



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Yes for Somerton Kids

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought: Statewide Office: _____ State Legislature: _____
 County Office: _____ City/Town Office: _____

REPORTING PERIOD (check one):

| REPORTING PERIOD | REPORT DUE |
|--|--------------------------------------|
| <input checked="" type="checkbox"/> 2016 4 th Quarter Report: October 28, 2016 to December 31, 2016 | January 1, 2017 to January 15, 2017 |
| 2017 March Pre-Election Report (Local Only): January 1, 2017 to February 25, 2017 | February 26, 2017 to March 4, 2017 |
| 2017 1 st Quarter Report (Local Only): February 26, 2017 to March 31, 2017 | April 1, 2017 to April 15, 2017 |
| 2017 1 st Quarter Report: January 1, 2017 to March 31, 2017 | April 1, 2017 to April 15, 2017 |
| 2017 May Pre-Election Report (Local Only): April 1, 2017 to April 29, 2017 | April 30, 2017 to May 6, 2017 |
| 2017 2 nd Quarter Report (Local Only): April 30, 2017 to June 30, 2017 | July 1, 2017 to July 15, 2017 |
| 2017 2 nd Quarter Report: April 1, 2017 to June 30, 2017 | July 1, 2017 to July 15, 2017 |
| 2017 August Pre-Election Report (Local Only): July 1, 2017 to August 12, 2017 | August 13, 2017 to August 19, 2017 |
| 2017 3 rd Quarter Report (Local Only): August 13, 2017 to September 30, 2017 | October 1, 2017 to October 15, 2017 |
| 2017 3 rd Quarter Report: July 1, 2017 to September 30, 2017 | October 1, 2017 to October 15, 2017 |
| 2017 October Pre-Election Report (Local Only): October 1, 2017 to October 21, 2017 | October 22, 2017 to October 28, 2017 |
| 2017 4 th Quarter Report (Local Only): October 22, 2017 to December 31, 2017 | January 1, 2018 to January 15, 2018 |
| 2017 4 th Quarter Report: October 1, 2017 to December 31, 2017 | January 1, 2018 to January 15, 2018 |
| 2018 March Pre-Election Report (Local Only): January 1, 2018 to February 24, 2018 | February 25, 2018 to March 3, 2018 |
| 2018 1 st Quarter Report (Local Only): February 25, 2018 to March 31, 2018 | April 1, 2018 to April 15, 2018 |
| 2018 1 st Quarter Report: January 1, 2018 to March 31, 2018 | April 1, 2018 to April 15, 2018 |
| 2018 May Pre-Election Report (Local Only): April 1, 2018 to April 28, 2018 | April 29, 2018 to May 5, 2018 |
| 2018 2 nd Quarter Report (Local Only): April 29, 2018 to June 30, 2018 | July 1, 2018 to July 15, 2018 |
| 2018 2 nd Quarter Report: April 1, 2018 to June 30, 2018 | July 1, 2018 to July 15, 2018 |
| 2018 August Pre-Election Report: July 1, 2018 to August 11, 2018 | August 12, 2018 to August 18, 2018 |
| 2018 3 rd Quarter Report: August 12, 2018 to September 30, 2018 | October 1, 2018 to October 15, 2018 |
| 2018 October Pre-Election Report: October 1, 2018 to October 20, 2018 | October 21, 2018 to October 27, 2018 |
| 2018 4 th Quarter Report: October 21, 2018 to December 31, 2018 | January 1, 2019 to January 15, 2019 |

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) | \$ 575.00 | |
| (b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period) | \$ 0.00 | |
| (c) - Total disbursements (from "Summary of Disbursements," line 15 (cash column) for this reporting period) | \$ 83.00 | \$ 2,000.00 |
| (d) = Balance at close of reporting period | \$ 492.00 | |
| <input type="checkbox"/> Check here if <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page need be filed. | | |

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity. All reports are deemed to be filed under penalty of perjury by the committee treasurer (all committees) and candidate (candidate committees only).



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SUMMARY OF RECEIPTS (Schedule A):

| Receipts | Cash | Equity |
|---|----------------|----------------|
| 1. Monetary Contributions Received | | |
| (a) Individuals - More than \$50 | | |
| (b) Individuals - \$50 or Less (Aggregate) | | |
| (c) Candidate Committees | | |
| (d) Political Action Committees | | |
| (e) Political Parties | | |
| (f) Partnerships | | |
| (g) Corporations & Limited Liability Companies (PACs & Political Parties Only) | | |
| (h) Labor Organizations (PACs & Political Parties Only) | | |
| (i) Candidate's Personal Monies (Candidate Committees Only) | | |
| (j) Monetary Contributions Subtotal (add 1(a) through 1(i)) | \$ 0.00 | |
| (k) Refunds Given Back to Contributors | | |
| (l) Net Monetary Contributions (subtract 1(k) from 1(j)) | \$ 0.00 | |
| 2. Loans | | |
| (a) Loans Received | | |
| (b) Forgiveness on Loans Received | | |
| (c) Repayment on Loans Made | | |
| (d) Interest Accrued on Loans Made | | |
| (e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d)) | \$ 0.00 | |
| 3. Rebates and Refunds Received | | |
| 4. Interest Accrued on Committee Monies | | |
| 5. In-Kind Contributions Received | | |
| (a) Individuals - More than \$50 | | |
| (b) Individuals - \$50 or Less (Aggregate) | | |
| (c) Candidate Committees | | |
| (d) Political Action Committees | | |
| (e) Political Parties | | |
| (f) Partnerships | | |
| (g) Corporations & Limited Liability Companies (PACs & Political Parties Only) | | |
| (h) Labor Organizations (PACs & Political Parties Only) | | |
| (i) Candidate's Personal Assets or Property (Candidate Committees Only) | | |
| (j) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i)) | | \$ 0.00 |
| 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)) | | \$ 0.00 |
| 8. Joint Fundraising / Shared Expense Payments Received | | |
| 9. Payments Received for Goods / Services | | |
| 10. Outstanding Accounts Receivable / Debts Owed to Committee | | |
| 11. Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable) | | |
| 12. Miscellaneous Receipts | | |
| 13. Total Receipts (cash: add 1(l), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 6-7, 10-12) | \$ 0.00 | \$ 0.00 |



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SUMMARY OF DISBURSEMENTS (Schedule B):

| Disbursements | Cash | Equity |
|---|----------|---------|
| 1. Disbursements for Operating Expenses | | |
| 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)) | \$ 0.00 | |
| (h) Contribution Refunds Provided to the Reporting Committee | | |
| (i) Monetary Contributions Total (subtract 2(h) from 2(g)) | \$ 0.00 | |
| 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)) | \$ 0.00 | \$ 0.00 |
| 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) | | |
| (j) Contributions Subtotal (add 5(a) through 5(f)) | | \$ 0.00 |
| 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 | | |
| 15. Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 14; equity: add 3(f), 5(j), & 12-14) | \$ 83.00 | \$ 0.00 |



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MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(1)(a)

| Individual Contributor Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|----------------|----------|----------------------------|-----------------|---|---------------------------------------|
| 1 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 2 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 3 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 4 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 5 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(a))</small> | | | | | | |

*If contributions of \$50 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

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



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MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

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

*If contributions of more than \$50 are listed on Schedule A(1)(a), do not include them on Schedule A(1)(b).



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MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

| Candidate Committee Contributor Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|----------------------------|-----------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(c))</small> | | | | | | |

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



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MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

| Political Action Committee Contributor Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|----------------------------|-----------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(d))</small> | | | | | | |



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MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

| Political Party Contributor Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|----------------------------|-----------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(e))</small> | | | | | | |

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



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MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

| Partnership Contributor Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|----------------------------|-----|-----------------|---|---------------------------------------|
| 1 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 2 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 3 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 4 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 5 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(f))</small> | | | | | | |



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MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

| Corporation / LLC Contributor Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|-------|----------------------------|-----------------|---|---------------------------------------|
| 1 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date Contribution Received | | | |
| 2 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date Contribution Received | | | |
| 3 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date Contribution Received | | | |
| 4 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date Contribution Received | | | |
| 5 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date Contribution Received | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(g))</small> | | | | | | |



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MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

| Labor Organization Contributor Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|----------------------------|-----|-----------------|---|---------------------------------------|
| 1 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 2 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 3 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 4 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| 5 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(h))</small> | | | | | | |

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MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

| Candidate Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|----------------|----------|----------------------------|-----------------|---|---------------------------------------|
| 1 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 2 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 3 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 4 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| 5 | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(i))</small> | | | | | | |



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REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(j)

| Contributor Information | | | | Amount Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---------------------------|-------|-------------------------------|-----------------|---|---------------------------------------|
| 1 | Name | | Date Contribution Refunded | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| 2 | Name | | Date Contribution Refunded | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| 3 | Name | | Date Contribution Refunded | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| 4 | Name | | Date Contribution Refunded | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| 5 | Name | | Date Contribution Refunded | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | ID Number (if applicable) | | Date of Original Contribution | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(k))</small> | | | | | | |

Schedule A(1)(k), page ___ of



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LOANS RECEIVED:

SCHEDULE A(2)(a)

| Lender Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|-------------------------|--|-----------------|---|---------------------------------------|
| 1 | Lender Name | Date Loan Received | | | |
| | Street Address | | | | |
| | City | State ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/> | | | |
| 2 | Lender Name | Date Loan Received | | | |
| | Street Address | | | | |
| | City | State ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/> | | | |
| 3 | Lender Name | Date Loan Received | | | |
| | Street Address | | | | |
| | City | State ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/> | | | |
| 4 | Lender Name | Date Loan Received | | | |
| | Street Address | | | | |
| | City | State ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/> | | | |
| 5 | Lender Name | Date Loan Received | | | |
| | Street Address | | | | |
| | City | State ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (PACs and Political Parties Only) <input type="checkbox"/> | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(a))</small> | | | | | |



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FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

| Lender Information | | | | Amount Forgiven | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|-------------------------|--------------------------|---------------------------|-----------------|---|---------------------------------------|
| 1 | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| 2 | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| 3 | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| 4 | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| 5 | Lender Name | | Date Forgiveness Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(b))</small> | | | | | | |

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



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REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

| Borrower Information | | | Amount Repaid | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|-------------------------|--------------------------|---------------|---|---------------------------------------|
| 1 | Borrower Name | | | | |
| | Date Repayment Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount Borrowed | | Amount Still Outstanding | | | |
| 2 | Borrower Name | | | | |
| | Date Repayment Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount Borrowed | | Amount Still Outstanding | | | |
| 3 | Borrower Name | | | | |
| | Date Repayment Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount Borrowed | | Amount Still Outstanding | | | |
| 4 | Borrower Name | | | | |
| | Date Repayment Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount Borrowed | | Amount Still Outstanding | | | |
| 5 | Borrower Name | | | | |
| | Date Repayment Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount Borrowed | | Amount Still Outstanding | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(c))</small> | | | | | |



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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 |
|---|--------------------------|-------|--------------------------|-------------------------------|---|---|
| 1 | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | | |
| 2 | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | | |
| 3 | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | | |
| 4 | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | | |
| 5 | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 2(d))</small> | | | | | | |

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



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REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

| Payor Information | | | Amount Rebated or Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|--------------------------|-----------------------------|----------------------------|---|---------------------------------------|
| Payor Name | | Date Rebate/Refund Received | | | |
| Street Address | | | | | |
| 1 City | State | ZIP | | | |
| Original Purchase Amount | Reason for Refund/Rebate | | | | |
| Borrower Name | | Date Rebate/Refund Received | | | |
| Street Address | | | | | |
| 2 City | State | ZIP | | | |
| Original Purchase Amount | Reason for Refund/Rebate | | | | |
| Borrower Name | | Date Rebate/Refund Received | | | |
| Street Address | | | | | |
| 3 City | State | ZIP | | | |
| Original Purchase Amount | Reason for Refund/Rebate | | | | |
| Borrower Name | | Date Rebate/Refund Received | | | |
| Street Address | | | | | |
| 4 City | State | ZIP | | | |
| Original Purchase Amount | Reason for Refund/Rebate | | | | |
| Borrower Name | | Date Rebate/Refund Received | | | |
| Street Address | | | | | |
| 5 City | State | ZIP | | | |
| Original Purchase Amount | Reason for Refund/Rebate | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 3)</small> | | | | | |



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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) | | |



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IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(5)(a)

| Individual Contributor Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|----------|-----------------|---|---------------------------------------|
| 1 | Name | | | | |
| | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Occupation | | Employer | | | |
| 2 | Name | | | | |
| | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Occupation | | Employer | | | |
| 3 | Name | | | | |
| | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Occupation | | Employer | | | |
| 4 | Name | | | | |
| | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Occupation | | Employer | | | |
| 5 | Name | | | | |
| | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Occupation | | Employer | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(a))</small> | | | | | |

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Schedule A(5), page ___ of



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IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

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

*If contributions of more than \$50 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).



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IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

| Candidate Committee Contributor Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|------------------------------------|-----------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(c))</small> | | | | | | |

Schedule A(5)(c), page ___ of ___



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IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

| Political Action Committee Contributor Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|------------------------------------|-----------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(d))</small> | | | | | | |

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IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(6)(e)

| Political Party Contributor Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---------------------|------------------------------------|-----|-----------------|---|---------------------------------------|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(e))</small> | | | | | | |

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IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

| Partnership Contributor Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|-------|------------------------------------|-----------------|---|---------------------------------------|
| 1 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Received | | | |
| 2 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Received | | | |
| 3 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Received | | | |
| 4 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Received | | | |
| 5 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Received | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(f))</small> | | | | | | |

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IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

| Corporation / LLC Contributor Information | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|------------------------------------|------------------------------------|-----------------|---|---------------------------------------|-----|
| 1 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 2 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 3 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 4 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 5 | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(g))</small> | | | | | | |

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IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

| Labor Organization Contributor Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|------------------------------------|-----|-----------------|---|---------------------------------------|
| 1 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 2 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 3 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 4 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| 5 | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution Received | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(h))</small> | | | | | | |



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

SCHEDULE A(5)(i)

| Candidate Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|-------------------------------|-------|------------------------------------|-----------------|---|---------------------------------------|--|
| 1 | Name | | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | | | |
| | City | State | ZIP | | | | |
| | Asset or Property Contributed | | | | | | |
| 2 | Name | | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | | | |
| | City | State | ZIP | | | | |
| | Asset or Property Contributed | | | | | | |
| 3 | Name | | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | | | |
| | City | State | ZIP | | | | |
| | Asset or Property Contributed | | | | | | |
| 4 | Name | | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | | | |
| | City | State | ZIP | | | | |
| | Asset or Property Contributed | | | | | | |
| 5 | Name | | Date In-Kind Contribution Received | | | | |
| | Street Address | | | | | | |
| | City | State | ZIP | | | | |
| | Asset or Property Contributed | | | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(j))</small> | | | | | | | |



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

SCHEDULE A(6)

| Source Information | | | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|----------------------|-------|--------------------------------|-----------------|---|---------------------------------------|
| 1 | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Item Donated | | | | | |
| 2 | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Item Donated | | | | | |
| 3 | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Item Donated | | | | | |
| 4 | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Item Donated | | | | | |
| 5 | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Item Donated | | | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 6)</small> | | | | | | |



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EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

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



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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 |
|---|---|-------|--------------------------------------|---|---|---|
| 1 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| 2 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| 3 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| 4 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| 5 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 7(b))</small> | | | | | | |



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JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

| Payor Committee Information | | | Payment Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|---|-------|--|---|---------------------------------------|
| 1 | Committee Name | | Payment Date | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | |
| 2 | Committee Name | | Payment Date | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | |
| 3 | Committee Name | | Payment Date | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | |
| 4 | Committee Name | | Payment Date | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | |
| 5 | Committee Name | | Payment Date | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 8)</small> | | | | | |



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PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

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



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COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

| Information | | | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|-------|------------------------|--------|---|---------------------------------------|
| 1 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| 2 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| 3 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| 4 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| 5 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Receivable or Debt Owed | | Date that Debt Accrued | | | |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 10)</small> | | | | | | |



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

| | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|---------------------------------------|
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Source of Surplus Monies / Recipient of Transferred Debt | | |
| Total (transfer the total received this period to "Summary of Receipts," line 11) | | |



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
2016-71

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

| Source Information | | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|----------------|-------|--------|---|---------------------------------------|--------------|
| 1 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Receipt Type | | | | | Receipt Date |
| 2 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Receipt Type | | | | | Receipt Date |
| 3 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Receipt Type | | | | | Receipt Date |
| 4 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Receipt Type | | | | | Receipt Date |
| 5 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Receipt Type | | | | | Receipt Date |
| Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 12)</small> | | | | | | |



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

| Recipient Information | | | | Amount Paid | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | | |
|--|--------------------------------|--------------------------|--|-------------|--|---------------------------------------|--|--|
| 1 | Name | | Disbursement Date | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | | |
| | Street Address | | | | | | | |
| | City | | State | ZIP | | | | |
| | Type of Operating Expense Paid | | Non-Electoral Purpose? (PACs and Political Parties Only) | | | | | |
| | | <input type="checkbox"/> | | | | | | |
| 2 | Name | | Disbursement Date | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | | |
| | Street Address | | | | | | | |
| | City | | State | ZIP | | | | |
| | Type of Operating Expense Paid | | Non-Electoral Purpose? (PACs and Political Parties Only) | | | | | |
| | | <input type="checkbox"/> | | | | | | |
| 3 | Name | | Disbursement Date | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | | |
| | Street Address | | | | | | | |
| | City | | State | ZIP | | | | |
| | Type of Operating Expense Paid | | Non-Electoral Purpose? (PACs and Political Parties Only) | | | | | |
| | | <input type="checkbox"/> | | | | | | |
| 4 | Name | | Disbursement Date | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | | |
| | Street Address | | | | | | | |
| | City | | State | ZIP | | | | |
| | Type of Operating Expense Paid | | Non-Electoral Purpose? (PACs and Political Parties Only) | | | | | |
| | | <input type="checkbox"/> | | | | | | |
| 5 | Name | | Disbursement Date | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | | |
| | Street Address | | | | | | | |
| | City | | State | ZIP | | | | |
| | Type of Operating Expense Paid | | Non-Electoral Purpose? (PACs and Political Parties Only) | | | | | |
| | | <input type="checkbox"/> | | | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 1)</small> | | | | | | | | |



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

| Candidate Committee Recipient Information | | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|---------------------|------------------------|-----|--|---|---------------------------------------|
| 1 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 2 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 3 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 4 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 5 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| Enter total only if last page of schedule | | | | | | |
| <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(a))</small> | | | | | | |

Schedule B(2)(a), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

| Political Action Committee Recipient Information | | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---------------------|------------------------|-----|--|---|---------------------------------------|
| 1 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 2 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 3 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 4 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 5 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(b))</small> | | | | | | |

Schedule B(2)(b), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

| Political Party Recipient Information | | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---------------------|------------------------|-----|--|---|---------------------------------------|
| 1 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 2 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 3 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 4 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| 5 | Committee Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(c))</small> | | | | | | |

Schedule B(2)(c), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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2016-71

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

| Partnership Recipient Information | | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|------------------------|-----|--|---|---------------------------------------|
| 1 | Partnership Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 2 | Partnership Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 3 | Partnership Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 4 | Partnership Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 5 | Partnership Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(d))</small> | | | | | | |

Schedule B(2)(d), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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COMMITTEE ID NUMBER
2016-71

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

| Corporation / LLC Recipient Information | | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|------------------------|-----|--|---|---------------------------------------|
| 1 Corporation/LLC Name | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Street Address | | | | | | |
| City | | State | ZIP | | | |
| Corporation Commission File Number | | Date Contribution Made | | | | |
| 2 Corporation/LLC Name | | | | | | |
| Street Address | | | | | | |
| City | | State | ZIP | | | |
| Corporation Commission File Number | | Date Contribution Made | | | | |
| 3 Corporation/LLC Name | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Street Address | | | | | | |
| City | | State | ZIP | | | |
| Corporation Commission File Number | | Date Contribution Made | | | | |
| 4 Corporation/LLC Name | | | | | | |
| Street Address | | | | | | |
| City | | State | ZIP | | | |
| Corporation Commission File Number | | Date Contribution Made | | | | |
| 5 Corporation/LLC Name | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Street Address | | | | | | |
| City | | State | ZIP | | | |
| Corporation Commission File Number | | Date Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(e))</small> | | | | | | |



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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COMMITTEE ID NUMBER
2016-71

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

| Labor Organization Recipient Information | | | | Amount Contributor | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|------------------------|-----|--|---|---------------------------------------|
| 1 | Labor Organization Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 2 | Labor Organization Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 3 | Labor Organization Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 4 | Labor Organization Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| 5 | Labor Organization Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 2(f))</small> | | | | | | |



**STATE OF ARIZONA
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FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

LOANS MADE:

SCHEDULE B(3)(a)

| Borrower Information | | | Amount Loaned | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|-------------------------|----------------|---------------|---|---------------------------------------|-----|
| 1 | Borrower Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| 2 | Borrower Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| 3 | Borrower Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| 4 | Borrower Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| 5 | Borrower Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Guarantor/Endorser Name | Date Loan Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Receipts," line 3)</small> | | | | | | |

Schedule B(3)(a), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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COMMITTEE ID NUMBER

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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 |
|--|----------------|-------|----------------------|-------------------|---|---------------------------------------|
| 1 | Guarantor Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Borrower Name | | Date Loan Guaranteed | | | |
| 2 | Guarantor Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Borrower Name | | Date Loan Guaranteed | | | |
| 3 | Guarantor Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Borrower Name | | Date Loan Guaranteed | | | |
| 4 | Guarantor Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Borrower Name | | Date Loan Guaranteed | | | |
| 5 | Guarantor Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Borrower Name | | Date Loan Guaranteed | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Receipts," line 3(b))</small> | | | | | | |



**STATE OF ARIZONA
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FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

| Borrower Information | | | Amount Forgiven | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|-----------------------|--------------------------|-----------------|---|---------------------------------------|
| 1 | Borrower Name | | | | |
| | Date Forgiveness Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount of Loan | | Amount Still Outstanding | | | |
| 2 | Borrower Name | | | | |
| | Date Forgiveness Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount of Loan | | Amount Still Outstanding | | | |
| 3 | Borrower Name | | | | |
| | Date Forgiveness Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount of Loan | | Amount Still Outstanding | | | |
| 4 | Borrower Name | | | | |
| | Date Forgiveness Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount of Loan | | Amount Still Outstanding | | | |
| 5 | Borrower Name | | | | |
| | Date Forgiveness Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| Original Amount of Loan | | Amount Still Outstanding | | | |
| Enter total only if last page of schedule | | | | | |
| <small>(transfer the total disbursed this period to "Summary of Disbursements," line 3(c))</small> | | | | | |

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



**STATE OF ARIZONA
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2016-71

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

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

Schedule B(3)(d), page ___ of



**STATE OF ARIZONA
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INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

| Lender Information | | | Amount of Interest Accrued | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--------------------------|-------|-------------------------------|---|---|
| 1 | Lender Name | | Date Interest Accrued | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | |
| 2 | Lender Name | | Date Interest Accrued | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | |
| 3 | Lender Name | | Date Interest Accrued | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | |
| 4 | Lender Name | | Date Interest Accrued | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | |
| 5 | Lender Name | | Date Interest Accrued | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Original Amount Borrowed | | Amount Still Outstanding | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 3(e))</small> | | | | | |

Schedule B(3)(e), page ___ of



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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2016-71

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

| Recipient Information | | | Amount Rebated / Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|-------------------------|------------------------------|---|---|
| 1 | Name of Original Payor | | | | |
| | Date Rebate/Refund Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Date of Original Payment | | |
| 2 | Name of Original Payor | | | | |
| | Date Rebate/Refund Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Date of Original Payment | | |
| 3 | Name of Original Payor | | | | |
| | Date Rebate/Refund Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Date of Original Payment | | |
| 4 | Name of Original Payor | | | | |
| | Date Rebate/Refund Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Date of Original Payment | | |
| 5 | Name of Original Payor | | | | |
| | Date Rebate/Refund Made | | | | |
| | Street Address | | | | |
| | City | State | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Date of Original Payment | | |
| Enter total only if last page of schedule | | | | | |
| <small>(transfer the total disbursed this period to "Summary of Disbursements," line 4)</small> | | | | | |

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**STATE OF ARIZONA
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COMMITTEE ID NUMBER
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IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

| Candidate Committee Recipient Information | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|--------------------------------|--------------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(a))</small> | | | | | | |

Schedule B(5)(a), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER

2016-71

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

| Political Action Committee Recipient Information | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|--------------------------------|--------------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(b))</small> | | | | | | |

Schedule B(5)(b), page ___ of ___



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2016-71

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

| Political Party Recipient Information | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|---------------------|--------------------------------|--------------------|---|---------------------------------------|-----|
| 1 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 2 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 3 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 4 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| 5 | Committee Name | | | | | |
| | Street Address | | | | | |
| | City | State | | | | ZIP |
| | Committee ID Number | Date In-Kind Contribution Made | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(c))</small> | | | | | | |

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



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
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COMMITTEE ID NUMBER
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IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

| Partnership Recipient Information | | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------------|-------|--------------------------------|--------------------|---|---------------------------------------|
| 1 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Made | | | |
| 2 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Made | | | |
| 3 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Made | | | |
| 4 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Made | | | |
| 5 | Partnership Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number | | Date In-Kind Contribution Made | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(d))</small> | | | | | | |

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



**STATE OF ARIZONA
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COMMITTEE ID NUMBER
2016-71

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

| Corporation / LLC Recipient Information | | | | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------|--------------------------------|-----|--------------------|---|---------------------------------------|
| Corporation/LLC Name | | | | | | |
| Street Address | | | | | | |
| 1 | City | State | ZIP | | | |
| Corporation Commission File Number | | Date In-Kind Contribution Made | | | | |
| | | | | | | |
| Corporation/LLC Name | | | | | | |
| Street Address | | | | | | |
| 2 | City | State | ZIP | | | |
| Corporation Commission File Number | | Date In-Kind Contribution Made | | | | |
| | | | | | | |
| Corporation/LLC Name | | | | | | |
| Street Address | | | | | | |
| 3 | City | State | ZIP | | | |
| Corporation Commission File Number | | Date In-Kind Contribution Made | | | | |
| | | | | | | |
| Corporation/LLC Name | | | | | | |
| Street Address | | | | | | |
| 4 | City | State | ZIP | | | |
| Corporation Commission File Number | | Date In-Kind Contribution Made | | | | |
| | | | | | | |
| Corporation/LLC Name | | | | | | |
| Street Address | | | | | | |
| 5 | City | State | ZIP | | | |
| Corporation Commission File Number | | Date In-Kind Contribution Made | | | | |
| | | | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 5(e))</small> | | | | | | |



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IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

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



**STATE OF ARIZONA
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INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

| Expenditure Recipient Information | | | | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|--|---------------------|--|--|---|---------------------------------------|
| 1 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Candidate(s) Supported (including % supported) | | Candidate(s) Opposed (including % opposed) | | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | Office Sought | | | |
| 2 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Candidate(s) Supported (including % supported) | | Candidate(s) Opposed (including % opposed) | | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | Office Sought | | | |
| 3 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Candidate(s) Supported (including % supported) | | Candidate(s) Opposed (including % opposed) | | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | Office Sought | | | |
| 4 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Candidate(s) Supported (including % supported) | | Candidate(s) Opposed (including % opposed) | | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | Office Sought | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 6)</small> | | | | | | |



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2016-71

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

| Expenditure Recipient Information | | | | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|---|-------------|--|--------------------|---|---------------------------------------|
| 1 | Recipient Name | MOVIMIENTO | | \$ 83.00 | \$ 83.00 | \$ 1,368.00 |
| | Mode of Advertising (TV, mail, etc) | BANNER | | | | |
| | Street Address | PO BOX 9435 | | | | |
| | City | State | ZIP | | | |
| | SAN LUIS | AZ | 85349 | | | |
| Ballot Measure(s) Supported (including % supported) | OVERRIDE | | <input checked="" type="checkbox"/> Cash | | | |
| | Ballot Measure(s) Opposed (including % opposed) | | <input type="checkbox"/> Credit | | | |
| Date of First Publication, Display, Delivery, or Broadcast | 12/01/2016 | | | | | |
| Election Month/Year | 11/16 | | | | | |
| 2 | Recipient Name | | | | | |
| | Mode of Advertising (TV, mail, etc) | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | | | | | | |
| Ballot Measure(s) Supported (including % supported) | | | <input type="checkbox"/> Cash | | | |
| | Ballot Measure(s) Opposed (including % opposed) | | <input type="checkbox"/> Credit | | | |
| Date of First Publication, Display, Delivery, or Broadcast | | | | | | |
| Election Month/Year | | | | | | |
| 3 | Recipient Name | | | | | |
| | Mode of Advertising (TV, mail, etc) | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | | | | | | |
| Ballot Measure(s) Supported (including % supported) | | | <input type="checkbox"/> Cash | | | |
| | Ballot Measure(s) Opposed (including % opposed) | | <input type="checkbox"/> Credit | | | |
| Date of First Publication, Display, Delivery, or Broadcast | | | | | | |
| Election Month/Year | | | | | | |
| 4 | Recipient Name | | | | | |
| | Mode of Advertising (TV, mail, etc) | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | | | | | | |
| Ballot Measure(s) Supported (including % supported) | | | <input type="checkbox"/> Cash | | | |
| | Ballot Measure(s) Opposed (including % opposed) | | <input type="checkbox"/> Credit | | | |
| Date of First Publication, Display, Delivery, or Broadcast | | | | | | |
| Election Month/Year | | | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 7)</small> | | | | | | |

Schedule B(7), page ___ of ___



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COMMITTEE ID NUMBER
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RECALL EXPENDITURES MADE:

SCHEDULE B(8)

| Expenditure Recipient Information | | | | Expenditure Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|--|-------|-------------------------------------|--|---|---------------------------------------|
| 1 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | 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 | | | |
| 2 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | 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 | | | |
| 3 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | 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 | | | |
| 4 | Recipient Name | | Mode of Advertising (TV, mail, etc) | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | 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 <small>(transfer the total disbursed this period to "Summary of Disbursements," line 8)</small> | | | | | | |



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SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

| Benefitted Candidate | | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|--------------------------|-------|-----------------------|---|---------------------------------------|
| 1 | Candidate Name | | Date Benefit Provided | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Type of Benefit Provided | | | | |
| | Notes: | | | | |
| 2 | Candidate Name | | Date Benefit Provided | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Type of Benefit Provided | | | | |
| | Notes: | | | | |
| 3 | Candidate Name | | Date Benefit Provided | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Type of Benefit Provided | | | | |
| | Notes: | | | | |
| 4 | Candidate Name | | Date Benefit Provided | | |
| | Street Address | | | | |
| | City | State | ZIP | | |
| | Type of Benefit Provided | | | | |
| | Notes: | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 9)</small> | | | | | |

Schedule B(9), page ___ of ___



**STATE OF ARIZONA
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COMMITTEE ID NUMBER

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JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

| Recipient Committee Information | | | | Payment Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|-------|--|--|---|---------------------------------------|
| 1 | Committee Name | | Payment Date | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | | |
| 2 | Committee Name | | Payment Date | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | | |
| 3 | Committee Name | | Payment Date | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | | |
| 4 | Committee Name | | Payment Date | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | | |
| 5 | Committee Name | | Payment Date | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Date of Joint Fundraising Event (if applicable) | | Type of Shared Expense (if applicable) | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 10)</small> | | | | | | |



**STATE OF ARIZONA
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REIMBURSEMENTS MADE:

SCHEDULE B(11)

| Recipient Information | | | | Reimbursement Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|------------------------------|-------|--------------------|--|---|---------------------------------------|
| 1 | Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | | | |
| 2 | Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | | | |
| 3 | Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | | | |
| 4 | Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | | | |
| 5 | Name | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 11)</small> | | | | | | |



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

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OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

| Debt Information | | | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|--|--------------------------------------|-------|------------------------|--------|---|---------------------------------------|
| 1 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Payable or Debt Owed | | Date that Debt Accrued | | | |
| 2 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Payable or Debt Owed | | Date that Debt Accrued | | | |
| 3 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Payable or Debt Owed | | Date that Debt Accrued | | | |
| 4 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Payable or Debt Owed | | Date that Debt Accrued | | | |
| 5 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Type of Account Payable or Debt Owed | | Date that Debt Accrued | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Receipts," line 12)</small> | | | | | | |



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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) | | |



**STATE OF ARIZONA
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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

| Recipient Information | | | | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|-------|-------------------|--|--|---|---------------------------------------|
| 1 | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Name | | | | | | |
| Street Address | | | | | | |
| City | State | ZIP | | | | |
| Disbursement Type | | Disbursement Date | | | | |
| 2 | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Name | | | | | | |
| Street Address | | | | | | |
| City | State | ZIP | | | | |
| Disbursement Type | | Disbursement Date | | | | |
| 3 | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Name | | | | | | |
| Street Address | | | | | | |
| City | State | ZIP | | | | |
| Disbursement Type | | Disbursement Date | | | | |
| 4 | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Name | | | | | | |
| Street Address | | | | | | |
| City | State | ZIP | | | | |
| Disbursement Type | | Disbursement Date | | | | |
| 5 | | | | <input type="checkbox"/> Cash <input type="checkbox"/> Credit | | |
| Name | | | | | | |
| Street Address | | | | | | |
| City | State | ZIP | | | | |
| Disbursement Type | | Disbursement Date | | | | |
| Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 14)</small> | | | | | | |