

COMMITTEE ID NUMBER
LHC-21-001-REF

COMMITTEE INFORMATION (required)

	Committee Information:	Committee Name: Protect the Pu	ublic from Special Interests	
CANE	DIDATE INFORMATION (only if t	iling as a candidate committee):	MECEIVER	1
	Office Sought:	☐ Statewide Office:	State Legislature:	
		☐ County Office:	☐ City/Town Office:	П
	Cumulative Report:		AU3 V 4 2021	//
	☐ Check here if this is the	candidate committee's first, cumulative report	for the election cycle. Also select appropriate Reporting Period below.	4
Į	Cumulative reporting perior	d start date (which supersedes the start date	for the Reporting Period selected below):	
REPO	RTING PERIOD (check one):		Lancas and Control of the Control of	
		DEDORTING DEDIOD	REPORT DUE	

3 1 1	CRIOD (CHECK One).	The state of the s
	REPORTING PERIOD	REPORT DUE
	2020 4th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
	2021 March Pre-Election Report (Local Only): January 1, 2021 to February 20, 2021	February 21, 2021 to February 27, 2021
	2021 March Post-Election (Q1) Report (Local Only): February 21, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1: January 1, 2021 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 May Pre-Election Report (Local Only): April 1, 2021 to May 1, 2021	May 2, 2021 to May 8, 2021
	2021 May Post-Election (Q2) Report (Local Only): May 2, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
/	2021 Quarter 2 Report: April 1, 2021 to June 30, 2021	July 1, 2021 to July 15, 2021
	2021 August Pre-Election Report (Local Only): July 1, 2021 to July 17, 2021	July 18, 2021 to July 24, 2021
	2021 August Post-Election (Q3) Report (Local Only): July 18, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 Quarter 3 Report: July 1, 2021 to September 30, 2021	October 1, 2021 to October 15, 2021
	2021 November Pre-Election Report (Local Only): October 1, 2021 to October 16, 2021	October 17, 2021 to October 23, 2021
	2021 November Post-Election (Q4) Report (Local Only): October 17, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2021 Quarter 4 Report: October 1, 2021 to December 31, 2021	January 1, 2022 to January 15, 2022
	2022 March Pre-Election Report (Local Only): January 1, 2022 to February 19, 2022	February 20, 2022 to February 26, 2022
	2022 March Post-Election (Q1) Report (Local Only): February 20, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 Quarter 1 Report: January 1, 2022 to March 31, 2022	April 1, 2022 to April 15, 2022
	2022 May Pre-Election Report (Local Only): April 1, 2022 to April 30, 2022	May 1, 2022 to May 7, 2022
	2022 May Post-Election (Q2) Report (Local Only): May 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Quarter 2 Report: April 1, 2022 to June 30, 2022	July 1, 2022 to July 15, 2022
	2022 Pre-Primary Election Report: July 1, 2022 to July 16, 2022	July 17, 2022 to July 23, 2022
	2022 Post-Primary (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Pre-General Election Report: October 1, 2022 to October 22, 2022	October 23, 2022 to October 29, 2022
	2022 Post-General (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 17, 2023*
	Final Campaign Finance Report Prior to Committee Termination	End of Previous Period through Today's Da
	*Departing deadline extended to part business day A.B.C. SS 1.242/A) and 1.202	

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

FINANCIAL SUMMARY (required):

	Activity	Cash Activity This Reporting Period	Election Cycle to Date	
(a)	Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	0		
(b)	+ Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	10000		
(c)	- Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	10000		
(d)	= Balance at close of reporting period	0		



Under A.R.S. § 16-926(B)(5), a campaign finance report must be certified by the committee treasurer under penalty of perjury that the contents of the report are true and correct.

By filing this report, you certify that, under penalty of perjury, you have examined the contents of this report, and the contents are true and correct.

Language Control of the Control of t		
James McGue		8/442021
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

COMMITTEE ID NUMBER

LHIG22-1000REFEF

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		1 1 1 1 1 1 1 1
	(e) Political Parties		
	(f) Partnerships		
	(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)	10,0 00 0000	
	(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))		
	(k) Refunds Given Back to Contributors		
	(I) Net Monetary Contributions (subtract 1(k) from 1(j))		
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))		ELIAMERE EL CASCI
3.	Rebates and Refunds Received		The var of Long
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))		
6. 7	In-Kind Donations Received (Non-Contributions) (Political Parties Only) 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))		
Ω			
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)	10,0000000	

SUMMARY OF DISBURSEMENTS (Schedule B):

_	Disbursements	Cash	Equity
1,:	Disbursements for Operating Expenses	10,00 0 0000	
2.	Contributions Made		
	(a) Candidate Committees		
	(b) Political Action Committees		Later British Inc.
	(c) Political Parties		MATERIAL STATE
	(d) Partnerships		A STATE OF LAND ASSESSMENT
	(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))		great resident
_	(h) Contribution Refunds Provided to the Reporting Committee		
-	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3.	Loans		APPLE DIED DE
	(a) Loans Made		and the second
	(b) Loan Guarantees Made		SP NOTE COMMENTS
_			
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		AND DESCRIPTION OF THE PARTY OF
_	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)	at our service library with	
	(j) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7,	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
11.	Reimbursements Made		
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements		
15.	Aggregate of Disbursements - \$250 or Less		
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)	10,00 0 0000	



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

SCHEDULE A(1)(a)

Individual Contributor Information Manuary Source Antiquesce							
The Process	/	·	ributor Informatio		Amount Received	Amount this	Cumulative Amount this Election Cycle
The City State		Name		Date Contribution Received			
Cocupation Cocupation Complete Cocupation Cocupati		Street Address					
Name Name Date Contribution Records	1	City	State	ZIP			
		Occupation	Employer				
City	-	Name		Date Contribution Received			
Comparison Com		Streel Address					
Name Street Address Anne Anne City Date Contribution Received	2	City	State	ZIP			
Silvani Address City Occupation Emptoyer City Cit		Occupation	Employer		-		
City		Name		Date Contribution Received			
Cocupation Composition C		Sireel Address					
Cocupation Composition C	3	City Plate 7/D		7/0			
Name Date Contribution Received Street Address ZIP		Gity		LIF			
A Street Address City Cocupation Date Contribution Received		Occupation	Employer				
4 City State ZIP Occupation Employer Name Date Contribution Received Street Address City State ZIP Occupation Transfer Address Employer Employer Employer Employer Employer		Name		Dale Contribution Received			
City State City Occupation Employer Date Contribution Received Street Address City State City		Street Address					
Name Date Contribution Received	4	City	State	ZIP			
Street Address City State ZIP Occupation Employer Enter total only if last page of schedule		Occupation	Employer	1			
State ZIP City Cocupation Employer Enter total only if last page of schedule	-	Name	1	Date Contribution Received			
Occupation Employer Enter total only if last page of schedule		Street Address					
Enter total only if last page of schedule	5	City	State	ZIP			
		Occupation	Employer	1	1		
Illicaneter the total recoved this period to "Summary of Pecalole" line 1(a))	_						

*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 ____



COMMITTEE ID NUMBER
LHC-21-001-REF

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 (transfer the total received this period to "Summary of Receipts," line 1(b))		

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES;

SCHEDULE A(1)(c)

/	Candidate Committ	ee Contributor Info	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
l	Committee Name					
	Street Address			;		
1	City	Stale	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
F	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ad			
_	Committee Name					
	Street Address			-		
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed	-		
	Committee Name					
	Street Address		-			
4	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed .			
Г	Enter total only if last page of schedule	9				
_	(transfer the total received this period to 'Summary of Received	ots." (ine 1(c))				

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

/	Political Action Comm	ittee Contributor Ir	nformation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			-		
1	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receiv	ed			
-	Committee Name					
	Street Address			_		
2	City	State	ZIP	-		İ
	Committee ID Number	Date Contribution Receiv	red	-		
	Committee Name					
	Street Address					
3						
	City	State	ZIP			
	Commillee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Streel Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Committee Name					
	Sireel Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipt	s," line 1(d))				

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

- 0	1						
		Political Party Cor	ntributor Informati	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ſ		Committee Name					
		Street Address					
'	1	City	State	ZIP			
		Committee ID Number	Date Contribution Received	d			
		Committee Name					
		Street Address					
1	2	City	State	ZIP	ŧ		
		Committee ID Number	Date Contribution Receive	I			
-		Committee Name					
		Street Address					
;	3	City	State	ZIP			
		Committee ID Number	Dale Contribution Receive	ed .			
		Committee Name					
	İ	Street Address					
4	4	Cily	State	ZIP			
		Commiltee ID Number	Date Contribution Receive	I			
		Committee Name					
		Street Address					
	5	City	Stale	ZIP			
		Committee ID Number	Date Contribution Receive	I ed			
		Enter total only if last page of schedule	line 1(e))				

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

/_	Partnership C	ontributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ſ	Partnership Name				, ,	
	Street Address			-		
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Partnership Name					
	Street Address					
2	City	Stale	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved			
r	Partnership Namo					7
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
-	Partnership Name					
	Sireel Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
r	Partnership Name					
	Street Address					
5	Cily	State	ZIP			
	Corporation Commission File Number	Dale Contribution Receive	<u>l</u>			
F	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipt	s." line 1(f))				

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

		LLC Contributor Int	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name FWA Inc Streat Address 2639 IN 31st Ave			40000 00		10000
1	City Phoenix	State AZZ	85009	10000.00	10000	10000
	Corporation Commission File Number 20213139	Date Contribution R 6/30/202				
	Corporation/LLC Name					
	Street Address					
2	City	Slate	ZIP			
	Corporation Commission File Number	Dale Contribution F	Received			
	Corporation/Lt.C Name	:2				
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution F	Received			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Dale Contribution F	Received			
	Corporation/LLC Name	I.				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution F	Received			
	Enter total only if last page of sche					
	(transfer the total received this period to 'Summary of F	succepts, line 1(d))			1	

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

/		on Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved			
T	Labor Organization Name					
	Sireet Address					
2	2 City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received	ved			
-	Labor Organization Name					
	Street Address					
3	City	State	ZIP	V		
	Corporation Commission File Number	Date Contribution Receiv	red			
-	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
H	Labor Organization Name					
	Streel Address					
5	Cily	Slate	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed ed			
-	Enter total only if last page of schedule					
L	Itransfer the total received this period to "Summary of Receipts	s." line 1(h))				

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



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
	Name		Date Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer				
	Name	II.	Date Contribution Received			
	Street Address			1		
2	City	State	ZIP			
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address			-		
3	Cily	State	ZIP	-		
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address			=		
4	City	State	ZIP	- -		
	Occupation	Employer		-		
	Name		Date Contribution Received			
	Street Address			-		
5	City	State	ZIP	_		
	Occupation	Employer		-		
					,	

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

/	Contribut	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			
	Street Address					
1	City	Stale	ZIP			
	ID Number (If applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
2	City	State	ZIP			
	iD Number (if applicable)		Date of Onginal Contribution	1		
	Name		Date Contribution Refunded			
	Street Address					
3	City	State	ZIP			
	ID Number (il applicable)		Date of Original Contribution			
	Neme		Date Contribution Refunded			
	Street Address					
4	Cily	State	ZIP			
	ID Number (it applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
5	City	State	ZIP			
	ID Number (if applicable)	I	Date of Onginal Contribution	_		

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



LOANS RECEIVED:

SCHEDULE A(2)(a)

	Lender	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received				
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address		k)			
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose?	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
3	City	State	ZIP			
	Guaranlor/Endorser Name	1	(PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name	1	(PACs and Political Parties Only)			
ľ	Lender Name	Date Loan Received				
	Street Address					
5	City	Stale	ZIP			
	Guaranlor/Endorser Name	Non-Electoral Purposa?	(PACs and Political Parties Only)			

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



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

T-	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name	nder Name				
Street Address					
Cily	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Lender Name		Date Forgiveness Received			
Streel Address			1		
Cily	State	ZIP			
Original Amount of Loan	Amount Still Outstanding		1		
Lender Name		Dale Forgiveness Received			
Streel Address			1		
City	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding				
Lender Name		Date Forgiveness Received			
Street Address			-		
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding		1		
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					
	Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan Lender Name Street Address City Original Amount of Loan City Original Amount of Loan	Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding Lender Name Street Address City State Original Amount of Loan Amount Still Outstanding	Lender Name Street Address City State Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding	Date Forgiveness Received	Lender Name Date Progresses Received Date Progresses Received

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



REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

/		Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Borrower Name		Date Repayment Received			
		Street Address			-		
	1	Cily	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding	li:	-		
r		Borrower Name	1	Date Repayment Received			
		Street Address		1	1		
. :	2	City	State	ZIP	-		
		Original Amount Borrowed	Amount Still Outstanding		1		
-		Borrower Name		Date Repayment Received			
		Street Address			1		
;	3	City	State	ZIP			
		Original Amount Borrowed	Amount Still Outstanding		-		
-		Borrower Name	L	Date Repayment Received			
		Street Address		I			
4	4	City	State	ZIP	1		
		Original Amount Borrowed	Amount Still Outstanding				
r		Borrower Name		Date Repayment Received			
		Street Address					
!	5	City	State	ZIP	-		
		Original Amount Borrowed	Amount Still Outstanding		1		
-		Enter total only if last page of schedule	line 2(c))				

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



INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

/		r Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding			i,	
	Borrower Name		Date Interest Accrued			
	Street Address			1		
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	-			
	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	Slate	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Borrower Name		Date Interest Accrued			
	Streel Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Interest Accrued			
	Street Address			_		
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
		Oddining				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts."	line 2(d))				

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



REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

12						
	Payor	nformation		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Retund Received			
	Streel Address					
١.						
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
	Payor Name	1	Date Rebate/Refund Received			
	Street Address		<u>L</u>	-;		
2	Gily	Stale	ZIP			
	Original Purchase Amount	Reason for Refund/Rebale	<u>I</u>			
	Payor Name	1	Dale Rebate/Refund Received			
	Streel Address			-		
3	City	State	ZIP	-		
	Original Purchase Amount	Reason for Refund/Rebate	0.5	-		
	Payor Name		Date Rebate/Refund Received			
	Street Address					
4	City	State	ZIP			
	Onginal Purchase Amount	Reason for Refund/Rebete	0	-		
-	Payor Name		Date Rebate/Refund Received			
	Street Address		l	-		
5	City	State	ZIP	-		
	Original Purchase Amount	Reason for Refund/Rebale	0	-		
	Enter total only if last page of schedule	" (ine 3)		1		

Schedule A(3), page ____ of



COMMITTEE ID NUMBER

LHC22-DOOREFEEF

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

Schedule A(4), page ___ of ___



IN-KIND CONTRIBUTIONS RECEIVED FROM 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
	Name		Date In-Kind Contribution Received			
	Street Address					
1	City	State	ZIP			
	Occupation	Employer	iiI.:			
	Name		Dale In-Kind Contribution Received			
	Street Address					
2			L			
	City	State	ZIP			
	Occupation	Employer				
	Name		Date In-Kind Contribution Received			
	Street Address		I.			
3	City	Stale	ZIP	-		
	Sity Sity	Clare				
	Occupation	Employer				
	Name	——— <u>I</u>	Date In-Kind Contribution Received			
	Street Address		1			
4						
	City	Stale	ZIP			
	Occupation	Employer				
r	Name	J.	Date In-Kind Contribution Received			
	Street Address					
5						
	City	State	ZIP			
	Occupation	Employer	1			
	Enter total only if last pa	age of schedule				
		to "Summary of Receipts," line 5(a))				

*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



COMMITTEE ID NUMBER
LHCG22-DOOREREF

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 (transfer the total received this period to "Summary of Receipts," line 1(b))		

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(c)

/	Candidate Committee	e Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
1	Gily	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
3	Street Address					
,	Cily	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Streat Address	X.				
5	City	State	ZIP			
	Commiltee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule					
	transfer the total received this period to "Summary of Receipts	" line 5(c))				

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

POINCEI ACTION Committee Contributor Information Amount Received Amount this Reporting Period Election Cy State	1				121			
Single Andrones State Zgs			ion Committee Contributor	Information	Amount Re		Amount this	Cumulative Amount this Election Cycle
Committee ID Number Committee ID Number		Committee Name						
Committee ID Number Committee ID Number		Street Address						
Committee Name Since Address Committee Name Date in Knot Contribution Placewed Committee Name Date in Knot Contribution Received Committee Name Date in Knot Contribution Received Committee Name Date in Knot Contribution Received Committee Name Committee Name Date in Knot Contribution Received Committee Name Committee Name Since Address Committee ID Number Date in-Knot Contribution Received Committee ID Number Committee Name Committee Name Committee Name Since Address Committee Name 1 0	City	State	ZIP					
Stored Address Committee ID Number Committee ID Number Committee Name Strand Address State Committee ID Number Committee ID Number Committee ID Number Date In-Kind Contribution Received Zip Committee Name Strand Address State Zip Committee ID Number Date In-Kind Contribution Received	C	Committee ID Number	Date In-Kind Contribut	on Received				
2 City State ZIP Committee Name Street Address Diversity Date in-Kind Contribution Received Committee Name Street Address Diversity Date in-Kind Contribution Received Committee Name Committee ID Number Date in-Kind Contribution Received Enter total only if last page of schedule	C	Committee Name						
Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee ID Number Date In-Kind Contribution Received City Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received Committee ID Number Committee ID Number Date In-Kind Contribution Received	s	Street Address						
Committee Name Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received	2 0	City	State	ZIP				
Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received Committee ID Number Date in-Kind Contribution Received Committee ID Number Date in-Kind Contribution Received Enter total only if last page of schedule	c	Committee ID Number	Date In-Kind Contribut	Ion Received		-		
Committee ID Number Date In-Kind Contribution Received Committee Name Sireal Address City Slate ZIP Committee ID Number Date In-Kind Contribution Received Committee Name Sireal Address City Slate ZIP Committee Name Sireal Address City Slate ZIP Committee Name Sireal Address City Slate ZIP Committee ID Number Date In-Kind Contribution Received Committee ID Number Date In-Kind Contribution Received	Cı	Committee Name						
Committee ID Number Date in-Kind Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date in-Kind Contribution Received Enter total only if last page of schedule	St	Street Address						
Committee ID Number Committee ID Number Committee Name Street Address City Committee Name Street Address City State ZIP Committee Name Street Address Enter total only if last page of schedule	3 ci	Sily	Stale	ZIP				
Street Address Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received Enter total only if last page of schedule	Cr	Committee ID Number	Date In-Kind Contributi	on Received				
Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received Enter total only if last page of schedule	Co	ommittee Name						
Committee ID Number Date In-Kind Contribution Received Committee Name Street Address City Committee ID Number Date In-Kind Contribution Received Enter total only if last page of schedule	Str	Street Address					£.	
Committee Name Street Address City Slate ZIP Committee ID Number Date In-Kind Contribution Received Enter total only if last page of schedule	4 cii	ity	Slate	ZIP				
Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received Enter total only if last page of schedule	Со	ommittee ID Nurnber	Dale In-Kind Contribution	Date In-Kind Contribution Received				
City State ZIP Committee ID Number Date In-Kind Contribution Received Enter total only if last page of schedule	Co	ommittee Name						
Committee ID Number Date In-Kind Contribution Received Enter total only if last page of schedule	Str	Street Address						
Enter total only if last page of schedule	City	ly	State	ZIP				
Enter total only if last page of schedule	Cor	ommillee ID Number	Date In-Kind Contribution	n Received				
ftransfer the folal received this period to "Summary of Receipts" line 5(d))	En	nter total only if last page of	schedule					

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

1						
	Political Party Co	ntributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Dale In-Kind Contribution I	Received			
	Committee Name	I.				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date in-Kind Contribution	Received			
	Committee Name	Committee Name				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Dale In-Kind Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Narne					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Dale In-Kind Contribution	Received			
	Enter total only if last page of schedule	discours dr.		L		
_	(transfer the total received this period to "Summary of Receipts."	ane 5(e))				

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

8						
_	·	ntributor Informati	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address			_		
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
H	Partnership Name					
	Street Address	_				
	1					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
-	Partnership Name					
	Sireet Address					
4	City	Stale	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address			:		
5		1				
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Summary of Receipts	" line 5(f))				

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

/		Corporation / LLC C	ontributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ſ		Corporation/LLC Name					
		Street Address					
	1	City	Slate	ZIP			
	İ	Corporation Commission File Number	Dale In-Kind Contribution I	Received			
ľ	1	Corporation/LLC Name					
	İ	Street Address			7.7		
2	2	City	State	ZIP			
	l	Corporation Commission File Number	Date In-Kind Contribution	Received			
r	1	Corporation/LLC Nama					
	İ	Street Address					
;	3	City	State	ZIP	i i	30	
	İ	Corporation Commission File Number	Date In-Kind Contribution Received				
		Corporation/LLC Name	I.				
	Ì	Street Address					
4	4	City	State	ZIP			
	Ì	Corporation Commission File Number	Date In-Kind Contribution	Received			
		Corporation/LLC Name	I.:				
	Ì	Street Address					
	5	City	State	ZIP			
		Corporation Commission File Number	Date In-Kind Contribution	Received	•		
		Enter total only if last page of schedule	line 5(a1)		V.		

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

1				r.		
	Labor Organi.	zation Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				The Carry of	, , , , ,
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP	-		
	Corporation Commission File Number	Date in-Kind Contributio	n Received			
	Labor Organization Name					1
	Street Address					
3	Cily	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
4	Cily	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
-	Enter total only if last page of sche			L		

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



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
		Name		Dale In-Kind Contribution Received			
		Street Address					
	1	City	State	ZIP			
		Assel or Property Contributed					
ŀ		Name		Date In-Kind Contribution Received			
1		None		Salo III (III Gostilos Noscita			
		Street Address					
	2	City	State	ZIP			
		Asset or Property Contributed					
ŀ	1	Name		Date In-Kind Continbution Received			
		Street Address					
	3	Sity State ZIP					
		City	JIMIE	ZIF			
		Asset or Property Contributed					
		Name		Date In-Kind Contribution Received			
		Street Address					
	4	City	State	ZIP	-		
		Asset or Property Contributed			•		
-		Name		Date In-Kind Contribution Received			
		INAITHE		Date III-Kind Continuation Received			
		Street Address					
	5	City	State	ZIP			
		Asset or Property Contributed					
-		Enter total only if last page of schedule					
L		transfer the total received this period to "Summary of Receipts."	line 5(i))				

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



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

SCHEDULE A(6)

	Source	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Donation Received			
	Street Address					
1	City	State	ZIP			
	Type of Item Donaled	1		-		
	Name		Dale In-Kind Donation Received			
	Irael Address			1		
2	Cily	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
3	City	Stale	ZIP			
	Type of Ilem Donaled			-		
	Name		Date In-Kind Donation Received			
	Sireet Address		<u></u>			
4	City	State	ZIP			
	Type of Item Donated	Type of Item Donated				
	Name		Date In-Kind Donation Received			
200	Street Address					
5	City	State	ZIP			
	Type of Item Donated					
_	Enter total only if last page of schedule					

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



COMMITTEE ID NUMBER

LIHKG22-1000REREF

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

/		Creditor I	nformation		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name					
		Street Address					
	1	City	State	ZIP			
		Services or Goods Provided on Credit		Date of Extension of Credit			
		Name					
		Standard Standard					
	2	Stroet Address					
	_	City	Slate	ZIP			
		Services or Goods Provided on Credit		Date of Extension of Credit			
İ		Name	Name				
		Street Address					
	3	City	State	ZIP			
	1,000	Services or Goods Provided on Credit		Date of Extension of Credit	-		
		Name					
			varne				
	4	Street Address					
	7	City	State	ZIP			
		Services or Goods Provided on Credit Dale of Extension of Cre		Date of Extension of Credit			
Ì		Namo					
		Street Address			-		
	5	City	State	ZIP	-		
	1,000,00	Services or Goods Provided on Credit		Date of Extension of Credit	-		
		Enter total only if last page of schedule					
		Enter total only if last page of schedule transfer the total received this period to "Summary of Receipts."	tine 7(a))				

Schedule A(7)(a), page___ of ___



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

1				Payment Amount	Cumulative	Cumulative
	Creditor	Information		on Credit Extended	Amount this Reporting Period	Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			e .
	Services or Goods Originally Provided on Credit Date of Original Extension of Original Extension of Original Extension of Original Extension of Original Extension of Original Extension of Original Extension of Original Ex		Date of Onginal Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Onginal Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
_	Name					
	Situat Address					
4	City	State	ZIP			
Į	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
_						
(25)		Name				
5		Breel Address				
	City	State	ZIP			
200	Services or Goods Originally Provided on Credit	Dale of Onginal Extension of Credit				
- 1	Enter total only if last page of schedule					

Schedule A(7)(b), page ___ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED;

SCHEDULE A(8)

/	Payor Comn	nittee Information		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	Cily	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)			
	Committee Name	Payment Date				
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense ((il applicable)			
-	Committee Name		Payment Date			
	Streel Address	Street Address				
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)			
_	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense ([if applicable]	-		
	Committee Name	J	Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)			
	Enter total only if last page of schedule	inter total only if last page of schedule				-
_	ftransfer the total received this period to "Summary of Receipts	_ line 8)				



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor Ir	nformation		Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	Crty	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address	Street Address				
2	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address			_		
2						
	City	Stale	ZIP			
	Services or Goods Purchased	Payment Date				
	Name	lame				
	Street Address					
4	City	State	ZIP	-		
	Services or Goods Purchased		Payment Date			
	Name	Name				
	Streel Address					
5	City	State	ZIP			
	Services or Goods Purchased		Payment Date			



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	/				í	i î	
		Infor	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name					
		Street Address					
1		City	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	1	Name					
		Streel Address					
2	2	City	State	ZIP	,		
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	1	Name					
		Street Address					
3	3	Cily	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	1	Name					
		Street Addross					1
4		City	State	ZIP			
		Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	1	Name					
		Street Address					
5	5	Cily	State	ZIP			
		Type of Account Receivable or Debt Owed	Date that Debt Accrued		56		
-		Enter total only if last page of schedule					
	ı	transfer the total received this period to "Summary of Receipts."	line 10)				

Schedule A(10), page ___ of ___



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Source of Surplus Monies / Recipient of Transterred Debt		
Source of Surplus Monies / Recipiant 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 (Iransfer the total received this period to "Summary of Receipts," line 11)		



MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

,				A11		
		nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	Cily	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Receipt Type		Receipt Date	:		
	Name					
	Street Address					
3	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
4						
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
5	City	State	ZIP	1		
	Raceipt Type		Receipt Date			
	Enter total only if last page of schedule					

Schedule A(12), page ____ of ___



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipient	Information Disbursement Date		Amount F	Paid	Cumulative Amount this Reporting Period	Amount this Election Cycle
	AZ Petition Paritmens LLLCC Street Address				10000		
1	777 E Weldom Awae,, Saurite 228	30			10000		
•	Phoenix	State AZ	25012	Cash		10,0 00 0000	1000
	Type of Operating Expense Paid Ballot measure signatuess	Non-Electoral Purpose?	(PACs and Political Parties Only)	☐ Credit			
I	Name	Disbursement Date					
	Street Address						
2	City	State	ZIP				
	Type of Operating Expense Paid	Non-Electoral Purpose?	(PACs and Political Parties Only)	□ Cash □ Credit			
	Name	Disbursement Date					
3	Street Address			_			
	City	State	ZIP	==			
	Type of Operating Expense Paid	Non-Electoral Purpose?	□ Cash □ Credit				
	Name	Disbursement Date					
	Streel Address	Streel Address					
1	City	State	ZIP				
	Type of Operating Expense Paid		(PACs and Political Parties Only)	☐ Cash☐ Credit			
1	Name	Disbursement Date					
	Street Address						
	City	State	ZIP	☐ Cash			
			(PACs and Political Parties Only)	☐ Credit			
н	Enter total only if last page of schedule					10,000000	
1	transfer the total disbursed this period to "Summary of Disbursem	nents," line 1)				. 5,500000	



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

1	Candidate Comm	ittee Recipient Infor	mation	Amount	Cumulative Amount this	Cumulative Amount this
_	Committee Name	ntoo recorpione miles		Contributed	Reporting Period	
	Streel Address					
1	City	Slate	ZIP			
	Committee ID Number	Dale Contribution Made	J.	☐ Cash☐ Credit		
_	Committee Name					
:	Street Address		=	-		
2	City State ZIP		ZIP	_		
	Committee ID Number	Dale Contribution Made		☐ Cash☐ Credit		
		ber Date Contribution Made		- Orealt		
	Committee Name	la la la la la la la la la la la la la l				
	Street Address					
3	Cily	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made	1	☐ Credit		
	Committee Name	5				
	Street Address				~	
1	City	State	ZIP	-		
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
_	Committee Name					
	Street Address			_		
5			T			
	City	State	ZIP	□ Cash		
	Committee ID Number	Committee ID Number Date Contribution Made		□ Credit		
	Enter total only if last page of schedu					
_	ftransfer the total disbursed this period to "Summary of Dist	oursements," line 2(a))				



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Committee Name	nittee Recipient Inf	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Sirent Address					
_						
1	City	State	ZIP	☐ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		□ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP	ПСоор		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	Committee Name				
	Streel Address					
4	City	State	ZIP	FIGURE		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Committee ID Number Date Contribution Made		□ Cash □ Credit		
-	Enter total only if last page of schedule					

Arizona Secretary of State Revision 02/11/21 (fillable format)



COMMITTEE ID NUMBER

LHC22-DOOREREFEF

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party Recip	pient Information	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name			i iopo inig	
	Street Address				
1	City Sta Committee ID Number Dat	e Contribution Made	☐ Cash☐ Credit		
		O GOMMON MAGO	- Credit		
	Commillee Name				
	Street Address				
2	City	ZIP	□ Cash		
	Committee ID Number Da	le Contribution Made	☐ Credit		
1	Committee Name				
	Street Address				
3	City	ate ZIP	□ Cash		
	Committee ID Number Da	le Contribution Made	☐ Credit		
	Committee Name				
	Street Address				
4	City	ZIP ZIP	□ Cash		
	Committee ID Number Da	te Contribution Made	□ Credit		
	Committee Name				
	Street Address	Street Address			
5	City	zie ZIP	TI Cook		
	Committee ID Number Ds	te Contribution Made	□ Cash □ Credit		
1	Enter total only if last page of schedule				



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partners	ship Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					100
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
	Partnership Name	Partnership Name				
*	Street Address					
3	City	State	State ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Parlnership Name					
	Street Address					
	City	Slate	ZIP			
	Corporation Commission File Number	Date Contribution Ma	ade	□ Cash □ Credit		
1	Partnership Name					
	Street Address					
	City	State	State ZIP			
-	Corporation Commission File Number	Date Contribution Ma	sde	□ Cash □ Credit		
4	Enter total only if last page of sch	andula .				



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
	Corporation/LLC Name			nopoling i olloc	Listini Sysie
	Streel Address				
1	City	State ZIP	□ Cash		
	Corporation Commission File Number	Dale Contribution Made	☐ Credit		
	Corporation/LLC Name				
	Street Address				
2	Cily	State ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	☐ Credit		
	Corporation/LLC Name	<u> </u>			
	Sireel Address				
3	City	State ZIP	☐ Cash		
	Corporation Commission File Number	Dale Contribution Made	☐ Credit		
	Corporation/LLC Name				
	Street Address				
4	City	State ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		
_	Corporation/LLC Name	Corporation/LLC Name			
	Street Address	Street Address			
5	City	State	□ Cash		
	Corporation Commission File Number	Date Contribution Made	□ Credit		
- 1	Enter total only if last page of sch (transfer the total disbursed this period to "Summary				



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Orga	nization Recipient Info	rmation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
3	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mac	e	☐ Credit		
	Labor Organizakon Name					
	Street Address					
2	City	State	ZIP			
3	Corporation Commission File Number	Date Contribution Mai	de	☐ Cash☐ Credit		
	Labor Organization Name					
3	Street Address					
	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	de	☐ Credit		
	Labor Organization Name					
	Street Address					
1	Cily	State	ZIP			
	Corporation Commission File Number	Date Contribution Mad	de	□ Cash □ Credit		
	Labor Organization Name	! ;				
	Street Address					
5	Cily	State		F 0		
	Corporation Commission File Number Date Contribution Made		□ Cash □ Credit			
1	Enter total only if last page of scl	nedule				

Schedule B(2)(f), page ____ of ___



CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

/	/		r Information	Tour	Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Committee Name		Date Refund Received			
		Street Address					
'	1	City	State	ZIP			
		Committee ID Number		Date of Original Contribution			
		Committee Name		Date Refund Received			
	Ì	Street Address		<u></u>	-		
2	2	City	State	ZIP			
		Committee ID Number		Dale of Original Contribution			
		Committee Name		Date Relund Received			
		Street Address					
3	3	City	State	ZIP			
		Committee ID Number		Date of Onginal Contribution			
-	1	Committee Name		Date Refund Received			
		Street Address					
4	1	City	Slate	ZIP			
		Committee ID Number	1	Date of Onginal Contribution			
	+	Committee Name		Date Refund Received			
		Street Address		1.	-		
5	5	Cily	State	ZIP			
		Committee ID Number		Dale of Onginal Contribution			
-	1	Enter total only if last page of schedule					
		transfer the total disbursed this period to "Summary of Disburser	nents," line 2(h))				

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



LOANS MADE:

SCHEDULE B(3)(a)

/.	/	Borrower	Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Borrower Name	Borrowar Name				
		Elrool Address					
	1	City	State	ZIP			
		Guarantor/Endorser Name	Date Loan Made				
1		Borrower Name					
		Street Address					
	2	City	State	ZIP			
		Guarantor/Endorser Name	Date Loan Made				
		Borrower Name					
		Streel Address					
	3	City	State	ZIP			
		Guaranlor/Endorser Name	Date Loan Made				
Ì		Borrower Name					
		Street Address					
	4	City	State	ZIP			
		Guarantor/Endorser Name	Date Loan Made				
		Borrower Name					
		Street Address					
	5	City	State	ZIP			
		Guarantor/Endorser Name	Date Loan Made				
	- 1	Enter total only if last page of schedule					
. I	- 1	transfer the total received this period to "Summary of Receipts,"	line 3)				

Schedule B(3)(a), page ____



LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

/		r Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Streel Address			e e		
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
-	Guarantor Name	la .				
	Street Address					
2	City	State ZIP				
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Barrower Name	Dale Loan Guaranteed				
	Guarantor Name					
	Street Address					
4	City	State	ZIP			
	Borrower Name	Dale Loan Guaranleed				=
	Guarantor Name	J				
	Streel Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule	line 3(b))				

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



FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

Borrowei	e laformation			Cumulative	Cumulative
	riniormation		Amount Forgiven	Amount this Reporting Period	Amount this Election Cycle
Borrower Name		Dale Forgiveness Made			
Stroet Address					
City	Slate	ZIP	1		
Original Amount of Loan	Arnount Still Outstanding				
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding		-		
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outstanding				
Borrower Name		Date Forgiveness Made			
Street Address					
City	State	ZIP			
Original Amount of Loan	Amount Still Outslanding				
Borrower Name		Date Forgiveness Made			
Street Address			_		
Dity	State	ZIP	-		
Original Amount of Loan	Amount Still Outstanding		-		
E S	Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address City Original Amount of Loan Borrower Name Street Address Street Address Street Address	Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Borrower Name Street Address City State Original Amount of Loan Amount Still Outstanding Street Address Street Address Street Address Street Address Street Address Street Address Street Address Street Address	Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZIP Original Amount of Loan Amount Still Outstanding Borrower Name Date Forgiveness Made City State ZIP Original Amount of Loan Amount Still Outstanding Date Forgiveness Made City State ZIP Original Amount of Loan Amount Still Outstanding Date Forgiveness Made City State ZIP Original Amount of Loan Amount Still Outstanding Date Forgiveness Made Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Date Forgiveness Made	Street Address City State Zir Original Amount of Loan Amount Stat Outstanding Borrower Name Date Forgiveness Made City State Zir Original Amount of Loan Amount State Outstanding Borrower Name Date Forgiveness Made City State Zir Onlife Forgiveness Made Zire Date Forgiveness Made Date Forgiveness Made Date Forgiveness Made City State Zire Onlife Forgiveness Made Date Forgiveness Made Date Forgiveness Made City State Zire Onlife Forgiveness Made Date Forgiveness Made Date Forgiveness Made	Silved Address City State City State City State City State City City State City City State City City State City City State City City State City City City City City City City City

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



REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

1		Lender Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Γ	Lender Name		Date Repayment Made			
	Streel Address					
1	1 City	Slate	ZIP			
	Original Amount Borrowed	Amount Still Outstand	ling			
F	Lender Name		Date Repayment Made			
	Street Address					
2	2 City	State	ZIP			
	Original Amount Borrowed	Amount Still Outsland	ling	-		
F	Lender Name		Date Repayment Made			
	Streel Address	Street Address				
3	3 City	Stale	ZIP	-		
	Original Amount Borrowed	Amount Still Outstand	ding			
-	Lender Name		Date Repayment Made			
	Street Address			\dashv		
4	4 City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outsland	Sing			
-	Lender Name		Date Repayment Made			
	Sireel Address					
5		State	ZIP			
	Original Amount Borrowed	Amount Still Outstand				
	Онутки мноши оштомеа	miouni Siii Oulsiand	any			
	Enter total only if last page of	schedule				

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



INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

_		Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
ı	Short Address		(F)	_		
1	Strool Addroop					
1	Cily	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding			1	
	Lender Name		Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address					
3	Cily	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
r	Lender Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP	-		
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name	1.	Date Interest Accrued			
	Streel Address					
5	Cily	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule					
_	transfer the total disbursed this period to "Summary of Disburses	ments," line 3(e))				

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	-	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Dale Rebate/Refund Made			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
_	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
2	Cily	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Retund Made			
	Street Address		<u></u>	-		
3	City	Slate	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	-		
_	Name of Onginal Payor		Date Rebate/Refund Made			
	Streel Address			-		
4	City	State	ZIP	-		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Addrass					
5	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	-		

Schedule B(4), page ____ of



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate Commit	tee Recipient Infor	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Strool Addross			_		
1	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address	-				
2	Cily	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address					
3	Cily	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Streel Address	-				
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	ı Made			
	Committee Name					
5	Street Address	•	•			
J	City	Slate	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
- 1	Enter total only if last page of schedule	L Enter total only if last page of schedule				
_	(transfer the total disbursed this period to "Summary of Disburs	ements." line 5(a))				

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES;

SCHEDULE B(5)(b)

/	/	Political Action Commit	tee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ı		Committee Name					
		Street Address					
	1	City	State	ZIP			
	İ	Committee ID Number	Date In-Kind Contribution I	I Made			
r		Committee Name	L				
		Street Address	e:				
2	2	City	State	ZIP	,		
	İ	Committee ID Number	Date In-Kind Contribution	Made			
-		Committee Name					
		Street Address				2	
3	3	City	State	ZIP			
١		Committee ID Number	Date In-Kind Contribution	Made			i a
=	+	Committee Name					
		Street Address					
4	4	City	State	ZIP	-		
		Committee ID Number	Dale In-Kind Contribution	Made			
-	+	Committee Name					
		Street Address					
5	5	City	State	ZIP			
		Committee ID Number	Date In-Kind Contribution	Made			
-		Enter total only if last page of schedule			I		
		(transfer the total disbursed this period to "Summary of Disburse	ments." line 5(b))				

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

1						
		Recipient Informat	ion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address		-			
1	City	Stale	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
-	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name	1				
	Street Address					
3	City	Stale	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	-				
	Streel Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule	ements ! lies 5(-1)				
_	Denot to Cuminary Of Disburs	omorito into JIDN				

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partnershi	p Recipient Informatio	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
	Partnership Name	J.				
	Street Address	-				
2	City	State	ZIP			
	Corporation Commission File Number	Dale In-Kind Continbutio	n Made			
	Partnership Name					
	Street Address		-			
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributio	n Made			
r	Partnership Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Dale In-Kind Contributio	n Made	1		
	Partnership Name					
	Street Address	Street Address				
5	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	n Made	-		
-	Enter total only if last page of sche					

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	LLC Recipient Infor	mation	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 Contributi	on Made			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Dale In-Kind Contribut	ion Made			
	Corporalion/LLC Name					
	Streel Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribut	ion Made			
	Corporation/LLC Name					
	Stroot Addrosa					
1	City	State	ZIP			
	Corporation Commission File Number	Dale In-Kind Contributi	ion Made			
1	Corporation/LLC Name					
	Streel Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributi	on Made			
+	Enter total only if last page of sche	dule				



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organ	ization Recipient Inform	nation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Made			
	Labor Organization Name					
	Street Address					
2	City	Stale	ZIP		-	
	Corporation Commission File Number	Date In-Kind Contribution	on Made			
-	Labor Organization Name	<u> </u>				
	Street Address			_		
3	City	Stale	ZIP			
	Corporation Commission File Number	Dale Iп-Kind Contribution	on Made	[#]		
	Labor Organization Name					
	Street Address					
4	City	Stale	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	on Made			
_	Labor Organization Name					
	Street Address					
5	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	on Made	_		
_	Enter total only if last page of sch	edule				
_	(transfer the total disbursed this period to "Summary of					

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



INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

/	Expenditure	Recipient Informa	tion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name	Mode of Advertising (TV, mail, etc)				
	Straol Addross					
1	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	_ ☐ Cash		
	Date of First Publication, Display, Dalivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address	1				
2	City	Stale	ZIP	1		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	icluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
3	City	State	ZIP			
	Candidale(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
4	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	cluding % opposed)	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		

Schedule B(6), page ___ of ___



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Recipient Information		Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address					
City	State	ZIP			
Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)	☐ Cash		
Dale of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address			-		
City	Stale	ZIP	-		
Ballot Measure(s) Supported (including % supported)	oported) Ballot Measure(s) Opposed (including % opposed)		□ Cash		
Dale of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address					
Cily	State	ZIP			
Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % apposed)	☐ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Broadcasi Election Month/Year		_ Li Credit		
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address					
City	State	ZIP			
Ballol Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)		☐ Cash		
	Election Month/Year		☐ Credit	χ.	
	Expenditure Recipient Name Street Address City Ballot Measure(s) Supported (including % supported) Date of First Publication, Display, Delivery, or Broadcast Street Address City Ballot Measure(s) Supported (including % supported) Date of First Publication, Display, Delivery, or Broadcast Recipient Name Street Address City Ballot Measure(s) Supported (including % supported) Date of First Publication, Display, Delivery, or Broadcast Recipient Name Street Address City Ballot Measure(s) Supported (including % supported) Cate of First Publication, Display, Delivery, or Broadcast Recipient Name Street Address City Ballot Measure(s) Supported (including % supported)	Recipient Name Street Address City State Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed Date of First Publication, Display, Delivery, or Broadcast Election Month/Year Recipient Name Street Address City State Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed Date of First Publication, Display, Delivery, or Broadcast Election Month/Year Recipient Name Street Address City State Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed Date of First Publication, Display, Delivery, or Broadcast Election Month/Year Recipient Name Street Address City State Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed Recipient Name Street Address City State State	Street Address City Slate ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Receptent Name Mode of Advertising (TV, mail, etc) Street Address City Slate ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Date of First Publication, Display, Delivery, or Broadcast Election Month/Year Recipient Name Mode of Advertising (TV, mail, etc) Street Address City Slate ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) City Slate ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Street Address City Slate ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Mode of Advertising (TV, mail, etc) Street Address	Amount Recipient Name Mode of Advertising (TV, mail, etc)	Expenditure Recipient Information Mode of Advertising (TV, mail, etc)



RECALL EXPENDITURES MADE:

SCHEDULE B(8)

Expenditure	Recipient Informat	ion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient Name		Mode of Advertising (TV, mail, etc)			
Stroot Addross					
City	State	ZIP			
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled	☐ Cash		
Dale of First Publication, Display, Delivery, or Broadcast	Office Held		- ☐ Credit		
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address			-		
City	State	ZIP	-		
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled	☐ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ □ Credit		
Recipient Name	JI.	Mode of Advertising (TV, mail, etc)			
Street Address					
City	S(ate	ZIP			
Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	ecalled	□ Cash		
Dale of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
Recipient Name		Mode of Advertising (TV, mail, etc)			
Street Address			-		
City	State	ZIP			
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Rec		called	☐ Cash		
Date of First Publication, Display, Delivery, or Broadcast	Office Held		☐ Credit		
	Recipient Name Stroot Addross City Supporting or Opposing Issuance of Recall Order? Date of First Publication, Display, Delivery, or Broadcast Recipient Name Street Address City Supporting or Opposing Issuance of Recall Order? Date of First Publication, Display, Delivery, or Broadcast Recipient Name Street Address City Supporting or Opposing Issuance of Recall Order? Date of First Publication, Display, Delivery, or Broadcast Recipient Name Street Address City Supporting or Opposing Issuance of Recall Order? Street Address City Supporting or Opposing Issuance of Recall Order? Date of First Publication, Display, Delivery, or Broadcast Enter total only if last page of schedule	Recipient Name Stroat Addross City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Street Address City State Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name Street Address City State Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recipient Name	Stroot Audirose City Statio ZIP Supporting or Opposing Issuance of Rocall Order? Candidate Sought to be Recelled Date of First Publication, Display, Delivery, or Broadcast City State Address City State Address City State Opposing Issuance of Rocall Order? Candidate Sought to be Recelled Date of First Publication, Display, Delivery, or Broadcast Office Held Supporting or Opposing Issuance of Rocall Order? Candidate Sought to be Recelled Date of First Publication, Display, Delivery, or Broadcast Office Held Street Address City State ZIP Supporting or Opposing Issuance of Rocall Order? Candidate Sought to be Recelled Date of First Publication, Display, Delivery, or Broadcast Office Held Street Address City State ZIP Supporting or Opposing Issuance of Rocall Order? Candidate Sought to be Recelled Date of First Publication, Display, Delivery, or Broadcast Office Held Recipient Name Mode of Advertising (TV, mail, etc) Street Address City State ZIP Supporting or Opposing Issuance of Rocall Order? Candidate Sought to be Recelled Date of First Publication, Display, Delivery, or Broadcast Office Held City State ZIP Supporting or Opposing Issuance of Recell Order? Candidate Sought to be Recelled Date of First Publication, Display, Delivery, or Broadcast Office Held Enter total only if last page of schedule	Amount Recipient Name Mede of Advertising (TV, mail, etc.)	Expenditure Recipient Information Recover Name Suice ZP

Schedule B(8), page ___ of ___



SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/	Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided			
	Street Address	reet Address				
1	City	State	ZIP			
	Type of Benefit Provided					
	Noles:					
	Candidate Name		Date Benefit Provided			
	Streel Address					
2	City	State	ZIP			
	Type of Benefil Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
3	Gity	State	ZIP			
	Type of Benefit Provided			·		
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
4	City	State	ZIP			
	Type of Benefit Provided	l.				
	Notes:					
	Enter total only if last page of schedule	<u> </u>				
	(transfer the total disbursed this period to "Summary of Disbu					

Schedule B(9), page ___ of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient	Committee Informa	ation	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Stroot Addroop					
1	City	State	ZIP	T 0		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
2	City	Stale	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expe	ense (if applicable)	□ Cash □ Credit		
	Committee Name		Payment Dale			
	Street Address					
3	City	State	ZIP	15 mg 44		
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense of Shared Ex		anse (if applicable)	□ Cash □ Credit		
	Committee Name	Payment Date				
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (ense (if applicable)	☐ Cash☐ Credit		
	Committee Name		Payment Date			
5	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if		nse (if applicable)	□ Cash □ Credit		
	Enter total only if last page of sched					

Schedule B(10), page ___ of ___



REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipie	nt Information	1	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Name				
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	Reimbursement Date	☐ Credit			
	Name					
	Street Address					
2	City	Slate	ZIP			
	Services or Goods Reimbursed		Reimbursement Dale	□ Cash □ Credit		
	Name					
	Street Address					
3	City State		ZIP			
	Services or Goods Raimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City State ZIP					
			Reimbursement Date	☐ Cash☐ Credit		
	Services or Goods Reimbursed Reimbursement C			L Gredit		
	Name					
_	Street Address					
5	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed Reimbursement Date			☐ Credit		
	Enter total only if last page of schedule			<u> </u>		
	(transfer the total disbursed this period to "Summary of Disbur	sements," line 11)				



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

. 3						
		ebt Information		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address	Street Address				
1	City	State	ZIP			
	Type of Account Payable or Dabl Owed	I	Dale thal Debl Accrued			
_	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address	-				
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
	Name					
	Streat Address	_				
4	City	State	ZIP	_		
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		
	Name					
	Street Address			-		
5	City	State	ZIP	_		
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
-						
	Enter total only if last page of sche (transfer the total received this period to "Summary of R					



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		
Racipient of Surplus Monros / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		â —
Total (transfer the total disbursed this period to "Summary of Disbursements," line 14)		

Schedule A(13), page ____ of ____



MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

		Information	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address				
1	City	ZIP	□ Cash		
	Disbursement Type	Disbursement Date	☐ Credit		
	Name				
2	Street Address City	ZIP			
200	Disbursement Type	Disbursement Date	☐ Cash☐ Credit		
_	Name				
	Street Address				
3	City	ZIP	_		
	Disbursement Type	Disbursement Date	☐ Cash☐ Credit		
	Name				
	Street Address				
4	City	ZIP	□ Cash		
	Disbursement Type Disbursement Date		□ Credit		
	Name				
5	Street Address City				
	Disbursement Type	State ZIP Disbursement Date	☐ Cash☐ Credit		
	Enter total only if last page of schedule				
- 0	(transfer the total disbursed this period to "Summary of Disburser	nents," line 12)			