COMMITTEE ID NUMBER CAN-24-1

COMMITTEE INFORMATION (required)

	Committee Information:	Committee Name:	Eric Goettl	
CAND	DATE INFORMATION (only if fil	ling as a candidate comn	nittee):	
	Office Sought:	☐ County Office: ☐ City/Town Office	e: Maricopa City Council	☐ Special District Office: ☐ School Board District:
	Cumulative reporting period		,	ection cycle. Also select appropriate Reporting Period below.
REPO	RTING 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.

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	\$ 1,516.21	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 5,050.00	\$ 6,941.32
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 3,796.14	\$ 4,171.25
(d) = Balance at close of reporting period	\$ 2,770.07	
☐ Check here if filing no financial activity during the reporting period. Lines (a)-(d) still must	be completed, but only this of	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.

Printed Name of Committee Treasurer

// 04/10/2024

mmittee/freasurer Date

SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals	50.00	
	(d) Candidate Committees	30.00	+
	(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)	206.00	
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))	256.00	
	(I) Refunds Given Back to Contributors	206.00	
	(m) Net Monetary Contributions (subtract 1(I) from 1(k))	50.00	
2.	Loans (a) Loans Bossived	5000.00	
	(a) Loans Received (b) Forgiveness on Loans Received	5000.00	
	(c) Repayment on Loans Made		
	(d) Interest Accrued on Loans Made		
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	5000.00	
3.	Rebates and Refunds Received		
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		
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
	Miscellaneous Receipts (use cash and/or equity as applicable)		1
	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)	5050.00	



SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	3796.14	
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.	Aggregate of Disbursements - \$250 or Less (use cash and/or equity as applicable)		
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)	3796.14	



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

SCHEDULE A(1)(a)

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

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

Schedule A(1)(a), page____ of ____

CAN-24-1

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	\$0	\$0
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	\$0	\$0

^{*}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).

COMMITTEE ID NUMBER
CAN-24-1

MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

/	Indiv	idual Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Jake Buhler		Date Contribution Received 3/13/2024	50.00	50.00	50.00
	Street Address 4099 N Mercur Dr					
1	City Eagle Mountain	State Utah	zip 84005			
	Occupation	Employer Meta	'			
	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		\dashv		
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP	-		
	Occupation	Employer		_		
	Name		Date Contribution Received			
	Street Address			\dashv		
5	City	State	ZIP	_		
	Occupation	Employer		\dashv		
_	Enter total only if last page of	schedule			50.00	50.00
	(transfer the total received this pe	riod to "Summary of Receip	ots," line 1(c))		50.00	50.00

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

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

	Candidate Committee	e Contributor Infor	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	I ed			
	Committee Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	I ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u> </u> ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number Date Contribution Received					
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Sum	imary or Receipts," I	line r(a))			

Schedule A(1)(d), page____ of ___



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			_		
1	City	State	ZIP	-		
	Committee ID Number Date Contribution Received			-		
	Committee Name					
	Street Address			-		
2	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address	_				
3	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receive	ed	-		
	Committee Name					
	Street Address			_		
4	City	State	ZIP	-		
	Committee ID Number	D Number Date Contribution Received		-		
	Committee Name					
	Street Address			_		
5	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receive	ed			
	Committee ID Number Enter total only if last page of sch (transfer the total received this period	nedule to "Sum		Date Contribution Received nedule to "Summary of Receipts," line 1(e))		

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

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

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

Schedule A(1)(f), page____ of ____



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

/				ı	1	
	Partnership Cor	ntributor Information	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	l ed			
	Partnership Name	1				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Partnership Name	<u> </u>				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	orporation Commission File Number Date Contribution Received				
	Partnership Name					
	Street Address					
5	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sun					

Schedule A(1)(g), page____ of ____



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

,	Corporation /	LLC Contributor Info	rmation	Amount Receiv	Cumulative ed Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Corporation/LLC Name						
	Street Address						
1	City	State	ZIP				
•	Corporation Commission File Number	Date Contribution Rec	eived				
	Corporation/LLC Name	I					
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Re	ceived		-		
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Re	ceived				
	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	ion Commission File Number Date Contribution Received					
	Corporation/LLC Name	Corporation/LLC Name					
	Street Address						
5	City	State	ZIP				
- 1	Corporation Commission File Number	Date Contribution Re	L				

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

/				1		
	Labor Organiza	ition Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	ved	-		
	Labor Organization Name					
	Street Address			_		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Recei	ved	-		
	Labor Organization Name					
	Street Address			-		
3	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Recei	ved	-		
	Labor Organization Name					
	Street Address			-		
4	City	State	ZIP	1		
	Corporation Commission File Number	Date Contribution Recei	Date Contribution Received			
	Labor Organization Name					
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Recei	ved	-		
_	Enter total only if last page of scheo (transfer the total received this period to	dule				

Schedule A(1)(i), page____ of ___

CAN-24-1

MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

	Candida	te Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Eric Goettl		Date Contribution Received 2/23/2024	206.00	206.00	297.32
	Street Address 44021 W Snow Drive					
1	_{City} Maricopa	State Az	ZIP 85138			
	Occupation Tacher	Employer The Church of	f Jesus Christ of Later day §			
	Name		Date Contribution Received			
	Street Address		1	-		
2	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
3	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
4	City	State	ZIP			
	Occupation	Employer				
	Name		Date Contribution Received			
	Street Address					
5	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule					

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

CAN-24-1

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Eric Goettl		Date Contribution Refunded 3/1/2024	206.00	206.00	206.00
	Street Address 44021 W Snow Drive					
1	City Maricopa	State Az	ZIP 85138			
	ID Number (if applicable)		Date of Original Contribution 2/23/2024			
	Name		Date Contribution Refunded			
	Street Address					
2	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
5	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts,"	line 1(I))		206.00	206.00

Schedule A(1)(I), page $\underline{1}$ of $\underline{1}$

COMMITTEE ID NUMBER
CAN-24-1

LOANS RECEIVED: SCHEDULE A(2)(a)

/		Lender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Loan Received		5000.00	5000.00
	Eric Goettl	1/3/2024	1/3/2024			
	Street Address 44021 W Snow Drive					
1	City	State	ZIP			
	Maricopa	Az	85138			
	Guarantor/Endorser Name	Non-Electoral Purpos	e? (PACs and Political Parties Only)			
	Eric Goettl					
	Lender Name	Date Loan Received	1			
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received	Date Loan Received			
	Street Address	Street Address				
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received	l			
	Street Address			_		
4	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	e? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received	I			
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	e? (PACs and Political Parties Only)			
	Enter total only if last page of so (transfer the total received this perio	chedule d to "Summary of Receipts	s," line 2(a))		5000.00	5000.00

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



FORGIVENESS ON LOANS RECEIVED: SCHEDULE A(2)(b)

				I		
	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					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	I			
	Lender Name		Date Forgiveness Received			
	Street Address					
3	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name	l	Date Forgiveness Received			
	Street Address		l			
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	1	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	I mary of Receipts." I	ine 2(b))	I		

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



REPAYMENT ON LOANS MADE: SCHEDULE A(2)(c)

/	Borrowei	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	<u>I</u>	-		
	Borrower Name	1	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		Date Repayment Received			
	Street Address			_		
4	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Repayment Received			
	Street Address			_		
5	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Enter total only if last page of schedule					
	(transfer the total received this period to "Sum	mary of Receipts," I	line 2(c))			

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



INTEREST ACCRUED ON LOANS MADE: SCHEDULE A(2)(d)

	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	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	mary of Receipts," I	ine 2(d))			

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

COMMITTEE ID NUMBER
CAN-24-1

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

/	,	Payor Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Street Address		1			
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address		I			
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	nd/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	id/Rebate			
	Payor Name		Date Rebate/Refund Received			
	Street Address		I			
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refur	nd/Rebate			
_	Enter total only if last page of (transfer the total received this per	l schedule				

COMMITTEE ID NUMBER

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

Schedule A(4), page____ of ____



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

SCHEDULE A(5)(a)

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

*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 ___

COMMITTEE ID NUMBER

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		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(b))		

^{*}If contributions of more than \$100 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).

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

CAN-24-1

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

SCHEDULE A(5)(c)

/				ļs	Cumulative	Cumulative
		ributor Informatio		Amount Received	Amount this Reporting Period	Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address	Street Address				
1	City	State	ZIP			
	Occupation	Employer		_		
	Name		Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP	_		
	Occupation	Employer		_		
3	Name		Date In-Kind Contribution Received			
	Street Address			-		
	City	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date In-Kind Contribution Received			
	Street Address	I	-			
4	City	State	ZIP	-		
	Occupation	Employer		-		
	Name	L	Date In-Kind Contribution Received			
	Street Address		1	-		
5	City	State	ZIP	-		
	Occupation	Employer	1	-		
_	Enter total only if last page of schedule (transfer the total received this period to "Sum	<u> </u>		I		



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

	Candidate Committee	e Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	Street Address				
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Received			
	Committee Name	ee Name				
	Street Address	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					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," l	line 5(d))			

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/	Political Action Commit	tee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address	Street Address				
1	City	State	ZIP	_		
	Committee ID Number	Date In-Kind Contribution	Received	_		
	Committee Name					
	Street Address		1			
2	City	State	ZIP	<u> </u> 		
	Committee ID Number	Date In-Kind Contribution	Received	_		
	Committee Name					
3	Street Address			<u> </u> -		
	01	In.	710	-		
	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	I				
	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	nmary of Receipts," l	line 5(e))			

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

/						
	Political Party Cor	ntributor I nformat	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 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	mary of Receipts " I	ine 5(f))	<u> </u>		

Schedule A(5)(f), page____ of ____



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	<u>I</u>				
	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				
	Partnership Name					
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sum		En a F(n))			

Arizona Secretary of State Revision 12/29/21 (fillable format)

Schedule A(5)(g), page___ of ___



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation	/ LLC Contributor Info	ormation	Amount Rec	Cumulative Reporting Period	Cumulative Amount this od Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	ution Received			
	Corporation/LLC Name	I				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Received			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrib	oution Received			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrit	pution Received			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contrit	pution Received			
4	Enter total only if last page of sch (transfer the total received this period	edule				

Schedule A(5)(h), page____ of ____



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

/	Labor Organizatio	on Contributor Inform	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				Traperang renear	
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
}	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
_	Enter total only if last page of schedul					

Schedule A(5)(i), page____ of ____



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	Name Date In-Kind Contribution Received				
	Street Address		<u> </u>			
1	City	State	ZIP	_		
	Asset or Property Contributed					
			1			
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Charak Addana	Street Address				
,	Street Address	,				
3	City	State	ZIP			
	Asset or Property Contributed	1				
	Name		Date In-Kind Contribution Received			
	Street Address			-		
4	City	State	ZIP			
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP			
	Asset or Property Contributed					
	Enter total poly if lock was a stack of the					
	Enter total only if last page of schedule (transfer the total received this period to "Sun	mary of Receipts,"	line 5(j))			



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

SCHEDULE A(6)

	Sour	ce Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
2	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
3	City	State	ZIP			
	Type of Item Donated					
	Name	Name				
	Street Address					
4	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
5	City	State	ZIP			
	Type of Item Donated					
	Enter total only if last page of schedu (transfer the total received this period to "	ıle				

Schedule A(6), page_____ of ____



EXTENSIONS OF CREDIT RECEIVED: SCHEDULE A(7)(a)

	Creditor	lf			Cumulative	Cumulativa
		Information		Amount of Credit Extended	Amount this Reporting Period	Cumulative Amount this Election Cycle
ŀ	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
\forall	Name					
	Street Address					
2	City	State	ZIP			
-	Services or Goods Provided on Credit	L	Date of Extension of Credit			
\top	Name					
-	Street Address					
3	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
\dashv	Name					
	Street Address					
4	City	State	ZIP			
-	Services or Goods Provided on Credit		Date of Extension of Credit			
\dashv	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
\dashv	Enter total only if last page of schedule (transfer the total received this period to "Sum					

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					
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
3	Street Address					
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
5	Street Address					
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Enter total only if last page of schedule					
_	(transfer the total received this period to "Sum	mary of Receipts," I	ine 7(b))			

Schedule A(7)(b), page____ of ____



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

_	Payor C	ommittee Informat	ion	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	eense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	ense (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	pense (if applicable)			
	Enter total only if last page of scheo (transfer the total received this period to					

Schedule A(8), page____ of ____



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

/	Payor I r	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name				Trioperanig remeal	
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address		_			
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date	1		
	Name					
	Street Address			1		
3	City	State	ZIP	_		
	Services or Goods Purchased		Payment Date	-		
	Name					
	Street Address			-		
4	City	State	ZIP	-		
	Services or Goods Purchased		Payment Date	-		
	Name			+		
	Street Address			_		
5	City	State	ZIP	-		
	Services or Goods Purchased		Payment Date	-		
_	Enter total only if last page of schedule (transfer the total received this period to "Sum					

Schedule A(9), page____ of ____

Arizona Secretary of State Revision 12/29/21 (fillable format)



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/	/ Info	rmation		Amount	Cumulative Amount this	Cumulative Amount this
	Name				Reporting Period	Election Cycle
	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			
	Name					
ŀ	Street Address					
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
ŀ	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 "Sur					

Schedule A(10), page____ of ____

COMMITTEE ID NUMBER

TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Cumulative Amount this Reporting Period

Schedule A(11), page____ of ____



MISCELLANEOUS RECEIPTS: SCHEDULE A(12)

/	Source	Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type	1	Receipt Date			
	Name					
,	Street Address					
	City	State	ZIP			
	Receipt Type	1	Receipt Date			
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
5	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Sun					

Schedule A(12), page____ of ____

COMMITTEE ID NUMBER
CAN-24-1

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name	Disbursement Date	e	790.50	790.50	1165.61
In Maricopa Magazine	1/4/2024				
Street Address 44400 W Honeycutt Road Suite 101					
1 City	State	ZIP	_		
Maricopa	Az	85138			
Type of Operating Expense Paid		ose? (PACs and Political Parties Only)	☐ Cash ☐ Credit		
Campaign Advertisement			E Orcan		
Name	Disbursement Date	e	97.60	888.10	1263.21
Amazon	1/7/2024		07.00		
Street Address	-				
Internet Only (Amazon.com)					
City	State	ZIP			
Tues of Occasións Francis Deid	Non-Electroni Duna		☐ Cash	Cash Credit	
Type of Operating Expense Paid Campaign Handouts		Non-Electoral Purpose? (PACs and Political Parties Only)			
Name	Disbursement Date	ο.	404.54	090.64	1264 72
Got Print	1/9/2024	e	101.51	989.61	1364.72
Street Address			_		
7651 N SanFernando Rd					
3 City	State	ZIP			
Burbank	Ca	91505	☑ Cash		
Type of Operating Expense Paid	Non-Electoral Purpo	Non-Electoral Purpose? (PACs and Political Parties Only)			
Printing Services					
Name	Disbursement Date	e	1934.86	2924.47	3299.58
Impressive Imaging	1/10/2024				
Street Address 44480 W Honeycutt Road Sui	te 102				
4 City	State	ZIP			
Marcicopa	Az	85138	│ □ Cash		
Type of Operating Expense Paid	Non-Electoral Purpo	ose? (PACs and Political Parties Only)	☑ Credit		
Campaign Signs					
Name	Disbursement Date	e	30.00	2954.47	3329.58
Maricopa Technologies LLC	1/13/2024				
Street Address					
45997 Sky Lane					
5 City Maricopa	State Az	ZIP 85139	□ Cash		
			✓ Credit		
Type of Operating Expense Paid Campaign Website Updates	Non-Electoral Purpo	ose? (PACs and Political Parties Only)			
Enter total only if last page of	chedule				
(transfer the total disbursed this pe	riod to "Summary of Disbu	rsements," line 1)			

Schedule B(1), page____ of ___

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DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipi	ent Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	npressive Imaging	Disbursement Date 3/2/2024		236.42	3190.89	3566.00
- 1	Street Address 44480 Honeycutt Road Suite 102					
1 Cit	ty laricopa	State Az	ZIP 85138			
	rpe of Operating Expense Paid Campaign Advertisement	Non-Electoral Purpose	e? (PACs and Political Parties Only)	☐ Cash ☐ Credit		
- 1	n Maricopa Magazine	Disbursement Date 3/15/2024		603.50	3794.39	4169.50
- 1	Street Address 44400 W Honeycutt Road Suite 101					
2 Cit	_{ty} Maricopa	State Az	ZIP 85138	□ Cook		
- 1 '	rpe of Operating Expense Paid Campaign Advertisement	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Cash ☐ Credit		
	_{ame} tripe	Disbursement Date 3/13/2024		1.75	3796.14	4171.25
- 1	reet Address hternet Only (Stripe.com)					
3 Cit	ty	State	ZIP			
- 1	rpe of Operating Expense Paid Contribution Transaction Fees	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Cash ☑ Credit		
Na	ame	Disbursement Date				
Str	reet Address					
4 Cit	ty	State	ZIP			
Ту	rpe of Operating Expense Paid		e? (PACs and Political Parties Only)	☐ Cash☐ Credit		
Na	ame	Disbursement Date				
Str	Street Address					
5 Cit	ty	State	ZIP	 □ Cash		
Ту	rpe of Operating Expense Paid		e? (PACs and Political Parties Only)	□ Credit		
Er	nter total only if last page of schedu	 e			3796.14	4171.25
(tra	ansfer the total disbursed this period to "	Summary of Disburs	ements," line 1)		3730.14	41/1.20

Schedule B(1), page____ of ___



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

_	<u> </u>	Candidate Committe	ee Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Nam Street Address				_		
1	City		State	ZIP	_		
	Committee ID No	umber	Date Contribution Made		□ Cash □ Credit		
	Committee Name						
2	Street Address		1				
_	City	umber	State Date Contribution Made	ZIP	□ Cash □ Credit		
	Committee ID Number Date Contribution Made Committee Name						
	Street Address			_			
3	City		State	ZIP	 □ Cash		
	Committee ID Number Date Contribution Made				□ Credit		
	Committee Name	e			_		
4	City		State	ZIP	_		
	Committee ID No	umber	Date Contribution Made		□ Cash □ Credit		
	Committee Name	е					
5	Street Address		Chris	ZIP	_		
	City Committee ID No	umber	State Date Contribution Made		☐ Cash☐ Credit		
	Enter total (transfer the	only if last page of schedule total disbursed this period to "Su	mmary of Disburser	nents," line 2(a))			



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Comm	nittee Recipient Inf	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Casii		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made	1	☐ 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			
	Committee ID Number	Date Contribution Made	1	□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP	- Cont		
	Committee ID Number	Date Contribution Made	I	☐ Cash☐ Credit☐		
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	Immary of Dishurser	ments." line 2(b))			

COMMITTEE ID NUMBER

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		Troperang renea			
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
_	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur					



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partner	ship Recipient Informati	ion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	•	□ Credit		
	Partnership Name					
	Street Address	Street Address				
2	City	State	ZIP	ПСоор		
	Corporation Commission File Number	Date Contribution Made	e	☐ Cash☐ Credit		
	Partnership Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	e	□ Cash □ Credit		
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	e	□ Cash □ Credit		
	Partnership Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made	e e	□ Cash □ Credit		
_	Enter total only if last page of solutransfer the total disbursed this period	l hedule				



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	n / LLC Recipient Inf	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 Contribution I	Made	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	orporation Commission File Number Date Contribution Made			□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	□ Credit		
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP	□ Cach		
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	□ Credit		
	Enter total only if last page of sch (transfer the total disbursed this perior	nedule d to "Summary of Disb	ursements." line 2(e))	ı		



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orgar	nization Recipient Infor	mation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	□ Credit				
	Labor Organization Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	e e	□ Casii		
	Labor Organization Name	I				
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	e	□ Credit		
	Labor Organization Name					
	Street Address					
4	City	State	ZIP	☐ Cash		
	Corporation Commission File Number	Date Contribution Mad	е	□ Credit		
	Labor Organization Name	·				
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	e	□ Credit		
_	Enter total only if last page of sch (transfer the total disbursed this period	nedule d to "Summary of Disburse	ements," line 2(f))	ı		



CONTRIBUTION REFUNDS RECEIVED: SCHEDULE B(2)(h)

		Contributor Information	on	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address		-			
1	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address			_		
2	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	_		
_	Committee Name		Date Refund Received			
	Street Address			_		
3	City	State	ZIP			
		Otato				
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
1	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
5	City	State	ZIP			
	Committee ID Number		Date of Original Contribution	_		
	Enter total only if last page of (transfer the total disbursed this	of schedule	hursements " line 2/h)\			
_	Variation the total dispulsed this	portou to Guillinary of Dis	baroomonio, iino 2(11))			



LOANS MADE: SCHEDULE B(3)(a)

/	Borrower	Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name Street Address					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name	I				
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	I			
	Borrower Name					
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	I			
	Borrower Name	I				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	I			
	Borrower Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	l			
	Enter total only if last page of schedule (transfer the total received this period to "Sumr	I mary of Disburseme	nts," line 3(a))			

Arizona Secretary of State Revision 12/29/21 (fillable format)

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LOAN GUARANTEES MADE: SCHEDULE B(3)(b)

	Guarantor	· Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name	ı				
	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				
	Enter total only if last page of schedule (transfer the total received this period to "Sumr	mary of Dishurseme	nts." line 3(b))			

Arizona Secretary of State Revision 12/29/21 (fillable format)

Schedule B(3)(b), page____ of ____



FORGIVENESS ON LOANS MADE: SCHEDULE B(3)(c)

wer Name et Address inal Amount of Loan ower Name et Address	Information State Amount Still Outstanding State	Date Forgiveness Made ZIP Date Forgiveness Made	Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
et Address inal Amount of Loan ower Name et Address	Amount Still Outstanding	ZIP	-		
inal Amount of Loan ower Name et Address	Amount Still Outstanding		-		
ower Name et Address	Amount Still Outstanding				
ower Name et Address		Date Forgiveness Made			
et Address	State	Date Forgiveness Made			
	State	<u> </u>	4		
inal Amount of Loan	State				
inal Amount of Loan		ZIP			
	Amount Still Outstanding				
ower Name		Date Forgiveness Made			
et Address			_		
	State	ZIP			
inal Amount of Loan	Amount Still Outstanding		_		
ower Name		Date Forgiveness Made			
et Address			_		
	State	ZIP	_		
inal Amount of Loan	Amount Still Outstanding		_		
ower Name		Date Forgiveness Made			
Street Address			-		
et Address		ZIP	-		
et Address	State	I			
_	wer Name	wer Name tt Address	wer Name Date Forgiveness Made tt Address	wer Name Date Forgiveness Made tt Address	wer Name Date Forgiveness Made tt Address

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



REPAYMENT ON LOANS RECEIVED: SCHEDULE B(3)(d)

/	Lend	er Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this 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					
2	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding		-		
	Lender Name		Date Repayment Made			
	Street Address		1	_		
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 schedu	le				
	Enter total only if last page of schedu (transfer the total disbursed this period to "	Summary of Disburse	ments," line 3(d))			

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		<u> </u>	-		
City	State	ZIP	-		
Original Amount Borrowed	Amount Still Outstanding		-		
Lender Name	<u> </u>	Date Interest Accrued			
Street Address			-		
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding		_		
Lender Name		Date Interest Accrued			
Street Address			_		
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding		_		
Lender Name		Date Interest Accrued			
Street Address			-		
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding		_		
Lender Name		Date Interest Accrued			
Street Address			_		
City	State	ZIP	<u> </u> 		
Original Amount Borrowed	Amount Still Outstanding		-		
•					
	Lender Name Street Address City Original Amount Borrowed Lender Name Street Address City Original Amount Borrowed	Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Street Address City State	Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Interest Accrued Street Address City State ZIP City State ZIP City Date Interest Accrued	Accrued Lender Name Street Address City State Criginal Amount Borrowed Amount Sell Outstanding City State Criginal Amount Borrowed Amount Sell Outstanding City State Criginal Amount Borrowed Amount Sell Outstanding Criginal Amount Borrowed Criginal Amount Borrowed Amount Sell Outstanding Criginal Amount Borrowed Amount Sell Outstanding	Lender Information

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Rec	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
3	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					
4	City	State	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	_		
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
5	City	State	ZIP	_		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor	\perp		

Schedule B(4), page____ of ____



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	Candidate Committe	e Recipient Inform	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Made			
	Committee Name	l				
	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	I				
	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	mmary of Disbursen	nents," line 5(a))			

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

Political Action Committee Recipient Information Contributed Contributed Name Contributed Name Contribute ID Number Contribute ID Number Contribute ID Number Contributed Name Street Address Street Address Street Address Street Address Contributed Name Contributed Name Street Address Street Address				
Street Address City State ZIP Committee ID Number Determine Street Address City State ZIP Committee Name Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Determine ZIP Committee Name Street Address City State ZIP Committee ID Number Determine ZIP Committee Name Street Address City State ZIP Committee ID Number Determine ZIP	Recipient Information Amount this Amount this Amount this	Political Action Committee Recipient I		
Toty State ZIP Committee ID Number Committee ID Number Committee ID Number Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made ZIP Committee Name Street Address City State ZIP Committee Name Street Address Date In-Kind Contribution Made		e Name		
Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Committee Name Date In-Kind Contribution Made Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made		ldress		
Committee Name Street Address ZiP Committee ID Number Date In-Kind Contribution Made Committee ID Number Street Address ZiP Committee ID Number Date In-Kind Contribution Made ZiP Committee ID Number Date In-Kind Contribution Made	e ZIP	State	1	
Street Address ZIP Committee ID Number Date In-Kind Contribution Mede Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Mede ZIP Committee ID Number Date In-Kind Contribution Mede	In-Kind Contribution Made	ee ID Number Date In-Kind Contribut		
City		ie Name		
Committee ID Number Date In-Kind Contribution Made Committee Name Street Address Gity State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address 4 City State ZIP Committee Name Street Address 4 City State ZIP Committee ID Number Date In-Kind Contribution Made		dress		
Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee Name Committee ID Number Date In-Kind Contribution Made	e ZIP	State	2	
Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made	In-Kind Contribution Made	ee ID Number Date In-Kind Contribu		
Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP ZIP ZIP ZIP ZIP Committee Name Committee ID Number Date In-Kind Contribution Made		se Name		
Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made		dress		
Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made	a ZIP	State	3	
Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name				
Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name	· п-Ана Соливация масе			
4 City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name		e Name		
City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name		dress		
Committee Name	e ZIP	State	4	
	In-Kind Contribution Made	e ID Number Date In-Kind Contribut		
Street Address		e Name		
		Street Address		
5 City State ZIP	e ZIP	State	5	
Committee ID Number Date In-Kind Contribution Made	In-Kind Contribution Made	pe ID Number Date In-Kind Contribu		
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 5(b))				

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

/				_		
/	Political Party Ro	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date 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 "Sui					
	(transfer the total disbursed this period to "Sur	mmary of Disbursen	nents," line 5(c))			

Schedule B(5)(c), page____ of ____



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	hip Recipient Informat	ion	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 Contributi	on Made			
	Partnership Name	l				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Made			
	Partnership Name					
3	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Made			
	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Made					
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	tion Made			
	Enter total only if last page of sch	adula .				

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	n / LLC Recipient Info	ormation	Amour Contribu	s Amount this
	Corporation/LLC Name				
	Street Address				
1	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contri	bution Made		
	Corporation/LLC Name				
	Street Address				
2	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contr	ibution Made		
	Corporation/LLC Name	<u> </u>			
	Street Address				
3	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contr	ibution Made		
	Corporation/LLC Name	<u> </u>			
	Street Address				
4	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contr	ibution Made		
	Corporation/LLC Name				
	Street Address				
5	City	State	ZIP		
	Corporation Commission File Number	Date In-Kind Contr	ibution Made		
	Enter total only if last page of sch (transfer the total disbursed this period	nedule			

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IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

1	Labor Organization			1	l	
1		Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					·
-	Street Address					
	City	State	ZIP	-		
寸,	Corporation Commission File Number	Date In-Kind Contribution	I Made			
	Labor Organization Name	<u>I</u>				
-	Street Address					
2	City	State	ZIP			
-	Corporation Commission File Number	Date In-Kind Contribution	I Made			
†	Labor Organization Name					
-	Street Address					
3	City	State	ZIP			
-	Corporation Commission File Number	Date In-Kind Contribution	I Made			
+	Labor Organization Name	l				
-	Street Address					
4	City	State	ZIP			
ŀ	Corporation Commission File Number Date In-Kind Contribution Made					
+	Labor Organization Name	1				
-	Street Address			•		
5	City	State	ZIP	-		
-	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
1	Enter total only if last page of schedule transfer the total disbursed this period to "Sui	mmary of Dishurasa	nents " line 5/f\\	<u>l</u>		

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INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

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

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BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

/	Expenditure F	Recipient Information	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (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					
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year		_ □ Credit			
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
3	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (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			-		
4	City	State	ZIP	-		
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	d (including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		_ □ Credit		
_	Enter total only if last page of schedul (transfer the total disbursed this period to "5	e Summary of Dishurse	omants " lina 7)			
_	Task of the tetal dispulsed this period to	Jammary of Disbuise				



RECALL EXPENDITURES MADE: SCHEDULE B(8)

Expenditure Recipient Information Expenditure Amount the Amount the Reporting Period Nose of Acceptang TV, mail atc)							
City State Date Date	/	Expenditure I	Recipient Informatio	on	Expenditure Amount	Amount this	
Cash Cash Credit		Recipient Name		Mode of Advertising (TV, mail, etc)			
Supporting or Opposing Issuance of Recell Order? Candidate Sought to be Resided Credit		Street Address			_		
Supporting or Opposing Issuance of Recall Order? Candidate Saught to be Recalled Credit		City	State	ZIP	-		
Deter of First Publication, Daplay, Delivery, or Boadcast Office Held Recipient Name	1						
Date of First Publicators, Display, Delivery, or Broadcast Cash Credit		Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	called	☐ Cash		
Street Address Street Address		Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
Cash Credit		Recipient Name		Mode of Advertising (TV, mail, etc)			
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Date of First Publication, Display, Delivery, or Broadcast City State Zip Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Credit Cash Credit		Street Address					
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Date of First Publication, Display, Delivery, or Broadcast Cash Credit	2	City	State	2117			
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Street Address City State ZIP Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Credit Date of First Publication, Display, Delivery, or Broadcast Office Held Recipient Name Mode of Advertising (TV, mail, etc) Street Address City State ZIP Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Credit Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule		Date of First Publication, Display, Delivery, or Broadcast Office Held		_			
Supporting or Opposing Issuance of Recall Order? Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash Credit Recipient Name Mode of Advertising (TV, mall, etc) Street Address City Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled City Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash Credit Enter total only if last page of schedule		Recipient Name		Mode of Advertising (TV, mail, etc)			
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash 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 Recalled Cash Credit Enter total only if last page of schedule		Street Address			_		
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Credit Cash 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 Recalled Credit Cash Credit Cash Credit Cash Credit Enter total only if last page of schedule	2		State	ZIP	-		
Date of First Publication, Display, Delivery, or Broadcast Recipient Name Mode of Advertising (TV, mail, etc) Street Address City Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash Credit Cash Credit Enter total only if last page of schedule	J		Candidate Sought to be Rec	called	_		
Date of First Publication, Display, Delivery, or Broadcast Recipient Name Mode of Advertising (TV, mail, etc) Street Address City State ZIP Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule		Supposed Sup	Canada Congress and Congress an				
Street Address City State ZIP Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule		Date of First Publication, Display, Delivery, or Broadcast	Office Held				
City Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule		Recipient Name		Mode of Advertising (TV, mail, etc)			
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule		Street Address					
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled Cash Credit Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule	4	City	State	ZIP			
Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule	•	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	called	☐ Cash		
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 8)		Date of First Publication, Display, Delivery, or Broadcast	Office Held				
(transfer the total disbursed this period to "Summary of Disbursements," line 8)							
		transfer the total disbursed this period to "s	e Summary of Disburser	ments," line 8)			
Schedule B(8), page of							



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/		Benefitted Candidate	Э	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					
3	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
4	City	State	ZIP	7		
	Type of Benefit Provided					
	Notes:					
_	Enter total only if last page of	schedule				
	Enter total only if last page of s (transfer the total disbursed this pe	eriod to "Summary of Dis	bursements," line 9)			

Schedule B(9), page____ of ____



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		Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Credit		
	Committee Name	1	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	-1	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					
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	monts " lino 10)	I		



REIMBURSEMENTS MADE: SCHEDULE B(11)

_	Recipien	t Information		Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
,	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Credit		
	Name		•			
	Street Address					
2	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed		Reimbursement Date	☐ Casii		
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed	Reimbursement Date	☐ Cash☐ Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street 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 "Su	mmary of Disburser	ments," line 11)			

Schedule B(11), page____ of ____



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

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		Date that Debt Accrued			
Name					
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			
Name					
Street Address					
City	State	ZIP			
Type of Account Payable or Debt Owed		Date that Debt Accrued			
Name					
Street Address					
	State	7IP			
Enter total only if last page of schedule (transfer the total received this period to "Sumr	mary of Disburseme	ents," line 12)			
	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 Name Street Address City Type of Account Payable or Debt Owed Name	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 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 Type of Account Payable or Debt Owed	Name Street Address City State ZiP Type of Account Payattle or Debt Owed Date that Debt Accound Name Street Address City State ZiP Type of Account Payattle or Debt Owed Date that Debt Accound Name Street Address City Date that Debt Accound Name Street Address City State ZiP Type of Account Payattle or Debt Owed Date that Debt Accound Name Street Address City State ZiP Type of Account Payattle or Debt Owed Date that Debt Accound Name Street Address City State ZiP Type of Account Payattle or Debt Owed Date that Debt Accound Name Street Address City State ZiP Name Street Address City State ZiP Name Street Address City State ZiP State ZiP State Date that Debt Accound	Name Street Address City State Or Deat Owed ZIP Type of Account Payable or Deat Owed ZIP	Nome Sitest Accorses City State Accorses City St

COMMITTEE ID NUMBER

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)		

Schedule B(13), page____ of ____



MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

<i>'</i>	Rec	ipient Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
1	Street Address					
1	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		ı
	Name					
_	Street Address					
2	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Disbursement Type	•	Disbursement Date	□ Credit		
	Name		- '			
	Street Address					
4	City	State	ZIP	□ Cash		
	Disbursement Type	•	Disbursement Date	□ Credit		
	Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Disbursement Type	I	Disbursement Date	□ Credit		
	Enter total only if last page of schee (transfer the total disbursed this period t	dule o "Summary of Dish	oursements." line 14)	ı		

COMMITTEE ID NUMBER

AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

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

Schedule B(15), page____ of ____