COMMITTEE INFORMATION	ITTEE INFORMATION (required): Committee Information: Committee Name: DATE INFORMATION (only if filing as a condidate committee):							
Committee Information	n: Committee Name:							
CANDIDATE INFORMATIO	N (only if filing as a candidate committee):							
Office Sought:	☐ County Office:	☐ Special District Office:						
	☐ City/Town Office:	☐ School Board District:						

Cumulative Report:

☐ Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.

Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below): _

REPORTING PERIOD (check one):

REPORTING PERIOD	REPORT DUE
2025 August Post-Election (Q3) Report (Local Only): July 20, 2025 to September 30, 2025	October 1, 2025 to October 15, 2025
2025 Quarter 3 Report: July 1, 2025 to September 30, 2025	October 1, 2025 to October 15, 2025
2025 November PAC Pre-Election Report (Election in Qtr): October 1, 2025 to October 18, 2025	October 19, 2025 to October 20, 2025
2025 November PAC Post-Election (Q4) Report (Election in Qtr): October 19, 2025 to December 31, 2025	January 1, 2026 to January 15, 2026
2025 Quarter 4 Report: October 1, 2025 to December 31, 2025	January 1, 2026 to January 15, 2026
2025 Annual (Cumulative) Report (Local Candidates)*: January 1, 2025 to December 31, 2025	January 1, 2026 to January 15, 2026
2026 March PAC Pre-Election Report (Election in Qtr): January 1, 2026 to February 21, 2026	February 22, 2026 to February 23, 2026
2026 Post-Primary Election Report (Local March Candidates): January 1, 2026 to March 10, 2026	March 11, 2026 to March 25, 2026
2026 March PAC Post-Election (Q1) Report (Election in Qtr): February 22, 2026 to March 31, 2026	April 1, 2026 to April 15, 2026
2026 Quarter 1 Report (Local March Candidates): March 11, 2026 to March 31, 2026	April 1, 2026 to April 15, 2026
2026 Quarter 1 Report: January 1, 2026 to March 31, 2026	April 1, 2026 to April 15, 2026
2026 May PAC Pre-Election Report (Election in Qtr): April 1, 2026 to May 2, 2026	May 3, 2026 to May 4, 2026
2026 May PAC Post-Election (Q2) Report (Election in Qtr): May 3, 2026 to June 30, 2026	July 1, 2026 to July 15, 2026
2026 Quarter 2 Report: April 1, 2026 to June 30, 2026	July 1, 2026 to July 15, 2026
2026 August PAC Pre-Election Report (Election in Qtr): July 1, 2026 to July 18, 2026	July 19, 2026 to July 20, 2026
2026 August Post-Primary Election Report (State/Local Aug Candidates): July 1, 2026 to Aug 4, 2026	August 5, 2026 to August 19, 2026
2026 August PAC Post-Election (Q3) Report (Election in Qtr): July 19, 2026 to September 30, 2026	October 1, 2026 to October 15, 2026
2026 Quarter 3 Report (State/Local Aug Candidates): August 5, 2026 to September 30, 2026	October 1, 2026 to October 15, 2026
2026 Quarter 3 Report: July 1, 2026 to September 30, 2026	October 1, 2026 to October 15, 2026
2026 November PAC Pre-Election Report: October 1, 2026 to October 17, 2026	October 18, 2026 to October 19, 2026
2026 November Post-Primary Election Report (Local Nov Candidates)**: Oct. 1, 2026 to Nov. 3, 2026	November 4, 2026 to November 18, 2026
2026 November PAC Post-Election (Q4) Report: October 18, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
2026 Quarter 4 Report (Local Nov Candidates)**: November 4, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
2026 Quarter 4 Report: October 1, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
2026 Annual (Cumulative) Report (Local Candidates)*: January 1, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

*Excluding local candidates who reported in their general election year.

**Applies to charter cities that allow candidate primary elections on November election date.

COMMITTEE	ΙD	NUMBER
COMMINITIES	יייי	NOMBELL



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)		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)		
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)		
(d) = Balance at close of reporting period		
☐ Check here if filing <u>no</u> financial activity during the reporting period. <i>Lines (a)-(d) must still</i> following signed certification page need to be filed.	be completed, but only the	is cover page and the

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity. Arizona Secretary of State Revision 10/30/2025

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.

committee treasurer under penalty correct.	of perjury that the contents of the re	port are true and
By filing this report, you certify the contents of this report, and the con	at, under penalty of perjury, you ha itents are true and correct.	ve examined the
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1.	Monetary Contributions Received		
	(a) In-State Individuals - More than \$100		
	(b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committees		
	(e) Political Action Committees		
	(f) Political Parties		
	V/		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Monies (Candidate Committees Only)		
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		
	(I) Refunds Given Back to Contributors		
	(m) Net Monetary Contributions (subtract 1(I) from 1(k))		
2.	Loans		
	(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))		
2			
3.	Rebates and Refunds Received		
4. 5.	Interest Accrued on Committee Monies In-Kind Contributions Received		
J.			
	(a) In-State Individuals - More than \$100 (b) In-State Individuals - \$100 or Less (Aggregate)		
	(c) Out-of-State Individuals		
	(d) Candidate Committees		
	(e) Political Action Committees		
	(f) Political Parties		
	(g) Partnerships		
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)		
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7.	Extensions of Credit		
	(a) Extensions of Credit Received		
	(b) Payments on Extensions of Credit Received		
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8.	Joint Fundraising / Shared Expense Payments Received		
9.			
	Payments Received for Goods / Services Outstanding Accounts Received / Debts Owed to Committee		
	<u> </u>		
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
	Miscellaneous Receipts (use cash and/or equity asapplicable)		1
13.	Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)	<u> </u>	<u> </u>

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))		
	(h) Contribution Refunds Provided to the Reporting Committee		
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3.	Loans		
	(a) Loans Made		
	(b) Loan Guarantees Made		
	(c) Forgiveness on Loans Made		
	(d) Repayment of Loans Received		
	(e) Accrued Interest on Loans Received		
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 3(b) & 3(c))		
4.	Rebates and Refunds Made (Non-Contributions)		
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		
	(b) Political Action Committees		
	(c) Political Parties		
	(d) Partnerships		
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
	(f) Labor Organizations (PAC & Political Parties Only)		
	(g) Contributions Subtotal (add 5(a) through 5(f))		
6.	Independent Expenditures Made		
7.	Ballot Measure Expenditures Made		
8.	Recall Expenditures Made		
9.	Support Provided to Party Nominees (Political Parties Only)		
10.	Joint Fundraising / Shared Expense Payments Made		
11.	Reimbursements Made		
12.	Outstanding Accounts Payable / Debts Owed by Committee		
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14.	Miscellaneous Disbursements		
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(g), & 12-15)		



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

SCHEDULE A(1)(a)

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

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

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

COMMITTEE ID NUMBER

MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from In-State Individuals - \$100 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))		

^{*}If in-state individual contributions of more than \$100 are listed on Schedule A(1)(a), do not include them.

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



MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

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

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



MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

	Candidate Committee	Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address			<u> </u>		
2		T				
_	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u>I</u> ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u> </u> ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u> </u>			
	Enter total only if last page of schedule (transfer the total received this period to "Sum					

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



MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

	Political Action Commit	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	d			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
5		1				
-	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	manu of December 111	ino 4(a))	I		
	ruansier the total received this period to Sum	mary or neceipis, I	IIIC 1(C))			

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



MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

/						
	Political Party Co	ntributor Informat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed	-		
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Committee Name					
	Street Address					
5						
	City	State	ZIP			
	Committee ID Number Date Contribution Received					_
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(f))			

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



MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	-		
	Sky	Suite				
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
2	City	State	ZIP	<u> </u>		
	City	State	ZIF			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
3	City State ZIP			<u> </u>		
	Gity	State	ZIF			
	Corporation Commission File Number	Date Contribution Receive	ed			
-	Partnership Name					
	Street Address			-		
4	City	State	ZIP	<u> </u>		
	City	State	ZIF			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name Street Address					
			_			
5				-		
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
-	Enter total only if last page of schedule (transfer the total received this period to "Sum	l		<u> </u>		
	(transfer the total received this period to "Sum	mary of Receipts," I	line 1(g))			

Schedule A(1)(g), page___ of ___



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC Contributor Information				Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed	-		
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Corporation/LLC Name					
	Street Address			-		
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sui					
	(transfer the total received this period to "Sui	nmary of Receipts,"	line 1(h))			

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organization	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Labor Organization Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	I ed			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed	-		
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Labor Organization Name	Labor Organization Name				
	Street Address					
5	City	City State ZIP				
	Corporation Commission File Number	Date Contribution Receive	ed			
	Enter total only if last mage of eah - dul-					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 1(i))			

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

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

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	Contribut	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Refunded			-
	Street Address					
1	City	State	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 Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Street Address					
5	City	State	ZIP			
J	İ					

Schedule A(1)(I), page____ of___



LOANS RECEIVED: SCHEDULE A(2)(a)

Lender I	nformation		1	Cumulative	Cumulative
	monnation		Amount Received	Amount this Reporting Period	Amount this Election Cycle
Lender Name	Date Loan Received				
Street Address					
City	State	ZIP			
Guarantor/Endorser Name		PACs and Political Parties Only)			
Lender Name	Date Loan Received				
Street Address					
City	State	ZIP			
Guarantor/Endorser Name		PACs and Political Parties Only)			
Lender Name	Date Loan Received				
Street Address					
City	State	ZIP			
Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)				
Lender Name	Date Loan Received				
Street Address					
City	State	ZIP			
Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)		-		
Lender Name	Date Loan Received				
Street Address					
City	State	ZIP			
Guarantor/Endorser Name		PACs and Political Parties Only)			
	Guarantor/Endorser Name Lender Name Street Address City Guarantor/Endorser Name Lender Name Street Address City Guarantor/Endorser Name Lender Name Lender Name Lender Name Street Address City Guarantor/Endorser Name Lender Name Street Address City Guarantor/Endorser Name Lender Address City Guarantor/Endorser Name	City State Guarantor/Endorser Name Non-Electoral Purpose? (Lender Name Date Loan Received Street Address City State Guarantor/Endorser Name Non-Electoral Purpose? (Lender Name Date Loan Received Street Address City State Guarantor/Endorser Name Non-Electoral Purpose? (Lender Name Date Loan Received Street Address City State Guarantor/Endorser Name Non-Electoral Purpose? (City State Street Address City State City State City State City State Street Address City State Street Address Street Address Street Address Street Address Street Address	City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Date Loan Received Street Address	City State ZIP Guarantor/Endorser Name Non-Electoral Purpose? (PACs and Political Parties Only) Lender Name Date Loan Received Street Address City State ZIP Guarantor/Endorser Name Date Loan Received Street Address City State ZIP City State ZIP Guarantor/Endorser Name Non-Electoral Purposer? (PACs and Political Parties Only) Carder Name Date Loan Received	

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



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

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

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



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

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

Schedule A(2)(c), page____ of____

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

	Borrower	Information		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	<u> </u>	Date Interest Accrued			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		_		
	Borrower Name		Date Interest Accrued			
	Street Address			_		
4	City	State	ZIP	<u> </u>		
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	l	Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		-		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 2(d))			

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



REBATES AND REFUNDS RECEIVED: SCHEDULE A(3)

	Payor II	nformation		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	9			
	Payor Name	I	Date Rebate/Refund Received			
	Street Address					
2	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Payor Name		Date Rebate/Refund Received			
	Street Address		<u> </u>			
3	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Payor Name		Date Rebate/Refund Received			
	Street Address					
4	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	<u> </u>			
	Payor Name	<u> </u>	Date Rebate/Refund Received			
	Street Address		<u> </u>			
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate	9			
	Enter total only if last page of schedule (transfer the total received this period to "Sum		·· 2)			
	(transier the total received this period to "Sum	mary of Receipts," I	ine o)			

Schedule A(3	B), page	of

COMMITTEE ID NUMBER

INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

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

Schedule A(4), page____ of ____



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

SCHEDULE A(5)(a)

Individual Contributor Information Name							
Name Street Address		Individual Contr	ributor Informatio	n	Amount Received	Amount this	Cumulative Amount this Election Cycle
Date Part Date Date		Name		Date In-Kind Contribution Received			-
Occupation Rame Date In-Kind Contribution Received City State ZIP Occupation Employer Date In-Kind Contribution Received Street Address City State ZIP Occupation Employer Date In-Kind Contribution Received Street Address City State ZIP Occupation Employer Date In-Kind Contribution Received Street Address Temployer Date In-Kind Contribution Received Employer Date In-Kind Contribution Received Street Address A City State ZIP Occupation Employer Date In-Kind Contribution Received		Street Address		<u> </u>	-		
Name Date In-Kind Contribution Received Street Address 2 City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address 3 City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address 4 City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address 4 City State ZIP Occupation Employer	1	City	State	ZIP	-		
Siteet Address City State ZIP Occupation Employer Name Oate In-Kind Contribution Received Siteet Address City State ZIP Occupation Employer Occupation Employer Aname Oate In-Kind Contribution Received Siteet Address City State ZIP Occupation Employer Date In-Kind Contribution Received Siteet Address City Occupation Employer Occupation Employer Date In-Kind Contribution Received Siteet Address A Date In-Kind Contribution Received Siteet Address Date In-Kind Contribution Received		Occupation	Employer				
City State ZIP Occupation Employer Date In-Kind Contribution Received Street Address City State ZIP Occupation Employer Date In-Kind Contribution Received Street Address 4 City State ZIP Occupation Employer Date In-Kind Contribution Received Employer Date In-Kind Contribution Received Employer Date In-Kind Contribution Received Street Address 4 City State ZIP Occupation Employer		Name	<u> </u>	Date In-Kind Contribution Received			
Name Date In-Kind Contribution Received		Street Address		<u> </u>	-		
Name Date In-Kind Contribution Received	2	City	State	ZIP	-		
Street Address City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address City State ZIP Occupation Employer Date In-Kind Contribution Received Street Address Street Address Date In-Kind Contribution Received		Occupation	Employer		-		
State		Name		Date In-Kind Contribution Received			
Occupation Employer Name Date In-Kind Contribution Received Street Address City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address Employer Date In-Kind Contribution Received Street Address Date In-Kind Contribution Received		Street Address	-				
Name Date In-Kind Contribution Received Street Address City State ZIP Occupation Employer Date In-Kind Contribution Received Street Address Street Address	3	City	State	ZIP	-		
Street Address City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address		Occupation	Employer		_		
City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address		Name		Date In-Kind Contribution Received			
City State ZIP Occupation Employer Name Date In-Kind Contribution Received Street Address		Street Address			_		
Name Date In-Kind Contribution Received Street Address	4	City	State	ZIP	-		
Street Address		Occupation	Employer		-		
		Name		Date In-Kind Contribution Received			
5 City State ZIP		Street Address					
	5	City	State	ZIP	-		
Occupation Employer		Occupation	Employer		_		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(a))		Takan kakal amba ifi lash wa wa afa aba ba					

 * If in-kind contributions of \$100 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Schedule A(5), page____ of ___

COMMITTEE ID NUMBER

IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - \$100 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$100 or Less		
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5 (b))		

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

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



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

SCHEDULE A(5)(c)

/	Individual Contr	ibutor Information	1	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			I.
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			i.
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sumr	I nary of Receipts," lir	ne 5(c))			

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

Candidate Committee	Contributor Infor	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name					
Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution I	Received			
Committee Name					
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 Name					
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			
Enter total only if last page of schedule					
	Committee Name Street Address City Committee ID Number Street Address City Committee ID Number Committee Name Street Address City Committee ID Number Street Address City Committee Name Street Address City Committee ID Number Committee ID Number	Street Address City State Committee ID Number Date In-Kind Contribution I Committee ID Number Date In-Kind Contribution I Street Address City State Committee ID Number Date In-Kind Contribution Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Street Address City State Committee ID Number Date In-Kind Contribution Street Address City State Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Street Address City State Committee ID Number Date In-Kind Contribution 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 Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Received 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 Street Address Street Address Street Address Street Address Street Address	Silvest Address City Slate ZIP Committee Name Sireet Address City Slate ZIP Committee Name Sireet Address City Slate ZIP Committee ID Number Date in-Kind Contribution Received Committee Name Silvest Address City Slate ZIP Committee Name Silvest Address City Slate ZIP Committee Name Silvest Address City Slate ZIP Committee ID Number Date in-Kind Contribution Received Committee ID Number 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	Camrittee Name Street Address Chy State ZP Committee 1D Number Date in-Kind Contribution Received Committee Name Street Address Cry State ZP Committee Name Street Address Cry State ZP Committee Name Street Address Cry State ZP Committee ID Number Date in-Kind Contribution Received Committee Name Street Address Cry State ZP Committee ID Number Date in-Kind Contribution Received	

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

	Political Action Commit	tee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number					
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	ttee ID Number Date In-Kind Contribution Received				
	Committee Name					
Street A	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address			-		
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
_	Enter total only if last page of schedule					

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

Political Party Con	ntributor Informat	ion	Amount Received	Cumulative Amount this	Cumulative Amount this
				Reporting Period	Election Cycle

Street Address					
City	State	ZIP			
Committee ID Number	Date In-Kind Contribution I	I Received			
Committee Name					
Street Address					
Sity	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Received			
Committee Name					
Street Address					
Sity	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 Name					
Street Address					
Sity	State	ZIP			
Committee ID Number	Date In-Kind Contribution	Received			
	treet Address ity committee ID Number committee Name treet Address ity committee ID Number committee Name treet Address ity committee Name treet Address ity committee ID Number treet Address State Date In-Kind Contribution Committee ID Number Date In-Kind Contribution Date In-Kind Contribution Committee ID Number Date In-Kind Contribution Committee Name State Date In-Kind Contribution Committee ID Number Date In-Kind Contribution Committee ID Number Date In-Kind Contribution Committee Name Treet Address State Date In-Kind Contribution Committee Name Treet Address Date In-Kind Contribution Committee Name Treet Address Date In-Kind Contribution Date In-Kind Contribution	treet Address ity State ZIP committee ID Number Date In-Kind Contribution Received committee Name ity State ZIP committee ID Number Date In-Kind Contribution Received committee ID Number Date In-Kind Contribution Received committee Name ity State ZIP committee Name treet Address ity State ZIP committee ID Number Date In-Kind Contribution Received committee ID Number Date In-Kind Contribution Received committee Name treet Address ity State ZIP	treet Address State ZIP Committee ID Number Date In-Kind Contribution Received State ZIP State ZIP Committee ID Number Date In-Kind Contribution Received State ZIP Committee ID Number Date In-Kind Contribution Received State ZIP Committee ID Number Date In-Kind Contribution Received State ZIP Committee ID Number Date In-Kind Contribution Received	Itreed Address State ZIP committee ID Number Date In-Kind Contribution Received ZIP ammittee ID Number Date In-Kind Contribution Received ZIP committee ID Number Date In-Kind Contribution Received ZIP committee ID Number Date In-Kind Contribution Received ZIP committee Name ZIP committee ID Number Date In-Kind Contribution Received ZIP committee ID Number Date In-Kind Contribution Received	

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

,						
	Partnership Con	tributor Informatio	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name				. 0	,
	Street Address			-		
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
	Partnership Name					
	Street Address			_		
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
	Partnership Name					
	Street Address					
4	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
	Partnership Name					
	Street Address			-		
5	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	_		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Receipts " I	line 5(a))			
	Land of the total received this period to odin	, o	3(9//			

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



IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation / LLC	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				r toper mig r energ	
	Street Address			1		
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received	1		
	Corporation/LLC Name	·				
	Street Address			-		
2	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Corporation/LLC Name					
	Street Address	-				
3	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Corporation/LLC Name					
	Street Address			-		
4	City	State	ZIP	-		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Corporation/LLC Name	ı				
	Street Address	1				
5	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts," I	line 5(h))			

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organizati	on Contributor Inform	mation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					·
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	n Received			
	Enter total only if last page of school	ام				
	Enter total only if last page of schedu (transfer the total received this period to "S	Summary of Receipts,"	line 5(i))			

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



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

SCHEDULE A(5)(j)

/	/						
		Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
		Name		Date In-Kind Contribution Received			
	-	Street Address			-		
1	1	City	State	ZIP			
	-	Asset or Property Contributed					
		ASSECTION OF THE PROPERTY OF T					
		Name		Date In-Kind Contribution Received			
	-	Street Address		l			
2	2	City	State	ZIP			
	City	Asset or Property Contributed					
				T			
		Name		Date In-Kind Contribution Received			
		Street Address					
3	3	City	State	ZIP			
	-	Asset or Property Contributed					
_		Name		Date In-Kind Contribution Received			
				Date in this contraction to contract			
		Street Address					
4	1	City	State	ZIP			
	-	Asset or Property Contributed					
H		Name		Date In-Kind Contribution Received			
	-	2000					
F		Street Address		,			
5	,	City	State	ZIP			
		Asset or Property Contributed	<u> </u>	1			
\vdash		Enter total only if last page of schedule					
F		(transfer the total received this period to "Sumi		line 5(j)) edule A(5)(j), page of			/



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

SCHEDULE A(6)

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

Schedule A(6), page____ of ____



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

Creditor	Information		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Name					
Street Address					
	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
	State	ZIP			
s or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
Name					
Street Address					
	State	ZIP			
Services or Goods Provided on Credit		Date of Extension of Credit			
		ioods Provided on Credit		soods Provided on Credit Date of Extension of Credit	loods Provided on Credit Date of Extension of Credit

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



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

Creditor	Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
Name					
Street Address					
City	State	ZIP			
Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
Name					
Street Address					
City	State	ZIP			
Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
Name					
Street Address			_		
City	State	ZIP			
Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
Name					
Street Address					
City	State	ZIP			
Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
Name					
Street Address					
City	State	ZIP			
		Date of Original Extension of Credit			
	Name Street Address City Services or Goods Originally Provided on Credit Name Street Address City Services or Goods Originally Provided on Credit Name Street Address City Services or Goods Originally Provided on Credit Name Street Address City Services or Goods Originally Provided on Credit Name Street Address City Services or Goods Originally Provided on Credit Name Street Address City Services or Goods Originally Provided on Credit Name Street Address	Street Address City State Services or Goods Originally Provided on Credit Name Street Address City State Services or Goods Originally Provided on Credit Name Street Address City State Services or Goods Originally Provided on Credit Name Street Address City State Services or Goods Originally Provided on Credit Name Street Address City State Services or Goods Originally Provided on Credit Name Street Address City State Street Address City State Services or Goods Originally Provided on Credit Name Street Address Street Address Street Address	Name Street Address City State ZIP Date of Original Extension of Credit Name Street Address City State ZIP Services or Goods Originally Provided on Credit Date of Original Extension of Credit Name Street Address City ZIP Date of Original Extension of Credit Name Street Address City ZIP Date of Original Extension of Credit Name Street Address City ZIP Date of Original Extension of Credit Name Street Address ZIP Date of Original Extension of Credit Name Street Address ZIP Services or Goods Originally Provided on Credit Date of Original Extension of Credit Name Street Address City ZIP Services or Goods Originally Provided on Credit ZIP Services or Goods Originally Provided on Credit ZIP Name Street Address ZIP Street Address ZIP Services or Goods Originally Provided on Credit ZIP Name	Name Street Address City State Address Street Address City Date of Original Extension of Credit Name Street Address City Date of Original Extension of Credit Street Address City Date of Original Extension of Credit Name Street Address City Date of Original Extension of Credit Name Street Address City Date of Original Extension of Credit Street Address City Date of Original Extension of Credit Date of Original Extension of Credit Street Address City Date of Original Extension of Credit Services or Goods Originally Provided on Credit Date of Original Extension of Credit Name Street Address City Date of Original Extension of Credit State Street Address City Date of Original Extension of Credit Name Street Address City Date of Original Extension of Credit State State Zil'	Creditor Information Name Street Address City Street Address

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

/	Payor C	ommittee Informa	tion	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			-
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	spense (if applicable)			
	Committee Name		Payment Date			
2	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	spense (if applicable)			
3	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	spense (if applicable)			
	Committee Name Pa		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Ex	spense (if applicable)			
5	Committee Name		Payment Date			
	Street Address					
	City State		ZIP			
	Date of Joint Fundraising Event (if applicable)		spense (if applicable)			
	Enter total only if last page of scheotransfer the total received this period to	dule "Summary of Recei	pts," line 8)			

Schedule A(8), page____ of ____



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	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Purchased	Payment Date				
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased	Payment Date				
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," li	l ine 9)			

Schedule A(9), page____ of ____



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

/				I	Cumulativa	Cumulativa
	Info	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Name				
	treet Address					
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address					
2	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	_		
	Name					
	Street Address			_		
3	City	State	ZIP			
	Type of Account Receivable or Debt Owed	Date that Debt Accrued				
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued	-		
	Name					
	Street Address			_		
5	City	State	ZIP	_		
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
_	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 10)			

Schedule A(10), page____ of ____

COMMITTEE ID NUMBER

TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
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)		

Schedule A(11), page____ of ____



MISCELLANEOUS RECEIPTS: SCHEDULE A(12)

_	Source I	nformation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
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			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," li	ine 12)	L		

Schedule A(12), page____ of ____



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	ı	Recipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	Disbursement Di	Disbursement Date		Troporting Follow	
	Street Address					
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Pur	pose? (PACs and Political Parties On	☐ Cash☐ Credit		
	Name	Disbursement Di	ate			
	Street Address					
2	City	State	ZIP			
	Type of Operating Expense Paid		Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name		Disbursement Date			
-						
	Street Address					
3	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Pur	pose? (PACs and Political Parties On			
	Name	Disbursement Di	ate			
	Street Address					
1	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Pur	pose? (PACs and Political Parties On	☐ Cash☐ Credit		
	71			_ 3.33		
	Name	Disbursement Di	ate			
	Street Address	Street Address				
,	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Pur	pose? (PACs and Political Parties On	□ Credit		
_	Enter total only if last page of se	<u> </u>				

Schedule B(1), page____ of ____



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate Committe	e Recipient Inforr	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address			_		
1	City	State	ZIP	_ □ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name					
2	Street Address	T		_		
_	City	State	ZIP	☐ Cash		
	Committee ID Number Committee Name	Date Contribution Made		☐ Credit		
	Street Address			-		
3	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name					
4	Street Address	T	T			
•	City	State	ZIP	□ Cash □ Credit		
	Committee ID Number Committee Name	Date Contribution Made		L Great		
	Street Address					
5	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	mmary of Disbursen	nents," line 2(a))			
\		Sche	edule B(2)(a), pageo	f		



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

Political Action Commit			1		
Committee Name	tee Recipient Info	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Committee Name Street Address					
5.00.7.44.000					
City	State	ZIP	☐ Cash		
Committee ID Number	Date Contribution Made		☐ Credit		
Committee Name					
Street Address					
City	State	ZIP	□ Cash		
Committee ID Number	Date Contribution Made		□ Credit		
Committee Name					
Street Address	s				
City	State	ZIP	□ Cash		
mittee ID Number Date Contribution Made			☐ Credit		
Committee Name					
Street Address					
City	State	ZIP	□ Cash		
Committee ID Number	Date Contribution Made		□ Credit		
Committee Name					
Street Address	Street Address				
City	State	ZIP	☐ Cash		
Committee ID Number	Date Contribution Made	'	□ Credit		
Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursem	nents," line 2(b))			
	Committee ID Number Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee ID Number Committee ID Number Committee Name Street Address City Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee ID Number	Committee ID Number Date Contribution Made Street Address City State Committee ID Number Date Contribution Made Street Address City State Committee ID Number Date Contribution Made Street Address City State Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made Committee ID Number Date Contribution Made Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursen	Committee ID Number Committee Name Street Address City State ZIP Committee ID Number Date Contribution Made Committee Name Street Address City State ZIP Committee Name Street Address City State ZIP Committee ID Number Date Contribution Made Enter total only if last page of schedule transfer the total disbursed this period to "Summary of Disbursements," line 2(b))	Cash Credit	Committee ID Number Cash Credit



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party R	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Street Address	Committee Name Street Address				
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
2	Street Address		I			
	City Committee ID Number	State Date Contribution Made	ZIP	☐ Cash☐ Credit		
	Committee Name					
3	Street Address					
	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made		☐ Credit		
	Committee Name Street Address	Committee Name Street Address				
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash☐ Credit		
	Committee Name					
5	Street Address					
,	City Committee ID Number	State Date Contribution Made	ZIP	☐ Cash☐ Credit		
	Committee ID Number Enter total only if last page of schedule (transfer the total disbursed this period to "Su	Date Contribution Made		L Groun		



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partner	ship Recipient Informa	tion	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Mad	de	□ Credit		
	Partnership Name	l				
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Number Date Contribution Made				
	Partnership Name					
	Street Address	Street Address				
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	□ Cash □ Credit		
	Partnership Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	ide	□ Cash □ Credit		
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	□ Cash □ Credit		
_	Enter total only if last page of sci	hedule				



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	Corporation / LLC Recipient Information			Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Corporation/LLC Name					-	
	Street Address						
1	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit			
	Corporation/LLC Name						
	Street Address						
2	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	n Made		☐ Cash☐ Credit		
	Corporation/LLC Name						
	Street Address						
3	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	n Made	□ Cash □ Credit			
	Corporation/LLC Name						
	Street Address						
4	City	State	ZIP				
	Corporation Commission File Number	Date Contribution Made		☐ Cash☐ Credit			
	Corporation/LLC Name	Corporation/LLC Name					
	Street Address						
5	City	State	ZIP				
	Corporation Commission File Number	Date Contribution	Made	□ Cash □ Credit			
	Enter total only if last page of sol (transfer the total disbursed this period	nedule					



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	nization Recipient In	formation	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 Contribution	Made	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
2	City	/ State ZIP				
	Corporation Commission File Number	Date Contribution	Made	⊔ Cash □ Credit	☐ Cash☐ Credit	
	Labor Organization Name					
	Street Address	Street Address				
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution	Made	□ Casn		
	Labor Organization Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	poration Commission File Number Date Contribution Made				
	Labor Organization Name					
	Street Address	Street Address				
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	orporation Commission File Number Date Contribution Made		□ Credit		
-	Enter total only if last page of sch (transfer the total disbursed this perio	nedule d to "Summary of Disb	ursements," line 2(f))	I		



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

	Contributo	r Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Date Refund Received			
	Street Address		<u> </u>			
1	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
2	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
3	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name	Date Refund Received				
	Street Address	Street Address				
4	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Committee Name		Date Refund Received			
	Street Address					
5	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Disbursen	nents," line 2(h))			

Schedule B(2)(h), page____ of ____



LOANS MADE: SCHEDULE B(3)(a)

/		Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name Street Address			-		
	Guerragios					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
2	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address			-		
3	City	State	ZIP	-		
	Guarantor/Endorser Name	Date Loan Made		-		
	Borrower Name					
	Street Address			-		
4	City	State	ZIP	-		
	Guarantor/Endorser Name	Date Loan Made		-		
	Borrower Name					
	Street Address			-		
5	City	State	ZIP	_		
	Guarantor/Endorser Name	Date Loan Made		-		

Schedule B(3)(a), page___of ___



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

				i	, ,	
	Guaranto	r Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	Street Address					
1	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name	Guarantor Name				
	Street Address					
2	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Guarantor Name					
	Street Address					
3	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	<u> </u>			
	Guarantor Name	l				
	Street Address					
4	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed	<u> </u>			
	Guarantor Name	l				
	Street Address					
5	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," l	ine 3(b))			

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



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

				1		
	Borrower	Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	Street Address		<u> </u>			
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	L			
	Borrower Name	L	Date Forgiveness Made			
	Street Address					
2	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding	L			
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
5	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmany of Dishurson	pents " line 3(c))	<u> </u>		

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



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

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

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



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lender I	nformation		Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	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	City	State	ZIP	_		
	Original Amount Borrowed	Amount Still Outstanding		_		
	Lender Name		Date Interest Accrued			
			Date merest/reduced	_		
4	Street Address					
7	City	State	ZIP			
	Original Amount Borrowed	Original Amount Borrowed Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address		1			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u>I</u>	1		
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmon, of Dishus-	conto " lino 2/a\\			

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



REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

/	Red	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
)	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Enter total only if last page of sche (transfer the total disbursed this period	edule	sements " line 4)			

Schedule B(4), page____ of ____



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	Candidate Committee	e Recipient Inforr	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
	Committee Name	<u> </u>				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Action Co	mmittee Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name	Committee Name				
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	n Made			
	Committee Name					
	Street Address					
2	2 City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Made			
	Committee Name					
	Street Address	Street Address				
3	3 City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	Date In-Kind Contribution Made			
	Committee Name					
	Street Address					
5	5 City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Made			
	Enter total only if last page of scheo (transfer the total disbursed this period to	dule				
	(transfer the total disbursed this period to	o "Summary of Disburse	ments," line 5(b))			

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IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

Cumulativ Amount th Reporting Pe	nis Amount this
+	

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

/						
/	Partnership Re	ecipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name				1 3	
	Street Address			-		
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Partnership Name					
	Street Address			_		
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Partnership Name					
	Street Address			_		
3	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
	Partnership Name					
	Street Address			<u> </u>		
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made	-		
	Partnership Name					
	Street Address			_		
5	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
_						
	Enter total only if last page of schedule (transfer the total disbursed this period to "Su	ummary of Disburser	nents," line 5(d))			

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

1	Corporation / LLC	Recipient Informa	ation	Amount	Cumulative	Cumulative
1	Corporation/LLC Name		ation	Contributed	Amount this Reporting Period	Amount this Election Cycle
1					1 3	
1 7	Street Address		_			
	City	State	ZIP			
C	Corporation Commission File Number	Date In-Kind Contribution	 Made			
C	Corporation/LLC Name					
٤	Street Address					
2	City	State	ZIP	_		
C	Corporation Commission File Number	Date In-Kind Contribution	Made	_		
C	Corporation/LLC Name					
٤	Street Address			_		
3	Sity	State	ZIP			
C	Corporation Commission File Number	Date In-Kind Contribution	Made	1		
(Corporation/LLC Name					
٤	Street Address			1		
4	City	State	ZIP	-		
C	Corporation Commission File Number	Date In-Kind Contribution	Made			
(Corporation/LLC Name					
٤	Street Address			_		
5	City	State	ZIP			
(Corporation Commission File Number	Date In-Kind Contribution	Made			
_ E	Enter total only if last page of schedule transfer the total disbursed this period to "Su					

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

/	Labor Organiz	zation Recipient Inforn	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	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributio	n Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
		Date In-Kind Contributio				
	Corporation Commission File Number					
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributio	n Made			
	Labor Organization Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contributio	n Made			
_	Enter total only if last page of sche (transfer the total disbursed this period	dule				
	(transfer the total disbursed this period	to "Summary of Disburse	ments," line 5(f))			

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

Expenditure Recipient Information Expenditure Recipient Information Expenditure Amount this Reporting Period Process City							
Cash Credit Street Address City State ZP	/	Expenditure F	Recipient Informatio	on	Expenditure Amount	Amount this	Amount this
Cash Credit	Recipient Name			Mode of Advertising (TV, mail, etc)			
Battor Measurate(s) Supported (including % supported) Date of First Publication, Display, Delivery, or Broadcast Excolor Month/Year Recipient Name Mode of Advertising (TV, mail, etc) State Address City Battor Measurate(s) Supported (including % supported) Battor Measurate(s) Supported (including % supported) Date of First Publication, Display, Delivery, or Broadcast Battor Measurate(s) Supported (including % supported) Battor Measurate(s) Supported (including % supported) Battor Measurate(s) Supported (including % supported) Cash Credit Cash Credit Cash Credit Recipient Name Mode of Advertising (TV, mail, etc) Store Address City Cash Credit		Street Address					
Date of First Publication, Display, Delivery, or Broadcast Recipient Name Recipient Name Mode of Advertising (TV, mail, etc)	1	City	State	ZIP	1		
Date of First Publication, Display, Delivery, or Broadcast Election Month/Year Recipient Name Mode of Advertising (TV, mail, etc) Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Date of First Publication, Display, Delivery, or Broadcast Bedion Mursh/Year Bacipient Name Mode of Advertising (TV, mail, etc) Street Addrose City State Z/P Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Date of First Publication, Display, Delivery, or Broadcast State Z/P Date of First Publication, Display, Delivery, or Broadcast State Z/P Ballot Measure(s) Supported (including % supported) Cash Credit Recipient Name Mode of Advertising (TV, mail, etc) Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Supported (including % supported) Cash Credit Cash Credit Cash Credit Cash Credit Cash Credit Cash Credit Cash Credit Cash Credit Cash Credit Cash Credit Cash Credit		Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	(including % opposed)			
Street Address City State ZIP Cash Credit		Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		- ☐ Credit		
City State ZIP		Recipient Name		Mode of Advertising (TV, mail, etc)			
Ballot Measure(s) Supported (Including % supported) Ballot Measure(s) Opposed (Including % opposed) Date of First Publication, Display, Delivery, or Broadcast Recipient Name Cash Credit		Street Address					
Cash Credit	2	City	State	ZIP			
Recipient Name Mode of Advertising (TV, mail, etc)				(including % opposed)			
Street Address City State ZIP Cash Credit 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 Credit 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 Credit Cash Credit Cash Credit Cash Cash Credit Cash Cash		Date of First Publication, Display, Delivery, or Broadcast Election Month/Year					
City State ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Cash Credit 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 Credit				Mode of Advertising (TV, mail, etc)			
Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Cash Credit 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 Credit Cash Credit							
Date of First Publication, Display, Delivery, or Broadcast Election Month/Year Credit	3						
Recipient Name Street Address City Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Cash Credit				(including % opposed)			
Street Address City State ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Cash Credit				1			
A City State ZIP Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Cash Credit				Mode of Advertising (TV, mail, etc)	_		
Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Opposed (including % opposed) Cash Credit			State	ZIP	_		
□ Cash □ Credit	4				_		
		Enter total only if last page of schedule (transfer the total disbursed this period to "S	e Summary of Disburser	ments." line 7)			

Schedule B(7), page____ of ____



RECALL EXPENDITURES MADE: SCHEDULE B(8)

	Expenditure I	Recipient Informatio	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			_		
1	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	□ Cash □ Credit		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			_ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		I	_		
3	City	State	ZIP	-		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	alled	☐ Cash☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		_ Credit		
	Recipient Name	ı	Mode of Advertising (TV, mail, etc)			
	Street Address			_		
4	City	State	ZIP	_		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Rec	I alled	□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		□ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "S	L e Summary of Disbursen	nents," line 8)	1		

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					
1	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
2	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address		l			
3	City	State	ZIP			
	Type of Benefit Provided		l			
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
4	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	e ummary of Disbursem	nents," line 9)			

Schedule B(9), page____ of ____

COMMITTEE ID NUMBER

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

/	Recipient Co	mmittee Informatio	n	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date			
	Street Address					
1	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address		1			
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address	1				
3	City	State	ZIP	II Cook		
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense		(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	(if applicable)	□ Cash □ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	(if applicable)	□ Cash □ Credit		
_	Enter total only if last page of schedul	<u> </u>		<u> </u>		
	(transfer the total disbursed this period to "S	summary of Disburser	ments," line 10)			

Schedule B(10), page____ of ____



REIMBURSEMENTS MADE: SCHEDULE B(11)

	Re	cipient Informatior	ı	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	<u> </u>	Reimbursement Date	□ Credit		
	Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	1	Reimbursement Date	□ Credit		
	Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed	Reimbursement Date	□ Cash □ Credit			
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Services or Goods Reimbursed Reimbursement Date			□ Casii		
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Reimbursed Reimbursement Date		□ Cash □ Credit			



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt In	formation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt 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					
	Street 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 schedule					
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts," I	ine 12)			

COMMITTEE ID NUMBER

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
ecipient of Surplus Monies / Source of Transferred Debt		
acipient of Surplus Monies / Source of Transferred Debt		
ecipient of Surplus Monies / Source of Transferred Debt		
acipient of Surplus Monies / Source of Transferred Debt		
otal ransfer the total disbursed this period to "Summary of Disbursements," line 13)		

Schedule B(13), page____ of ____



MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

	I.	Recipient Information	า	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Street Address					
1						
1	City	State	ZIP	□ Cash		
	Disbursement Type	<u> </u>	Disbursement Date	☐ Casii		
	Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Disbursement Type	I	Disbursement Date	☐ Casii		
	Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Disbursement Type	<u> </u>	Disbursement Date	□ Credit		
	Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Disbursement Type	,	Disbursement Date	□ Credit		
	Name					
	Street Address					
5	City	State	ZIP	 □ Cash		
	Disbursement Type	I	Disbursement Date	☐ Casii		
	Enter total only if last page (transfer the total disbursed this	of schedule s period to "Summary of Dis	bursements," line 14)	I		

COMMITTEE ID NUMBER

AGGREGATE OF DISBURSEMENTS - \$250 OR LESS:

SCHEDULE B(15)

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

Schedule B(15), page____ of ____