

COMMITTEE INFORMATION (required):

	Committee Information:	Committee Name:	Friends of Judge Wilson							
CANDIDATE INFORMATION (only if filing as a candidate committee):  Office Sought:										
	Office Sought:	☑ County Office:	Justice of the Peace, Precinct 9	☐ Special District Office:						
		☐ City/Town Office	):	☐ School Board District:						
	Cumulative Report:									
	☐ Check here if this is the	e candidate committee's f	first, cumulative report for the electi	ion cycle. Also select appropriate Reporting Period below.						
	Cumulative reporting perio	od start date (which supe	ersedes the start date for the Repo	orting Period selected below):						
REPO	ORTING PERIOD (check one):									

/	REPORTING PERIOD	REPORT DUE
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023	February 26, 2023 to March 4, 2023
	2023 March Post-Election (Q1) Report (Local Only): February 26, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
	2023 Quarter 1 Report: January 1, 2023 to March 31, 2023	April 1, 2023 to April 17, 2023
	2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023	April 30, 2023 to May 6, 2023
	2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
	2023 Quarter 2 Report: April 1, 2023 to June 30, 2023	July 1, 2023 to July 17, 2023
	2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023	July 16, 2023 to July 22, 2023
	2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023
	2023 Quarter 3 Report: July 1, 2023 to September 30, 2023	October 1, 2023 to October 16, 2023
	2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023	October 22, 2023 to October 28, 2023
	2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
	2023 Quarter 4 Report: October 1, 2023 to December 31, 2023	January 1, 2024 to January 16, 2024*
	2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024	February 25, 2024 to March 2, 2024
	2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
~	2024 Quarter 1 Report: January 1, 2024 to March 31, 2024	April 1, 2024 to April 15, 2024
	2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024	May 5, 2024 to May 11, 2024
	2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
	2024 Quarter 2 Report: April 1, 2024 to June 30, 2024	July 1, 2024 to July 15, 2024
	2024 Pre-Primary Election Report: July 1, 2024 to July 20, 2024	July 21, 2024 to July 27, 2024
	2024 Post-Primary Election (Q3) Report: July 21, 2024 to September 30, 2024	October 1, 2024 to October 21, 2024
	2024 Quarter 3 Report: July 1, 2024 to September 30, 2024	October 1, 2024 to October 21, 2024
	2024 Pre-General Election Report: October 1, 2024 to October 19, 2024	October 20, 2024 to October 26, 2024
	2024 Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024	January 1, 2025 to January 20, 2025
	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 if deadline date is a holiday or Sunday. A.R.S. §§§ 1-243(A), 1-301 and 1-303.

# ANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	3,349.65	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	4,371.62	8,071.62
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	4,034.22	4,384.57
(d) = Balance at close of reporting period	3,687.05	
Check here if filing no financial activity during the reporting period. Lines (a) (d) still must be	e completed but only this	cover nage and the

☐ 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.



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.

Kendrick A. Wilson

Printed Name of Committee Treasurer

Signature of Committee Treasurer

4-2-24

Date

## SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100	750.00	
	(b) In-State Individuals - \$100 or Less (Aggregate)	3,600.00	
	(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 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 Cooking		
	(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	21.62	
4.	Interest Accrued on Committee Monies		
5.	In-Kind 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		
	(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))		
8.	Joint Fundraising / Shared Expense Payments Received		
9.	Payments Received for Goods / Services		
10.	Outstanding Accounts Receivable / Debts Owed to Committee		
11.	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12.	Miscellaneous Receipts (use cash and/or equity as applicable)		
	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)	4,371.62	

## SUMMARY OF DISBURSEMENTS (Schedule B):

/	Disbursements	Cash	Equity
		4,034.22	Equity
1.	Disbursements for Operating Expenses	4,004.22	
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
	(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		
	(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)		
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) 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)		
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 (use cash and/or equity as applicable)		
15.			
16.		4,034.22	0.00

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

SCHEDULE A(1)(a)

			1	1 1	
Individu	al Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name Darlene Chavira-Chaverz		Date Contribution Received 1/19/2024	200.00	200.00	200.00
Street Address 2454 W. Tucana St.					
City Tucson	State AZ	zip 85745			
Occupation Attorney	Employer Self				
<sub>Name</sub> Michael Aaron Harwin		Date Contribution Received 1/19/2024	500.00	500.00	500.00
Street Address 6758 W. Redcliff Way					
City Tucson	State AZ	ZIP 85743			
Occupation Attorney	Employer Law Office	of Michael Aaron Harwin			
Name Janet Altschuler		Date Contribution Received 1/20/2024	2,500.00	2,500.00	2,500.00
Street Address 4386 N. Atfield Pl.					
City Tucson	State AZ	zip 85719			
Occupation Attorney	Employer Law Office	of Janet Altschuler			
Name Darlene Chavira-Chavez		Date Contribution Received 3/1/2024	200.00	400.00	400.00B
Street Address 2454 W. Tucana St.					
City Tucson	State AZ	zip 85745			
Occupation Attorney	Employer Self				
Name Brad Holland		Date Contribution Received 3/18/2024	200.00	200.00	200.00
Street Address 260 S. Ave del Palo Fierro					
City Tucson	State AZ	ZIP 85745			
Occupation Retired	Employer				
Enter total only if last page of sch (transfer the total received this period	nedule to "Summary of Recei	pts," line 1(a))	1	3,600.00	4,350.00
	Name Darlene Chavira-Chaverz  Street Address 2454 W. Tucana St.  City Tucson  Occupation Attorney  Name Michael Aaron Harwin  Street Address 6758 W. Redcliff Way  City Tucson  Occupation Attorney  Name Janet Altschuler  Street Address 4386 N. Atfield Pl.  City Tucson  Occupation Attorney  Name Darlene Chavira-Chavez  Street Address 2454 W. Tucana St.  City Tucson  Occupation Attorney  Name Darlene Chavira-Chavez  Street Address 2454 W. Tucana St.  City Tucson  Occupation Attorney  Name Brad Holland  Street Address 260 S. Ave del Palo Fierro  City Tucson  Occupation Attorney  Name Brat Holland  Street Address 260 S. Ave del Palo Fierro  City Tucson  Occupation Retired  Enter total only if last page of sch	Name Darlene Chavira-Chaverz  Street Address 2454 W. Tucana St.  City Tucson Attorney  Name Michael Aaron Harwin  Street Address 6758 W. Redcliff Way  City Tucson Attorney  Name Janet Altschuler  Street Address 4386 N. Atfield Pl.  City Tucson  Cocupation Attorney  Street Address 4386 N. Atfield Pl.  City Tucson  Cocupation Attorney  Street Address 2454 W. Tucana St.  City Tucson  Cocupation Attorney  Street Address 2454 W. Tucana St.  City Tucson  Cocupation Attorney  Street Address 2454 W. Tucana St.  City Tucson  Cocupation Attorney  State AZ  Cocupation Retired  Employer  Employer  State AZ  Cocupation Retired	Darlene Chavira-Chaverz   1/19/2024	Date Contribution Received   1/19/2024   200.00	Neme

<sup>\*</sup>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 1 of 1

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	575.00	1,225.00
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	575.00	1,225.00

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

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

SCHEDULE A(1)(c)

	Individual Cont	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name	ame Date Contribution Receive				
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name	<del></del>	Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name	L	Date Contribution Received			
	Street Address		L			
4	City	State	ZIP			
	Occupation	Employer				
	Name	L	Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of sehectule					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(c))			2,000.00

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

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

				Cumulative	Cumulative
Candidate Committee	Contributor Infor	mation	Amount Received	Amount this Reporting Period	Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Receive	e de la companya de l			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Receive	3d			
Committee Name					
Street Address					
City	State	ZIP			
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 ID Number	Date Contribution Receive	l ed			
			i .		
	Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  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 Name  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State	Street Address  City State ZIP  Committee ID Number Date Contribution Received  City State ZIP  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee ID Number Date Contribution Received  Street Address  City State ZIP  Committee ID Number Date Contribution Received  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  Street Address  City State ZIP  Committee ID Number Date Contribution Received	Committee ID Number  Committee ID Number  Date Contribution Received  Committee ID Number  Street Address  City  State  ZIP  Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received	Reporting Period  Committee Name  Street Address  City State  Street Address  City State  Date Contribution Received  Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received  Committee Name  Street Address  City State  Zip  Committee Name  Street Address

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

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

Political Action Committ	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Receive	l d			
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date Contribution Receive	ed			
Committee Name	1				
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 Receive	L ed			
Enter total only if last page of schedule	mary of Receipts "	line 1(e))	L	0.00	0.00
	Committee Name  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  Committee ID Number  Committee ID Number  Street Address  City  Committee ID Number  Street Address  City  Committee ID Number  City  Committee ID Number	Committee Name  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee Name  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State  Committee ID Number Date Contribution Receive  Committee Name  Street Address  City State  Committee ID Number Date Contribution Receive  Street Address  City State	Street Address  City State ZIP  Committee ID Number Date Contribution Received  City State ZIP  Committee Name  Street Address  City State ZIP  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  City State ZIP  Committee ID Number Date Contribution Received  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 Street Address  City State ZIP  Committee ID Number Date Contribution Received	Street Address  City State Contribution Received  Committee ID Number  Date Contribution Received  Committee ID Number  Street Address  City State ZIP  Committee ID Number  Date Contribution Received  Committee ID Number  Date Contribution Received	Political Action Committee Contributor Information  Amount Received Amount this Reporting Period  Committee Name  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Street Address  City State ZIP  Committee ID Number Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee Name  Date Contribution Received  Committee Name  Street Address  City State ZIP  Committee Name  Date Contribution Received  Committee ID Number Date Contribution Received

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

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

/						
	Political Party Co	ntributor Informat	ion	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	l ed			
	Committee Name					
	Street Address	· · · · · · · · · · · · · · · · · · ·				
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name	L				A
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
5						
	City  Committee ID Number					
	Committee ID Number	Date Contribution Receive				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	line 1(f))		0.00	0.00

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

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	Street Address				
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	<u>l</u>			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Partnership Name	L				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	<u>J</u>			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts "	line 1(a))		0.00	0.00
	· · · · · · · · · · · · · · · · · · ·		10//			

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

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC C	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 Contribution Receive	rd			
	Corporation/LLC Name	<del></del>	· · · · · · · · · · · · · · · · · · ·			
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	l ed			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	<u>l</u>			
	Corporation/LLC Name	Laine de la companya				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	L de la companya de l			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(h))		0.00	0.00

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

#### MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(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 Contribution Receive	bed			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name	L				
	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	ed			
	Labor Organization 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				0.00	0.00

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

## MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

/	Candidate	Information		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	L	Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer	<del></del>			
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name	L	Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(j))	L	0.00	

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

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	Name I				
	Street Address					
1	City	State	ZIP			
	ID Number (if applicable)	I	Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address		1			
2	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address		L			
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address		<u> </u>			
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
5	City	State	ZIP			
	ID Number (if applicable)	L	Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	mary of Receipts," li	ine 1(I))	l	0.00	0.00

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

LOANS RECEIVED:

SCHEDULE A(2)(a)

/	Lender I	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received				
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (	PACs and Political Parties Only)			
		Ш				
	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	L				
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 "Summary of Receipts," line 2(a))				0.00	0.00

Schedule A(2)(a), page 1 of 1

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	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address		L			
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u> </u>			
	Lender Name Date Forgiveness Received					
	Street Address		<u> </u>			
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	L			
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	L			
	Lender Name		Date Forgiveness Received			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	L			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 2(b))		0.00	0.00

Schedule A(2)(b), page 1 of 1

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Repayment Received			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Repayment Received			
	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				
	Borrower Name	<u> </u>	Date Repayment Received			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	L			
	Borrower Name	L	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				0.00	0.00

Schedule A(2)(c), page 1 of 1

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address		L			
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name Date Interest Accrued		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	I			
	Borrower Name	I	Date Interest Accrued			
	Street Address		L			
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Borrower Name	L	Date Interest Accrued			
	Street Address		L			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	L			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Bassists " !	ino 2(d))		0.00	0.00
	Caranala in com received this period to Sun	mary or receipes, I	= (u/)			

Schedule A(2)(d), page 1 of 1



EBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

Payor	nformation		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Payor Name Office Depot				21.62	21.62
Street Address 3413 E. Broadway Blvd.					
City Tucson	State AZ	<sup>ZIP</sup> 85716			
Original Purchase Amount 21.62					
Payor Name		Date Rebate/Refund Received			
Street Address					
City	State	ZIP			
Original Purchase Amount	Reason for Refund/Rebate	9			
Payor Nama		Date Rebate/Refund Received			
Street Address		<u> </u>			
City	State	ZIP			
Original Purchase Amount	Reason for Refund/Rebate	9			
Payor Name	<del>1</del>	Date Rebate/Refund Received			
Street Address	***************************************	L			
City	State	ZIP			
Original Purchase Amount	Reason for Refund/Rebate	3			
Payor Name		Date Rebate/Refund Received			
Street Address					
City	State	ZIP			
Original Purchase Amount	Reason for Refund/Rebate	)			
Enter total only if last page of schedule	<u> </u>			21.62	21.62
	Payor Name Office Depot Street Address 3413 E. Broadway Blvd. City TUCSON Original Purchase Amount 21.62 Payor Name Street Address City Original Purchase Amount	Office Depot Street Address 3413 E. Broadway Blvd.  City State TUCSON AZ  Original Purchase Amount Reason for Refund/Rebate 21.62 Return of labels  Street Address  City State  Original Purchase Amount Reason for Refund/Rebate  Street Address  City State  Original Purchase Amount Reason for Refund/Rebate  Street Address  City State  Original Purchase Amount Reason for Refund/Rebate  Street Address  City State  City State	Payor Name Office Depot Street Address 3413 E. Broadway Blvd. City TUCSON AZ B5716 Original Purchase Amount Payor Name Date Rebate/Refund Received Street Address  City State AZ State Reason for Refund/Rebate Return of labels  Payor Name Date Rebate/Refund Received  Street Address  City State Zip Original Purchase Amount Reason for Refund/Rebate  Payor Name Date Rebate/Refund Received  Street Address  City State Zip Original Purchase Amount Reason for Refund/Rebate  City State Zip Original Purchase Amount Reason for Refund/Rebate  Date Rebate/Refund Received  Street Address  City State Zip Original Purchase Amount Reason for Refund/Rebate  Date Rebate/Refund Received  Date Rebate/Refund Received  Street Address  City State Zip Original Purchase Amount Reason for Refund/Rebate  Date Rebate/Refund Received  Street Address  City State Zip Original Purchase Amount Reason for Refund/Rebate	Payor Name Office Depot Street Address Office Depot Street Address Office Depot Street Address Orginal Purchase Amount Payor Name Date Rebatio/Refund Received  Date Rebatio/Refund Received	Payor Information Amount Repaired Amount Repaired Payor Name   Date Rebate/Return Received   1/22/2024   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62   21.62

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Total (transfer the total received this period to "Summary of Receipts," line 4)	0.00	0.00

Schedule A(4), page 1 of 1

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

SCHEDULE A(5)(a)

	Individual Contr	ibutor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address		L.,			
2	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	Name		Date In-Kind Contribution Received			
	Street Address		L			
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer	L			
	Name	<u>L</u> ,	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	many of Receipts "	ine 5(a))		0.00	0.00

\*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 - \$100 or Less	35.88	35.88
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(b))	35.88	35.88

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

## N-KIND CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(5)(c)

/					Cumulative	Cumulative
	Individual Con	ributor Informatio	on	Amount Received	Amount this Reporting Period	Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name	1	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				
100	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name	1	Date In-Kind Contribution Received			
	Street Address		1			
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Sun	many of Receipts "	line 5/c))		0.00	0.00

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

## IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

/	Candidate Committee	· Contributor Info	rmation	Amount Received	Cumulative Amount this	Cumulative Amount this
	Committee Name				Reporting Period	Election Cycle
	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 Dansists III	line F(d))		0.00	0.00

Schedule A(5)(d), page 1 of 1

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	L				
	Street Address		44			
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 Receipts " "	ine 5(e))		0.00	0.00

Schedule A(5)(e), page 1 of 1

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

/						
	Political Party Co	ntributor Informat	tion	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	L				
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	L				
	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 Bassists " !	ino 5/6)	L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.00	0.00
	Caranasa and total received and period to Suni	mary or receipts, I				

Schedule A(5)(f), page 1 of 1

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g

	Partnership Con	tributor Information	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	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			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
H	Partnership Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
-	Enter total only if last page of schedule				0.00	0.00
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 5(g))		0.00	0.00

Schedule A(5)(g), page 1 of 1

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation / LLC C	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	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	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	line 5(h))		0.00	0.00

Schedule A(5)(h), page 1 of 1

#### 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		Troporarig Fortog				
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received				
	Labor Organization Name	L					
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received				
	Labor Órganization Name						
	Street Address	+					
3	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received	+			
	Labor Organization Name	1					
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date In-Kind Contribution	Received				
	Labor Organization Name	L					
	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						

Schedule A(5)(i), page 1 of 1

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

SCHEDULE A(5)(j)

,						
	Candidate	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Asset or Property Contributed					
_	Name		Date in-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Asset or Property Contributed					
	Name	#	Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address		1			
4	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP			
	Asset or Property Contributed					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Receipts "	line 5(i))		0.00	0.00

Schedule A(5)(j), page 1 of 1

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

SCHEDULE A(6)

/				1		
	Source	nformation		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address		<u></u>			
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donated	<u> </u>				
	Name		Date in-Kind Donation Received			
	Street Address					
3	City	State	ZIP			
	Type of Item Donated		J			
	Name		Date In-Kind Donation Received			
	Street Address		<u> </u>			
4	City	State	ZIP			
	Type of Item Donated		I			
	Name		Date In-Kind Donation Received			
	Street Address		1			
5	City	State	ZIP			
	Type of Item Donated		<u> </u>			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts "	line 6)		0.00	0.00

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

Cumulative Amount this lection Cycle

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					
	Street Address		The state of the s			
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name		<u> </u>			
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit	L.,,,	Date of Original Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit	L	Date of Original Extension of Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit	<u> </u>	Date of Original Extension of Credit			
	Name		<u> </u>			
	Street Address					
5	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 "Sum	mary of Receipts," I	ine 7(b))		0.00	0.00

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

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

Payor Comm	ittee Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name	Committee Name				
Street Address		L			
City	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	(if applicable)			
Committee Name		Payment Date			
City	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	I if applicable)			
Committee Name	<u> </u>	Payment Date			
Street Address					
City	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	if applicable)			
Committee Name		Payment Date			
Street Address					
City	State	ZIP			
Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (	if applicable)			
Committee Name		Payment Date			<u> </u>
Street Address		I			
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 "Sun	nmary of Receipts." I	ine 8)	L	0.00	0.00
	Committee Name  Street Address  City  Date of Joint Fundraising Event (if applicable)  Committee Name  Street Address  City  Date of Joint Fundraising Event (if applicable)  Committee Name  Street Address  City  Date of Joint Fundraising Event (if applicable)  Committee Name  Street Address  City  Date of Joint Fundraising Event (if applicable)  Committee Name  Street Address  City  Date of Joint Fundraising Event (if applicable)  Committee Name  Street Address  City  Date of Joint Fundraising Event (if applicable)  Enter total only if last page of schedule	Street Address  City State  Committee Name  Street Address  City State  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (  Committee Name  Street Address  City State  Committee Name  Street Address  City State  Date of Joint Fundraising Event (if applicable) Type of Shared Expense (  Committee Name  Street Address  City State  Committee Name  Street Address  City State  Type of Shared Expense (  Committee Name  Street Address  City State  Type of Shared Expense (  Committee Name  Street Address  City State  Type of Shared Expense (  Committee Name  Street Address  City State  Type of Shared Expense (  Type of Sh	Committee Name	Committee Name	Payment Amount Ins. Reporting Period  Committee Name  Street Addresse  City State ZIP  Date of Joint Fundating Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundating Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP  Date of Joint Fundating Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Street Address  City State ZIP Date of Joint Fundating Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Committee Name Payment Date  Street Address  City State ZIP Date of Joint Fundating Event (if applicable) Type of Shared Expense (if applicable)  Committee Name Payment Date  Enter Lotal Only if flast page of Schedule

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

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor II	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			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
H	Name					
3	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
4	City State		ZIP			
	Services or Goods Purchased		Payment Date			
5	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
-	Enter total only if last page of schedule	ter total only if last page of schedule			0.55	0.00
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 9)				0.00	0.00

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	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
			Date that Debt Accided			
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed Date that Debt Accrued					
	Name		<u> </u>			
	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," I	ine 10)		0.00	0.00

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 / Racipient of Transferred Debt		
Total (transfer the total received this period to "Summary of Receipts," line 11)	0.00	0.00

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Source I	nformation		Amount	Cumulative Amount this	Cumulative Amount this
	Name				Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Receipt Type	<u> </u>	Receipt Date			
	Name		<u> </u>			
	Street Address	itreet Address				
2	City	State	ZIP			
	Receipt Type	<u>L</u>	Receipt Date			
	Name			A		
	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
4	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name		<u> </u>			
	Street Address					
5	City	State	ZIP			
	Receipt Type	L	Receipt Date			

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	R	ecipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Office Depot	Disbursement Date 1/8/2024		91.70	91.70	91.70
- 1	Street Address 3601 E. Broadway Bivd.					
1	City Tucson	State AZ	z <sub>IP</sub> 85716	☑ Cash		
	Type of Operating Expense Paid Office Supplies	Non-Electoral Pur	pose? (PACs and Political Parties Only)	☐ Credit		
	Name Office Depot	Disbursement Di 1/16/2024	ate	59.76	151.47	151.47
	Street Address 3601 E. Broadway Blvd					
2	City Tucson	State AZ	ZIP 85716	☑ Cash		
	Type of Operating Expense Paid Office Supplies	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
- 1	Name Office Depot	Disbursement Di 1/22/2024	ate	38.86	190.33	190.33
	Street Address 3601 E. Broadway Blvd.					
3	city Tucson	State AZ	zip 85716	☑ Cash		
	Type of Operating Expense Paid Office Supplies	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name U.S. Post Office	Disbursement Di 1/22/2024	Disbursement Date 1/22/2024		397.50	397.50
	Street Address 141 S. 6th Ave.					
1	City Tucson	State AZ	z <sub>IP</sub> 85701	☑ Cash		
	Type of Operating Expense Paid Postage	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Gloo Factorty	Disbursement Di 1/22/2024	ate	156.77	156.77	156.77
-	Street Address 238 E. 26th St.					
,	City South Tucson	State AZ	ZIP 85713	☑ Cash		
	Type of Operating Expense Paid Postcards	Non-Electoral Pur	pose? (PACs and Political Parties Only)	Li Credit		

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Re	ecipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Gloo Factory	Disbursement Da 2/13/2024	ate	22.98	179.75	179.75
	Street Address 238 E. 26th St.					
1	City South Tucson	State AZ	ZIP 85713			
	Type of Operating Expense Paid Design	Non-Electoral Pur	pose? (PACs and Political Parties Only)	□ Credit		
	Name Gloo Factory	Disbursement Da 2/16/2024	Disbursement Date 2/16/2024		310.40	310.40
	eet Address 238 E. 26th St.					
2	City South Tucson	State AZ	zip 85713			
	Type of Operating Expense Paid Signs	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Office Depot	Disbursement Da 2/21/2024	ate	42.28	232.60	232.60
	Street Address 3601 E. Broadway Blvd.					
3	City Tucson	State AZ	ZIP 85716	☑ Cash		
	Type of Operating Expense Pald Office Supplies	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Gloo Fatory	Disbursement Da 2/23/2024	ate	795.44	1,105.84	1,105.84
	Street Address 238 E. 26th St.					
4	City South Tucson	State AZ	ZIP 85713	□ Cash		
	Type of Operating Expense Paid Flyers	Non-Electoral Purp	pose? (PACs and Political Parties Only)	☐ Credit		
	Name Gloo Factory	Disbursement Da 2/27/2024	ate	264.38	1,370.22	1,370.22
	Street Address 238 E. 26th St.	Street Address				
5	City South Tucson	State AZ	ZIP 85713	□ Cash		
	Type of Operating Expense Paid Signs		pose? (PACs and Political Parties Only)	□ Credit		
+	Enter total only if last page of schedule					

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	F	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Office Depot	Disbursement Da 3/4/2024	ate	61.13	293.73	293.73
	Street Address 3601 E. Broadway Blvd.					
1	City Tucson	State AZ	ZIP 85716			
	Type of Operating Expense Paid Office Supplies	Non-Electoral Purp	pose? (PACs and Political Parties Only)	□ Credit		
	Name Target	Disbursement Da 3/7/2024	ate	19.56	19.56	19.56
	Street Address 3699 E. Broadway Blvd.					
2	City Tucson	State AZ	zip 85716	☑ Cash		
	Type of Operating Expense Pald Office Supplies	Non-Electoral Purp	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Gloo Factory	Disbursement Da 3/8/2024	ate	1,358.01	2,728.23	2,728.23
	Street Address 238 E. 26th St.					
3	City South Tucson	State AZ	ZIP 85713	☑ Cash		
	Type of Operating Expense Paid Flyers	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Office Depot	Disbursement Da 3/11/2024	ate	122.30	416.03	416.03
	Street Address 3601 E. Broadway Blvd.					
1	City Tucson	State AZ	zip 85716	□ Cash		
	Type of Operating Expense Paid Office Supplies	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Gloo Factory	Disbursement Da 3/12/2024	ate	435.48	3,163.71	3,163.71
	Street Address 238 E. 26th St.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
5	City South Tucson	State AZ	ZIP 85713	☐ Cash ☐ Credit		
	Type of Operating Expense Paid Signs	Non-Electoral Pur	Non-Electoral Purpose? (PACs and Political Parties Only)			

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	F	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name FedEx Office	Disbursement Date 3/13/2024		15.29	15.29	15.29
	Street Address 2607 E. Speedway Blvd					
1	City Tucson	State AZ	ZIP 85716	☑ Cash		
	Type of Operating Expense Paid Photocopies	Non-Electoral Purpor	se? (PACs and Political Parties Only)	☐ Credit		
	Name FedEx Office	Disbursement Date 3/19/2024		13.13	28.42	28.42
2	reet Address 2607 E. Speedway Blvd					
	City Tucson	State AZ	ZIP 85716	☑ Cash	☑ Cash	
	Type of Operating Expense Pald Photocopies	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
	Name ActBlue	Disbursement Date 3/30/2024		9.00	9.00	46.50
	Street Address P.O. Box 441146					
3	City Somerville	State MA	ZIP 02144	☑ Cash		
	Type of Operating Expense Paid On Line Service Fee	Non-Electoral Purpos	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name	Disbursement Date	Disbursement Date			
	Street Address					
4	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpos	se? (PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date				
	Street Address	Street Address				
5	City	State	ZIP	☐ Cash		
	Type of Operating Expense Paid		se? (PACs and Political Parties Only)	☐ Credit		
	□ □ Enter total only if last page of schedule				4,034.22	4,384.57

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

/	Candidate Committee	ee Recipient Infor	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 Contribution Made			□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	☐ Cash		
	Committee ID Number Date Contribution Made			□ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			□ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name	Committee Name				
5	Street Address	Street Address				
Э	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 "Su	mmary of Disbursen	nents," line 2(a))		0.00	0.00
\		Sche	1 edule B(2)(a), page	1 of		

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Act	tion Committee Recipier	nt Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	Committee Name	L				
	Street Address					
2	City	State ZIP				
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
				☐ Cash☐ Credit		
	Committee ID Number	Date Contribution	Date Contribution Made			
	Committee Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution	Made	□ Credit		
		f schedule period to "Summary of Disb			0.00	0.00

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party Re	ecipient Information	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name			Troporang Forton	
	Street Address					
1	City	State	ZIP			
	Committee ID Number Date Contribution Made		☐ Cash☐ Credit			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number Date Contribution Made			☐ Cash☐ Credit		
1	Committee Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made				
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					<del></del>
	Street Address					
5	City	State	ZIP	- Cost		
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Sui				0.00	0.00

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

/	Partnership Red	cipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address	<u> </u>				
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		
1	Partnership Name					
	Street Address	Street Address				
3	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Partnership Name	L				
	Street Address					
4	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Corporation Commission File Number Date Contribution Made		☐ Credit		
	Partnership Name					
	Street Address					
5	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	mmany of Dishurson	ments " line 2(d))	Andreas (neglicitaria establica e establica e en entre e	0.00	0.00

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	n / LLC Recipient Inform	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		<u> </u>			
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	<u> </u>	☐ Cash☐ Credit		
_	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	9	☐ Cash☐ Credit		
-	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	9	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State ZIP				
	Corporation Commission File Number	Date Contribution Made	8	□ Cash □ Credit		
	Enter total only if last page of sci (transfer the total disbursed this perio	nedule			0.00	0.00

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	ization Recipient Info	ormation	Amount Contributor	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 Made			□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	ade	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	ade	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit		
	Enter total only if last page of sch (transfer the total disbursed this period	edule		0.00	0.00	

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	L	Date of Original Contribution			
	Committee Name		Date Refund Received			
2000	Street Address					
2	City	State	ZIP			
	Committee ID Number	L	Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
3	City	State	ZIP			
T KATE THE	Committee ID Number		Date of Original Contribution			
	Committee Name	Date Refund Received				
	Street Address					
4	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur				0.00	0.00

<del>-</del>



LOANS MADE:

SCHEDULE B(3)(a)

/	Воггоwег	Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower 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				
	Borrower Name					
	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				
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	ater total only if last page of schedule ansfer the total received this period to "Summary of Disbursements," line 3(a))				0.00

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

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

/	Guaranto	r Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	L			
	Enter total only if last page of schedule (transfer the total received this period to "Sumi	many of Dishursemo	nts " line 3/h))		0.00	0.00

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/					Cumulative	Cumulative
	Borrower	Information		Amount Forgiven	Amount this Reporting Period	Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	<u> </u>	Date Forgiveness Made			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	Date Forgiveness Made				
	Street Address		I.,			
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u> </u>			
	Borrower Name		Date Forgiveness Made			
	Street Address		<u> </u>			
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	<u> </u>			
	Borrower Name		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 "Sur	nmary of Disbursen	nents." line 3(c))		0.00	0.00

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

/	London	Information		Amount Repaid	Cumulative Amount this	Cumulative Amount this
_	<b></b>	momation		Amount Repaid	Reporting Period	Election Cycle
	Lender Name		Date Repayment Made			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
-	Lender Name		Date Repayment Made			
	Street Address		1			
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Lender Name	Lender Name				
	Street Address	Street Address				
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 3(d))				0.00	0.00
	(transfer the total disbursed this period to "Sui	mmary of Disbursen	nents," line 3(d))		0.00	0.00

1 1 Schedule B(3)(d), page\_\_\_\_ of \_\_\_\_

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

/	Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	L			
	Lender Name	<u> </u>	Date Interest Accrued			
	Street Address	<del></del>	L			
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	L	Date Interest Accrued			
	Street Address		1			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	L			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disburser	nents." line 3(e))		0.00	0.00

1 1 Schedule B(3)(e), page\_\_\_\_ of \_\_\_\_

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

Red	sipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name of Original Payor		Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
Name of Original Payor	L	Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
Name of Original Payor	L	Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
Name of Original Payor	L	Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
Name of Original Payor		Date Rebate/Refund Made			
Street Address					
City	State	ZIP			
Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	L			0.00	0.00

# IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Committe	e Recipient Inforr	nation	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 I	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	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	nmary of Disbursen	nents," line 5(a))		0.00	0.00

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Action Commi	ttee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address		<del></del>			
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
-	Committee Name					
-	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
-	Committee Name					
	Street Address					
4		Tour	T <sub>nin</sub>			
	City	State	ZIP			
	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 "Su				0.00	0.00

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/	Political Party Re	ecipient Information	on	Amount Contributed	Cumulative Amount this	Cumulative Amount this
	Committee Name	Committee Name			Reporting Period	Election Cycle
	Street 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	Made			
	Committee Name					
	Street Address	Street Address				
3	City					
	Committee ID Number	State  Date In-Kind Contribution	ZIP			
	Committee Name					
	Street Address					
4		I	T			
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
5	Street Address		-			
J	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	mmary of Disbursen	ments." line 5(c))		0.00	0.00

Schedule B(5)(c), page 1 of 1

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partnership Red	cipient Informatio	n	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 In-Kind Contribution	<u> </u> Made			
	Partnership Name	L.				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
_	Partnership Name					
	Street Address					
3	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name	L				All the state of t
	Street Address			1		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made	1		
	Partnership 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 "Sur	<u> </u>			0.00	0.00

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			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
_	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation/LLC Name					
	Street Address					
	Cited Addition					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation/LLC Name					
	Street Address	ddress				
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	I Made			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursen	nents," line 5(e))		0.00	0.00
_	L				L	

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organizatio	n Recipient Inform	nation	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	Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Labor Organization Name	<u> </u>				
	Street Address			_		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	1		<u> </u>		

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/	Expenditure F	Recipient Informat	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP	-		
1	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	□ Credit		
-	Recipient Name	l	Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)			
				☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought			
	Recipient Name		Mode of Advertising (TV, mail, etc)			
-	Street Address					
-	City	State	ZIP			
-	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	Licluding % 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					
	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		
1						

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/					Cumulative	Cumulative
	Expenditure F	Recipient Information	on	Expenditure Amount	Amount this Reporting Period	Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		<u> </u>			
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		
	Reciplent Name		Mode of Advertising (TV, mail, etc)			
	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	or Broadcast Election Month/Year		_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
3	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					
	City	State	ZIP			
4						
	Bailot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(mouding % 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 "3	e Summary of Dishurse	ments." line 7)		0.00	0.00

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

Expenditure	Recipient Informati	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address					
City	State	ZIP	-		
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled	☐ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address					
City	State	ZIP			
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	called	_ □ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address					
City	State	ZIP			
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	called	☐ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
Street Address			1		
City	State	ZIP	1		
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	called	☐ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Casii		
			<u> </u>		
Enter total only if last page of schedu (transfer the total disbursed this period to "	ie Summary of Disburse	ements," line 8)		0.00	0.00

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	Benefit	ed 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			
	Street Address		12			
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	ummary of Disbursen	nents," line 9)	des transportation de la constitución de la constit	0.00	0.00

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient Co	ommittee Informatio	n	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			
	Street Address					
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (		(if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address		allagora, esperanço que encontra que es			
5	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)  Type of Shared Expense (if applicable)		☐ Credit			
	Enter total only if last page of schedu (transfer the total disbursed this period to "	le Summary of Disburse	ments," line 10)	1	0.00	0.00

REIMBURSEMENTS MADE:

SCHEDULE B(11)

/	Recipient	Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		, 3			
	Street Address					
1	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
3		F	Г			
	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	<u> </u>	Reimbursement Date	□ Credit		
	Name					
	Street Address	Address				
5	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur		L		0.00	0.00

## OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

			1	1 1	
Debt In	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name					
Street Address					
City	State	ZIP	-		
Type of Account Payable or Debt Owed	L	Date that Debt Accrued			
Name		L			
Street Address					
City	State	ZIP			
Type of Account Payable or Debt Owed		Date that Debt Accrued			
Name					
Street Address					
City	State	ZIP	1		
Type of Account Payable or Debt Owed		Date that Debt Accrued			
Name		<u> </u>			
Street Address					
City	State	ZIP			
Type of Account Payable or Debt Owed		Date that Debt Accrued			
Name					
Street Address					
City	State	ZIP			
Type of Account Payable or Debt Owed		Date that Debt Accrued			
Enter total only if last page of schedule				0.00	0.00
	Street Address  City  Type of Account Payable or Debt Owed  Name  Street Address  City  Type of Account Payable or Debt Owed  Name  Street Address  City  Type of Account Payable or Debt Owed  Name  Street Address  City  Type of Account Payable or Debt Owed  Name  Street Address  City  Type of Account Payable or Debt Owed  Name  Street Address  City  Type of Account Payable or Debt Owed  Name  Street Address  City  Type of Account Payable or Debt Owed	Street Address  City State  Type of Account Payable or Debt Owed  Name  Street Address  City State  Type of Account Payable or Debt Owed  Name  Street Address  City State  Street Address  City State  Type of Account Payable or Debt Owed  Name  Street Address  City State  Street Address  City State  Street Address  City State  Type of Account Payable or Debt Owed  Name  Street Address  City State  Type of Account Payable or Debt Owed  Name  Street Address  City State	Street Address  City State ZiP  Type of Account Payable or Debt Owed Date that Debt Accound  Name  Street Address  City State ZiP  Type of Account Payable or Debt Owed Date that Debt Accound  Name  Street Address  City State ZiP  Date that Debt Accound  Date that Debt Accound  Name  Street Address  City State ZiP  Type of Account Payable or Debt Owed Date that Debt Accound  Name  Street Address  City State ZiP  Type of Account Payable or Debt Owed Date that Debt Accound  Name  Street Address  City State ZiP  Type of Account Payable or Debt Owed Date that Debt Accound  Name  Street Address  City State ZiP  Type of Account Payable or Debt Owed Date that Debt Accound  Name  Street Address  City State ZiP  Type of Account Payable or Debt Owed Date that Debt Accound  Name	Street Address  City State Address  City State Type of Account Psysible or Dabt Owed  Name  Street Address  City State ZiP  Type of Account Psysible or Dabt Owed  Name  Street Address  City State ZiP  Type of Account Psysible or Dabt Owed  Name  Street Address  City Date that Dabt Accound  Street Address  City State ZiP  Type of Account Psysible or Dabt Owed  Name  Street Address  City Date that Dabt Accound  Name  Street Address  City State ZiP  Type of Account Psysible or Dabt Owed  Name  Street Address  City Date that Dabt Accound  State ZiP  Type of Account Psysible or Dabt Owed  Name  Street Address  City Date that Dabt Accound  Type of Account Psysible or Dabt Owed  Name  Street Address  City State ZiP  Type of Account Psysible or Dabt Owed  Name  Street Address  City Date that Dabt Accound  Type of Account Psysible or Dabt Owed  Date that Dabt Accound  Type of Account Psysible or Dabt Owed  Date that Dabt Accound  Date that Dabt Accound  Type of Account Psysible or Dabt Owed  Date that Dabt Accound  Date that Dabt Accound	Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Name Street Address City State ZIP Type of Account Payable or Debt Owed Debt Accound Debt that Debt Accound



# TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 13)	0.00	0.00

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				
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address			4		
2	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name		1			
	Street Address					
3	City	State ZIP				
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name		1			
	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 schedule (transfer the total disbursed this period to "Sur				0.00	0.00

### 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	0.00	0.00
Enter total only if last page of schedule (transfer the total received this period to "Summary of Disbursements," line 15)	0.00	0.00

<sup>\*</sup>If disbursement(s) of \$250 or less is listed on another disbursement schedule, do not include them on Schedule B(15).