State ZiP  Receipt Type Receipt Date  Street Address  City State ZiP  Receipt Type Receipt Date  Enter total only if fast page of schedule	Name   Source   Information   Amount

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



COMMITTEE ID NUMBER

LHC-21-001-REF

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

1 Street Street	me Arizona Dispensaries Association eet Address 30 E. Thomas Road  y Phoenix pe of Operating Expense Paid Charitable Contribution	Information Disbursement Date 12/08/2021  State AZ Non-Electoral Purpose?	ZIP 85012	Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle 10,000
Al Stree	rizona Dispensaries Association eet Address 30 E. Thomas Road y Phoenix pe of Operating Expense Paid Charitable Contribution	12/08/2021  State AZ  Non-Electoral Purpose?		10,000	10,000	10,000
Stree Stree	eet Address 30 E. Thomas Road  y Phoenix pe of Operating Expense Paid Charitable Contribution	State AZ Non-Electoral Purpose?		10,000	10,000	10,000
1 Gity P Typ C Nam	30 E. Thomas Road y Phoenix pe of Operating Expense Paid Charitable Contribution	AZ Non-Electoral Purpose?		10,000		
1 City P Τyρ C Nan	y Phoenix pe of Operating Expense Paid Charitable Contribution	AZ Non-Electoral Purpose?		-		1
P Typ C Nam	Phoenix pe of Operating Expense Paid Charitable Contribution	AZ Non-Electoral Purpose?				
Typ C	pe of Operating Expense Paid Charitable Contribution	Non-Electoral Purpose?	0001Z			
Nam Stre	Charitable Contribution		(PACs and Political Parties Only)			
Nam Stre						
2		Disbursement Date				
2						
2 City	eet Address					
City						
- 1	у	State	ZIP			
_				□ Cash		
Тур	pe of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
Nan	me	Disbursement Date				
Stre	Street Address			-		
3 City	у	State	ZIP	7		
				☐ Cash		
Тур	pe of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
$\perp$						
Nan	me	Disbursement Date				
Shra	eet Address			-		
	eet radicas					
4 City	y	State	ZIP	-	i	
'				□ Cash		
Тур	pe of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Credit		
		0				
Nan	me	Disbursement Date				
				_		
Stre	Street Address					
5			1			
City	y	State	ZIP	□ Cash		
Tun	pe of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Credit		
'yp	or operating expense raid					
+	Annual de la Maria			_k	1	
	nter total only if last page of schedule ansfer the total disbursed this period to "Sun	nmary of Disburser	ments." line 1)		10,000	10.000

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

COMMITTEE	ID NUMBER

### MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Committee Name	Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Street Address					
1						
	City	State	ZIP	[ [ ] [ ] [ ]		
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
	Committee Name					
	Street Address					
2	City	Slate	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	•	☐ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	☐ Cash		
	Committee ID Number	☐ Credit				
	Committee Name					
	Streel Address					
4	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
-	Street Address	,				
5	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sun	nmary of Disbursen	nents," line 2(a))			

# MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Actio	n Committee Recipient	Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution M	ade	□ Cash □ Credit		:
	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution N	Date Contribution Made			
	Committee Name					
	Street Address					
3	City	Stale	ZIP			
	Committee ID Number	Date Contribution N	fade	□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution N	lade	☐ Cash☐ Credit		
	Committee Name					
	Street Address					
5		T .				
	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution N		☐ Credit		
	Enter total only if last page of s (transfer the total disbursed this per	chedule iod to "Summary of Disbu	rsements," line 2(b))			

COMMITTEE ID NUMBER
---------------------

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party R	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made	I.	□ Cash □ Credit		
	Committee Name					
	Street Address			$\dashv$		
2	City	State	ZIP	_		
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	<u>l</u>				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmany of Disburser	ments " line 2(c))			

MONETARY CONTRIBUTIONS TO PARTNERSHIPS

SCHEDULE B(2)(d)

Stree  Corp  Parin  Stree  City	poration Commission File Number Inership Name	State  Date Contribution Made	ZIP	□ Cash	Reporting Period	Election Cycle	
Corp Partn Stree	poralion Commission File Number Inership Name ret Address		ZIP				
Corp Parint Stree City	poration Commission File Number Inership Name		ZIP				
Parin Stree 2 City	inership Name rel Address	Date Contribution Made					
Stree	rel Address						
City			Parlnership Name				
City		Street Address					
Corp		State	ZIP	□ Cash			
	Corporation Commission File Number Date Contribution Made		l.	☐ Credit			
Partn	Partnership Name						
Stree	Street Address						
City		State	ZIP	□ Cash			
Corpo	poration Commission File Number	Date Contribution Made	I.	□ Credit			
Partn	Partnership Name						
Stree	Street Address						
City		State	ZIP	☐ Cash			
Согра	poration Commission File Number	Date Contribution Made		☐ Credit			
Partn	nership Name						
Stree	el Address		1				
City		State	ZIP	□ Cash			
Corpo	poration Commission File Number	Date Contribution Made		☐ Credit			

COMMITTEE	ID NUMBER
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MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation /	LLC Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Corporation/LLC Name					
2	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	19	□ Credit		
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	n File Number Date Contribution Made				
	Corporation/LLC Name	N.				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address	Street Address				
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	L.	☐ Credit		
	Enter total only if last page of sched (transfer the total disbursed this period to	dule	1			



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orga	nization Recipient Infor	rmation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name		(A.S.)			
Ì	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	le	□ Credit		
1	Labor Organization Name					
Street Address						
2	City	State	ZIP			
Ì	Corporation Commission File Number	Date Contribution Mad	de	□ Credit	☐ Cash☐ Credit	
1	Labor Organization Name					
	Street Address	-				
3	City	State	ZIP	□ Cash		
Ì	Corporation Commission File Number Date Contribution Made		□ Credit			
1	Labor Organization Name					
1	Street Address					
1	City	State	ZIP	□ Cash		
Ì	Corporation Commission File Number	Date Contribution Mac	de	☐ Credit		
1	Labor Organization Name					
	Street Address					
•	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	de	☐ Cash☐ Credit		
	Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 2(f))					

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

Contribu	tor Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name		Date Refund Received			
Street Address	_				
City	State	ZIP			
Committee ID Number		Date of Original Contribution			
Committee Name		Date Refund Received			
Street Address					
City	State	ZIP	-		
Committee ID Number	h	Date of Original Contribution			
Committee Name		Date Refund Received			
Street Address					
City	State	ZIP			
Committee ID Number		Date of Original Contribution			
Committee Name		Date Refund Received			
Street Address					
City	State	ZIP	-		
Committee ID Number		Date of Original Contribution			
Committee Name	Committee Name				
Street Address					
City State		ZIP			
Committee ID Number		Date of Original Contribution	_		
	Committee Name  Street Address  City  Committee ID Number  Committee Name  Street Address  City  Committee ID Number  Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  Committee ID Number	Street Address  City State  Committee ID Number  Committee Name  Street Address  City State  Committee Name  Street Address  City State  Committee ID Number  Committee ID Number  Street Address  City State  Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Committee ID Number  Street Address  City State	Committee Name  Street Address  City State  ZIP  Committee ID Number  Date of Original Contribution  Street Address  City State  ZIP  Committee ID Number  Date of Original Contribution  Street Address  City State  ZIP  Committee ID Number  Date of Original Contribution  Committee Name  Date Refund Received  Street Address  City State  ZIP  Committee Name  Date Refund Received  Street Address  City State  ZIP  Committee ID Number  Date of Original Contribution  Committee ID Number  Date of Original Contribution  Committee Name  Date Refund Received  Street Address  City State  ZIP  Committee Name  Date Refund Received  Street Address  Street Address  Street Address	Committee Name  Date Reland Received  Street Address  City State  Date of Original Contribution  Committee ID Number  Date of Original Contribution  Street Address  City State  ZIP  Committee ID Number  Date of Original Contribution  Date of Original Contribution  Committee ID Number  Date of Original Contribution  Street Address  City State  ZIP  Committee Number  Date of Original Contribution  Street Address  City State  ZIP  Committee ID Number  Date of Original Contribution  Committee Number  Date of Original Contribution  Committee Number  Date of Original Contribution  Committee Number  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date of Original Contribution  Date Reland Received	Committee Name   Date Refund Received

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



LOANS MADE

SCHEDULE B(3)(a)

/	•	wer Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Sorrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made		1		
	Borrower Name					
ŀ	Street Address			7		
3	City	State	ZIP			
100	Guarantor/Endorser Name	Date Loan Made	Į.			
	Borrower Name					
	Street Address					
4	City	State	ZIP			
	Guaranlor/Endorser Name	ntor/Endorser Name Date Loan Made				
	Borrower Name					
	Street Address			1		
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
$\dashv$	Enter total only if last page of schedul (transfer the total received this period to "S					

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

_		Guarantor Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name	Guarantor Name				
	Street Address					
1	City	State	ZIP			
	Borrower Name	Dale Loan Guarant	eed			
	Guarantor Name	,				
	Sireet Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaran	leed			
	Guarantor Name				,	
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaran	leed			
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaran	teed			
	Guarantor Name					
	Street Address					
5	City	State	ZIP			
- 1	Borrower Name	Date Loan Guaran	l l l l l l l l l l l l l l l l l l l			

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

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/	Borrowe	r Information		Amount Forgiven	Cumulative Amount this	Cumulative Amount this
Γ	Borrower Name		Date Forgiveness Made		Reporting Period	Election Cycle
	Street Address		ļ.			
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outslanding				
r	Borrower Name	l:	Date Forgiveness Made			
	Street Address					
2	City	Stale	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
r	Borrower Name		Date Forgiveness Made			
	Street Address		<u>.                                    </u>			
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
H	Borrower Name	I.	Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
-	Borrower Name	1	Date Forgiveness Made			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	Immary of Disburser	ments," line 3(c))			

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

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	l	_ender Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Repayment Made			
	Street Address		Ju.			
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name	i)	Date Repayment Made			
	Sireet Address					
2	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding		anding			
	Lender Name		Date Repayment Made			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding		anding			
	Lender Name	<u> </u>	Date Repayment Made		. = .	
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsta	anding			
	Lender Name	N.	Date Repayment Made			
	Street Address	Street Address				
5	City	State	ZIP			
	Original Amount Borrowed	Original Amount Borrowed Amount Still Outstanding				
	Enter total only if last page of sch (transfer the total disbursed this perio	nedule				



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/	Lend	der Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address		-1			
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ding			
	Lender Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ling			
+	Lender Name	I	Date Interest Accrued			
	Street Address		<u>.</u>			
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ling			
	Lender Name		Date Interest Accrued			
	Street Address					
4	City	Slate	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ding			
	Lender Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ling			

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

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

Re	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
e of Original Payor		Date Rebate/Refund Made			
l Address					
	State	ZIP			
oration Commission File Number (If applicable)	Original Payment Amount	Date of Original Payment			
e of Original Payor		Date Rebate/Refund Made			
t Address					
	State	ZIP			
pration Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
e of Original Payor		Date Rebate/Refund Made			
t Address					
	State	ZIP			
oration Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
e of Original Payor		Date Rebate/Refund Made			
t Address					
	Slate	ZIP	_		
oration Commission File Number (If applicable)	Original Payment Amount	Name of Original Payor			
e of Original Payor		Date Rebale/Refund Made			
Street Address		l			
	State	ZIP			
oration Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
			only if last page of schedule etatal disbursed this period to "Summary of Disbursements," line 4)		

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

# IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/		e Committee Recipient I	nformation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Dale In-Kind Contri	bution Made			
	Committee Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Made			
_	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibution Made			
_	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	ibulion Made			

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

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/	Political Action Comm	ittee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Sireet Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
Г	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
L	Street Address					
4	City	Stale	ZIP			
	Committee ID Number Date In-Kind Contribution Made					
	Committee Name					
5	Street Address					
"	City	State	ZIP			
	Committee ID Number Date In-Kind Contribution Made					
L	Enter total only if last page of schedule (transfer the total disbursed this period to "S	ummary of Disburser	ments," line 5(b))			

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

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

12	/						
		Political Party Re	ecipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name					
		reel Address					
1	1	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
-		Committee Name					
	Street Address						
2	2	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
		Committee Name					
		Street Address					
3	3	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
	1	Committee Name	<u>.                                    </u>				
	Ì	Street Address					
4	ا ا	City	State	ZIP			
	Ì	Committee ID Number	Date In-Kind Contribution	Made			
		Committee Name			, , , , , , , , , , , , , , , , , , ,		
	1	Street Address					
5	7	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 "Sun	nmary of Disbursen	nents," line 5(c))			

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

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS

SCHEDULE B(5)(d)

/				Amount	Cumulative	Cumulative
	Partnership	Recipient Informatio	n	Amount Contributed	Amount this Reporting Period	Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Partnership Name					
	Street Address	treet Address				
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Partnership Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Parlnership Name					
	Street Address					
4	City	State	ZIP	-	1	
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			

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

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

/	Corporation	/ LLC Recipient Inform	mation	Amount Contributed	Cumulative Amount this	Cumulative Amount this
	Corporation/LLC Name			Odninated	Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Made			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Dale In-Kind Contribut	ìon Made			
	Corporation/LLC Name	\ <u></u>				
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Made					
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Enter total only if last page of sch (transfer the total disbursed this period	edule				

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

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organ	ization Recipient Inf	ormation	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 Contrib	ulion Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bulion Made			
	Labor Organization Name					
	Street Address			-		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Labor Organization Name					
	Street Address					
5	City	Stale	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			

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



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

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					
1	- 1	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				1		
2		City	State	ZIP	1		
		Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash☐ Credit		
	Ì	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			Credit		
	1	Recipient Name	<del>//</del>	Mode of Advertising (TV, mail, etc)			
	İ	Street Address			1		
3		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		_ L Credit		
		Recipient Name		Mode of Advertising (TV, mail, etc)			
		Street Address					
4		City	Slate	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		Olegiii		
	1	Enter total only if last page of schedul (transfer the total disbursed this period to "\$	e Summary of Disburger	ments " line 7)			



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

		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			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	zalled	☐ 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	1		
	Supporting or Opposing Issuance of Recall Order?  Candidate Sought to be Rec		alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
3	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	lalled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		Li Credit		
	Recipient Name	.1.	Mode of Advertising (TV, mail, etc)			
	Street Address		I,	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 "S	e Summany of Disburger	nents " line 8)	I.		

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY);

SCHEDULE B(9)

/_	/	Benefitt	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		J.			
	0.00	Notes:					
		Candidate Name		Date Benefit Provided			
		Street Address					
	2	City	State	ZIP			
		Type of Benefit Provided		Į.			
		Notes:					
		Candidate Name		Date Benefit Provided			
		Street Address					
	3	City	State	ZIP			
		Type of Benefit Provided					
		Notes:					
		Candidate Name		Date Benefit Provided			
		Street Address					
	4	City	State	ZIP			
		Type of Benefit Provided					
		Notes:					
		Enter total only if last page of schedule (transfer the total disbursed this period to "S	)	cents " line 9)			
L		frigurates the total dispulsed this heliod to 3	difficulty of Dispulser	nona, inic <i>aj</i>			

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



COMMITTEE ID NUMBER	

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

		ommittee Infor		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP	☐ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared	Expense (if applicable)	☐ Credit		
	Committee Name		Payment Date			7
	Street Address					
2	City State		ZIP	Florit		
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense		Expense (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	- I Cook		
	Date of Joint Fundraising Event (if applicable)	Type of Shared	Expense (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP	<b>—</b>		
	Date of Joint Fundraising Event (if applicable)	Type of Shared	Expense (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared I	Expense (if applicable)	□ Cash □ Credit		
	Enter total only if last page of schedu (transfer the total disbursed this period to	ıle				
	(transfer the total disbursed this period to	Summary of Dis	bursements," line 10)			



REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		, topotally 1 o			
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
2	City	Stale	ZIP	□ Cash		
	Services or Goods Reimbursed	<u> </u>	Reimbursement Date	□ Credit		
	Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	Reimbursement Date	☐ Credit			
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	□ Credit		
	Name		Į.			
	Street Address					
5	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	Ļ	Reimbursement Date	☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disburse	ements," line 11)			

# OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt Ir	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Streel Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
	Name		<u> </u>			
	Street Address			1		
2	City	State	ZIP			
	Type of Account Payable or Debt Owed	1	Date that Debt Accrued	1		
	Name					
0000	Street Address			-		
3	City	State	ZIP	-		
	Type of Account Payable or Debt Owed	Date that Debt Accrued	1			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Payable or Debt Owed	l.	Date that Debt Accrued	_		
	Name					
	Street Address			1		
5	City	State	ZIP	-		
	Type of Account Payable or Debt Owed		Date that Debt Accrued	1		
4	Enter total only if last page of schedule		1			

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



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

SCHEDULE B(13)

	0 8	
	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 13)		

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



# MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Re	ecipient Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Name				
1	Street Address					
	City	State	ZIP	□ Cash		
	Disbursement Type	- to-	Disbursement Date	☐ Credit		
	Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Sireet Address	Sireet Address				
3	City	State	ZIP	□ Cash		
	Disbursement Type Disbursement Date			□ Casti		
	Name	vlame				
	Streel Address					
4	City	State	ZIP	- Cont		
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
	Name	Name				
	Sireet Address					
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	☐ Cash☐ Credit		
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 14)					

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 \_\_\_\_