YUMA COUNTY
POLITICAL COMMITTEE
CAMPAIGN FINANCE REPORT

FOR OFFICE USE ONLY

AUG 25 2016 AM10:03

1. Committee to Re-elect Leon N. Wilmot, Sheriff
Full Name of Committee

P.O. Box 1811
Address

Yuma | 85365 | Yuma
City | ZIP Code | County | Phone Number

2. _____
Sponsoring Organization (if applicable)

Leon N. Wilmot, Sheriff
Name of Candidate and Office Sought (if applicable)

Sheriffwilmot@gmail.com
E-mail Address

3A. ID#

2016-04

Primary Election: August 30, 2016
General Election: November 8, 2016

4. **REPORTING PERIOD** (Please check appropriate box) — DUE BETWEEN

a. ☐ **JANUARY 31 REPORT** - For Period of
November 25, 2014 through December 31, 2015 ..... January 1, 2016 and February 1, 2016

b. ☐ **JUNE 30 REPORT** - For Period of
January 1, 2016 through May 31, 2016 ..... June 1, 2016 and June 30, 2016

c. ☑ **PRE-PRIMARY ELECTION REPORT** - For Period of
June 1, 2016 through August 18, 2016 ..... August 19, 2016 and August 26, 2016

d. ☐ **POST-PRIMARY ELECTION REPORT** - For Period of
August 19, 2016 through September 19, 2016 ..... September 20, 2016 and September 29, 2016

e. ☐ **PRE-GENERAL ELECTION REPORT** - For Period of
September 20, 2016 through October 27, 2016 .....October 28, 2016 and November 4, 2016

f. ☐ **POST-GENERAL ELECTION REPORT** - For Period of
October 28, 2016 through November 28, 2016 ..... November 29, 2016 and December 8, 2016

	SUMMARY	Column A Total this Reporting Period	Column B Election Period Total To Date
5(a).	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		
5(b).	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)		
5(c).	Total Receipts *[from corresponding columns on Detailed Summary Page, Line 8]*	00.00	3100.00
5(d).	Subtotal *[add Lines b and c for Column A and add Lines a and c for Column B]*	00.00	3100.00
6(a).	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) *[Do not add or subtract this line from the other lines]*		
6(b).	Total Disbursements *[from corresponding columns on Detailed Summary Page, Line 18]*	510.21	2353.21
7.	Cash on Hand at Close of Reporting Period *(Subtract Line 6b from Line 5d]*	746.79	746.79

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID# 2016-04

3. Report covering period from June1, 2016 thru August 18, 2016

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than $25 (Total from Schedule A)		
(b) Individuals - aggregate $25 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]		
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		3100
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		3100
6. In-kind contributions (Total from Schedule E)		
7. Dividends, Interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]	00	3100

DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	510.21	2353.21
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9,10, 11, 12, 13(c), 14, and 15]	510.21	2353.21
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line16]	510.21	2353.21
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief; it is true, correct, and complete.

Ralph Catron
Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

August 24, 2016
Date

Revised 11/09

CONTRIBUTIONS more than $25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name: Committee to Re-Elect Leon N. Wilmot Sheriff

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18 ,2016

4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION / EMPLOYER			
b.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION / EMPLOYER			
c.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION / EMPLOYER			
d.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION / EMPLOYER			
e.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION / EMPLOYER			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [*If last page of Schedule A, transfer total to Detailed Summary Page Line 4(a), Column A*]		00	00

*If contributions of $25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

LIST $5 CLEAN ELECTION QUALIFYING CONTRIBUTIONS SEPARATELY ON SCHEDULE A-2

Revised 11/09

CONTRIBUTIONS OF $25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4. AGGREGATE TOTAL OF CONTRIBUTIONS OF $25 OR LESS

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE

5. TOTAL THIS PERIOD *[Transfer total to Detailed Summary Page, Line 4(b), Column A]*	00	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE *[Transfer total to Detailed Summary Page, Line 4 (b), Column B]*	00

* If contributions of $25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.
LIST $5 CLEAN ELECTION QUALIFYING CONTRIBUTIONS SEPARATELY ON SCHEDULE A-2

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name: Committee to Re-Elect Leon Wilmot

2. ID# 2016-04

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	CONTRIBUTIONS IDENTITY OF CONTRIBUTOR AND DATE RECEIVED		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
b.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
c.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
d.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
e.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
f.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
g.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
h.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
i.	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE, AND ZIP		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B *[if last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]*		00	00

CANDIDATE LOANS

SCHEDULE C

1. Committee Name: Committee to Re-Elect Leon N. Wilmot Sheriff

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18 ,2016

4.	LOANS MADE OR GUARANTEED BY CANDIDATE NAME, AND ADDRESS FROM WHOM RECEIVED	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	NAME, ADDRESS, CITY, STATE AND ZIP Leon Wilmot Yuma, Az. 85365 DESCRIPTION Initial Setup	1-19-16	100.00	100.00
b.	NAME, ADDRESS, CITY, STATE AND ZIP Ruth Wilmot Yuma, Az. 85365 DESCRIPTION Fund Campaign	4-15-16	3000.00	3100.00
c.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C *[If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]*			

OTHER LOANS

SCHEDULE C-1

1. Committee Name Re-Elect Leon N Wilmot Sheriff

2. ID# 2016-04

3. Report covering period from June1, 2016 thru August 18, 2016

4	ALL OTHER LOANS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
b.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
c.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
d.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 *[If last page of Schedule C-1, transfer total to Detailed Summary Page, (line 5(b), Column A]*		00	00

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name: Re-Elect Leon N Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18 ,2016

4.	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
a.	NAME, ADDRESS, CITY, STATE, AND ZIP 1st Bank Yuma, 2799 S. 4th Ave, Yuma Az. 85364 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Service fees	1-16/5-16	35.00
b.	NAME, ADDRESS, CITY, STATE, AND ZIP Anna Amezcua Yuma Az. 85366 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Web Page design	4-28-16	500.00
c.	NAME, ADDRESS, CITY, STATE, AND ZIP Yuma Printing 1400 S. Ave. B, Yuma Az. 85364 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Campaign Signs	5-20-16	1233.00
d.	NAME, ADDRESS, CITY, STATE, AND ZIP U.S. Post Office DESCRIPTION OF ITEMS OR SERVICES PURCHASED P.O. Box	1-10-16	75.00
e.	NAME, ADDRESS, CITY, STATE, AND ZIP 1st Bank Yuma, 2799 S. 4th Ave, Yuma Az. 85364 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Service Fee's	6/16-7-30	14.00
f.	NAME, ADDRESS, CITY, STATE, AND ZIP Yuma Printing 1400 S. Ave. B, Yuma Az. 85364 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Campaign Signs	7-1-16	496.21
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D *[if last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]*		2353.21

* Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

Revised 11/09

INDEPENDENT EXPENDITURES*

SCHEDULE **D-1**

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4	INDEPENDENT EXPENDITURES IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
a.	NAME, ADDRESS, CITY, STATE, AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ☐ Opposed ☐ CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ☐ Opposed ☐ CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ☐ Opposed ☐ CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 *[if last page of Schedule D-1, transfer total to Detail Summary Page Line 10, Column A]*		00

* SEE A.R.S. §16-901 (14)

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name: Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June1, 2016 thru: August 18, 2016

4.	LOANS MADE BY THE REPORTING COMMITTEE NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE	DATE LOAN MADE	AMOUNT OF THE LOAN
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
i.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 *[Transfer total to Detail Summary Page, Line 12, Column A]*		

OFFSETS TO OPERATING EXPENSES*

SCHEDULE D-3

1. Committee Name: Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from _____ thru _____

4	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
a.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 *[If last page of Schedule D-3, Transfer total to Detail Summary Page, Line 17, Column A]*		

*Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
a.	NAME, ADDRESS, CITY, STATE, ZIP		
b.	NAME, ADDRESS, CITY, STATE, ZIP		
c.	NAME, ADDRESS, CITY, STATE, ZIP		
d.	NAME, ADDRESS, CITY, STATE, ZIP		
e.	NAME, ADDRESS, CITY, STATE, ZIP		
f.	NAME, ADDRESS, CITY, STATE, ZIP		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 *[Transfer total to Detail Summary Page, Line 13(a), Column A]*		

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18,1016

4.	REPAYMENT OF ALL OTHER LOANS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 *[Transfer total to Detail Summary Page, Line 13(b), Column A]*		

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4.	TRANSFERS MADE BY THE REPORTING COMMITTEE NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 *[Transfer total to Detail Summary Page, Line 14), Column A]*		

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name: Committee to Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4.	ANY OTHER DISBURSEMENTS NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE, DESCRIPTION	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 *[Transfer total to Detail Summary Page, Line 15, Column A]*		

IN-KIND CONTRIBUTIONS AND EXPENDITURES

SCHEDULE E

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June1, 2016 thru: August 18, 2016

4.	IN-KIND CONTRIBUTIONS AND EXPENDITURES NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN	DATE	FAIR MARKET VALUE
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# CONTRIBUTION ☐ EXPENDITURE ☐ DESCRIPTION OCCUPATION / EMPLOYER		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# CONTRIBUTION ☐ EXPENDITURE ☐ DESCRIPTION OCCUPATION / EMPLOYER		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# CONTRIBUTION ☐ EXPENDITURE ☐ DESCRIPTION OCCUPATION / EMPLOYER		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# CONTRIBUTION ☐ EXPENDITURE ☐ DESCRIPTION OCCUPATION / EMPLOYER		
5.	ENTER TOTAL IN-KIND **CONTRIBUTIONS** ONLY IF LAST PAGE OF SCHEDULE E *(if last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A)*		
6.	ENTER TOTAL IN-KIND **EXPENDITURES** ONLY IF LAST PAGE OF SCHEDULE E *(if last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A)*		

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4.	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
a	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 *[if last page of Schedule F-1, transfer total to Detailed Summary Page, Line 7, Column A]*		

OFFSETS TO CONTRIBUTIONS RECEIVED*

SCHEDULE F-2

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4.	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	DATE REFUND MADE	AMOUNT OF THE REFUND
a	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 *[if last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(e), Column A]*		

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name: Committee to Re-Elect Leon N. Wilmot

2. ID#: 2016-04

3. Report covering period from: June 1, 2016 thru: August 18, 2016

4.	DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
a.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF DEBT				
b.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF DEBT				
c.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF DEBT				
d.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF DEBT				
e.	NAME, ADDRESS, CITY, STATE ZIP AND ID# DESCRIPTION OF DEBT				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 *[if last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]*				