REPORTING PERIOD (check one):

COMMITTEE ID NUMBER
PC22-006

Committee Information:	Committee Name:	Committee to Elect Julia Wheatley	
TE INFORMATION () :	£:::	:44 >	
JE INFORMATION (only if t	filing as a candidate comi	mittee):	
TE INFORMATION (only if the original of the or	☐ County Office:	mittee):	☐ Special District Office:

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

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

	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 to March 31, 2021	April 1, 2021 to April 15, 2021
	2021 Quarter 1 Report: 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, 2021 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 Election (Q3) Report: July 17, 2022 to September 30, 2022	October 1, 2022 to October 15, 2022
	2022 Quarter 3 Report: July 1, 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, 2021 to October 29, 2022
	2022 Post-General Election (Q4) Report: October 23, 2022 to December 31, 2022	January 1, 2023 to January 15, 2023
	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date	Same Date of Termination

FINANCIAL SUMMARY (required):

OlvilviART (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)	\$ 0.00	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$ 15,425.00	\$ 16,909.83
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	\$ 3,230.32	\$ 4,674.15
(d) = Balance at close of reporting period	\$ 12,194.68	
☐ Check here if filing <u>no</u> financial activity during the reporting period. Lines (a)-(d) still must following page need to be filed.	pe completed, but only this	cover page and the

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.

	DocuSigned by:	
Committee to Elect Julia Wheatley	Julia Wheatley	01/17/2023
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	14825.00	
	(b) In-State Individuals - \$100 or Less (Aggregate)	100,00	
	(c) Out-of-State Individuals	0.00	
	(d) Candidate Committees	0.00	
	(e) Political Action Committees	500.00	
	(f) Political Parties	0.00	
	(g) Partnerships	0.00	
		0.00	
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
	(i) Labor Organizations (PACs & Political Parties Only)	0.00	
	(j) Candidate's Personal Monies (Candidate Committees Only)	0.00	
	(k) Monetary Contributions Subtotal (add 1(a) through 1(j))	15425.00	
	(I) Refunds Given Back to Contributors	0.00	
	(m) Net Monetary Contributions (subtract 1(I) from 1(k))	15425.00	
2.	Loans		
	(a) Loans Received	0.00	0.00
	(b) Forgiveness on Loans Received (c) Repayment on Loans Made	0.00	0.00
	(d) Interest Accrued on Loans Made	0.00	
	(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))	0.00	
3.	Rebates and Refunds Received	0.00	
	Interest Accrued on Committee Monies	0.00	
<u>4.</u> 5.	In-Kind Contributions Received	0.00	
	(a) In-State Individuals - More than \$100		0.00
	(b) In-State Individuals - \$100 or Less (Aggregate)		0.00
	(c) Out-of-State Individuals		0.00
	(d) Candidate Committees		0.00
	(e) Political Action Committees		0.00
	(f) Political Parties		0.00
	(g) Partnerships		0.00
	(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		0.00
	(i) Labor Organizations (PACs & Political Parties Only)		0.00
	(j) Candidate's Personal Assets or Property (Candidate Committees Only)		0.00
	(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		0.00
6.	In-Kind Donations Received (Non-Contributions) (Political Parties Only)		0.00
7.	Extensions of Credit		
	(a) Extensions of Credit Received		0.00
	(b) Payments on Extensions of Credit Received		0.00
	(c) Net Extensions of Credit (subtract 7(b) from 7(a))		0.00
8.	Joint Fundraising / Shared Expense Payments Received	0.00	
9.	Payments Received for Goods / Services	0.00	
		0,00	0.00
	Outstanding Accounts Receivable / Debts Owed to Committee	0.00	
	Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)	0.00	0.00
	Miscellaneous Receipts (use cash and/or equity as applicable)	0.00	0.00
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)	14825.00	0.00

SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	1565.49	
2.	Contributions Made		
	(a) Candidate Committees	0.00	
	(b) Political Action Committees	0.00	
	(c) Political Parties	0.00	
	(d) Partnerships	0.00	
	(e) Corporations & Limited Liability Companies (PACs & Political Parties Only)	0.00	
	(f) Labor Organizations (PACs & Political Parties Only)	0.00	
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	0.00	
	(h) Contribution Refunds Provided to the Reporting Committee	0.00	
	(i) Monetary Contributions Total (subtract 2(h) from 2(g))	0.00	
3.	Loans		
	(a) Loans Made	0.00	
	(b) Loan Guarantees Made		0.00
	(c) Forgiveness on Loans Made		0.00
	(d) Repayment of Loans Received	1484.83	
	(e) Accrued Interest on Loans Received	0.00	
	(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))	0.00	0.00
4.	Rebates and Refunds Made (Non-Contributions)	0.00	0.00
5.	Value of In-Kind Contributions Provided		
	(a) Candidate Committees		0.00
	(b) Political Action Committees		0.00
	(c) Political Parties		0.00
	(d) Partnerships		0.00
	(e) Corporations & Limited Liability Companies (PACs & Political Parties Only)		0.00
	(f) Labor Organizations (PACs & Political Parties Only)		0.00
	(g) Contributions Subtotal (add 5(a) through 5(f))		0.00
6.	Independent Expenditures Made	0.00	
7.	Ballot Measure Expenditures Made	0.00	
8.	Recall Expenditures Made	0.00	
9.	Support Provided to Party Nominees (Political Parties Only)	0.00	
10.	Joint Fundraising / Shared Expense Payments Made	180.00	
11.	Reimbursements Made	0.00	
12.	Outstanding Accounts Payable / Debts Owed by Committee		0.00
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)	0.00	0.00
14.	Miscellaneous Disbursements (use cash and/or equity as applicable)	0.00	0.00
15.	Aggregate of Disbursements - \$250 or Less (use cash and/or equity as applicable)	0.00	0.00
16.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(g), & 12-15)	3230.32	0.00

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

SCHEDULE A(1)(a)

	Individu	ual Contributor Inforr	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycl	
	Name David Johnson		Date Contribution Received 8/2/2022	1,000	1,000	1,000	
	Street Address 4042 N Pinnacle Hills Cir						
1	City Mesa	State AZ	^{ZIP} 85207				
	Occupation	Employer					
_	Name Jonh J & Tarja A Panfil	1	Date Contribution Received 8/2/2022	500.00	500.00	500.00	
	Street Address 23061 E StoneCrest Dr						
2	City Queen Creek	State AZ	^{ZIP} 85142				
	Occupation	Employer					
			Date Contribution Received 8/2/2022	1,000	1,000	1,000	
	treet Address 812 N Norwalk Suite 105						
3	City Mesa	State AZ	ZIP 85215				
	Occupation	Employer					
_	Name Joshua S & Sydney M Brimhall		Date Contribution Received 8/2/2022	500.00	500.00	500.00	
	Street Address 3701 E Perkinsville St						
4	City Gilbert	State AZ	^{ZIP} 85295				
	Occupation	Employer					
	Name		Date Contribution Received				
	Street Address		I				
5	City	State	ZIP				
	Occupation	Employer	•				

^{*}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 1 of 1

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

SCHEDULE A(1)(a)

	Individual C	ontributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Scott A & Kylee C Maddux		Date Contribution Received 9/9/2022	250.00	250.00	250.00
	Street Address 2339 29th St					
1	City Santa Monica	State AZ	2IP 90405			
	Occupation Co-Founder	Employer Two Tree C	capital			
	Name S. Parshelle & Stacy J Brimhall	1	Date Contribution Received 9/9/2022	500.00	500.00	500.00
	Street Address 2845 E Robin Ct					
2	City Gilbert	State AZ	ZIP 85296			
	Occupation Founder	Employer Langley Pro	pperties			
	Name Gary & Barbara L Burton		Date Contribution Received 9/9/2022	250.00	250.00	250.00
	Street Address 6231 E Monerosa St	nerosa St				
3	City Scottsdale	State AZ	zip 85251			
	Occupation RE Investing	Employer Cavan				
	Name Keldy Winters		Date Contribution Received 9/9/2022	1000.00	1000.00	1000.00
	Street Address 1880 W Rockrose Wy		L			
4	City Chandler	State AZ	ZIP			
	Occupation Owner	Employer Latigo Lanc	I			
	Name John C Wittrock	•	Date Contribution Received 9/9/2022	1000.00	1000.00	1000.00
	Street Address 8601 N Scottsdale Rd, Ste 335					
5	City Scottsda l e	State AZ	ZIP 85253			
	Occupation Director	Employer Marbella Ho	omes			

^{*}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 2 of 5

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

SCHEDULE A(1)(a)

	I ndividual (Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Kathrine L & John L Flaherty		Date Contribution Received 9/9/2022	250.00	250.00	250.00
	Street Address 953 S Helms Cir					
1	City Mesa	State AZ	^{ZIP} 85204			
	Occupation Mgr	Employer Pine Mana	gement			
	Name Jacob S Jorde	•	Date Contribution Received 9/9/2022	1000.00	1000.00	1000.00
	Street Address P O Box 8173					
2	City Cave Creek	State AZ	ZIP 85327			
	Occupation Principal	Employer Jorde Prop	erties			
	Name Jessica P Jorde		Date Contribution Received 9/9/2022	1000.00	1000.00	1000.00
	Street Address 6720 E Lassalle Rd	1				
3	City Cave Creek	State AZ	ZIP 85331			
	Occupation Principal	Employer Jorde Prop	erties			
	Name Janene L & William R Pew		Date Contribution Received 9/9/2022	250.00	250.00	250.00
	Street Address 1744 S Val Vista Dr, Ste 217					
4	City Mesa	State AZ	ZIP 85204			
	Occupation Employer Atty Pew & Lake, LLC					
	Name Sean B & Amy A Lake		Date Contribution Received 9/9/2022	250.00	250.00	250.00
	Street Address 2448 E Melrose St	Street Address				
5	City Mesa	State AZ	ZIP 85213			
	Occupation Atty	Employer Pew & Lake	e, LLC			

^{*}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 $\frac{3}{}$ of $\frac{5}{}$

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

SCHEDULE A(1)(a)

	Individua	l Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Reese L & Erin Anderson		Date Contribution Received 9/9/2022	250.00	250.00	250.00	
	Street Address 1005 N Alba						
1	City Mesa	State AZ	ZIP 85213				
	Occupation Atty	Employer Pew & Lake	e, LLC				
	Name Mark Schnepf	-	Date Contribution Received 9/9/2022	1000.00	1000.00	1000.00	
	Street Address 22601 E Cloud Rd						
2	City Queen Creek	State AZ	ZIP 85142				
	Occupation Farmer	Employer Schnepf Fa	ırms		_		
	Name Raymond W & Karen A Olsen		Date Contribution Received 9/9/2022	125.00	125.00	125.00	
	Street Address 621 W Desert Ave						
3	city Gilbert	State AZ	ZIP 85233				
	Occupation Real Estate	Employer Self	•				
	Name Wanda & William R Olsen	l .	Date Contribution Received 9/9/2022	200.00	200.00	200.00	
	Street Address 7515 E 1st St		-				
1	City Scottsdale	State AZ	ZIP 85251				
	Real Estate	Employer Self	,				
	Name Jason & Traci Barney		Date Contribution Received 9/9/2022	500.00	500.00	500.00	
	Street Address 1719 E Tradewind Ct		•				
5	City Gilbert	State AZ	ZIP 85234				
	Occupation Landmark Companies	Employer Self	•				

^{*}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 4 of 5

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

SCHEDULE A(1)(a)

	Individual	Contributor Inforn	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name Dan J & Elizabeth Reeb		Date Contribution Received 9/9/2022	1000.00	1000.00	1000.00	
	Street Address 2812 N Norwalk #105						
1	City Mesa	State AZ	ZIP 85215				
	Occupation CFO	Employer Reeb Capit	al				
	Name Mark & Candace Reeb	- 1	Date Contribution Received 9/9/2022	1000.00	1000.00	1000.00	
	Street Address 2812 N Norwalk, Ste 105		•				
2	City Mesa	State AZ	ZIP 85215				
	Occupation Broker	Employer Reeb Grou	p				
- 1	Name Darin K & Megan Barney		Date Contribution Received 9/9/2022	500.00	500.00	500.00	
	Street Address PO Box 1321						
3	City Higley	State AZ	ZIP 85236				
	Occupation Real Estate Agent	Employer Gentry	Real Estate				
	Name Jordan Rose	<u> </u>	Date Contribution Received 9/9/2022	500.00	500.00	500.00	
	Street Address 5630 E Nauni Valley Dr		l				
1	City Paradise Valley	State AZ	ZIP 85253				
	Occupation Atty	Employer Rose Law	1				
	Name David & Karen Cavan	•	Date Contribution Received 9/9/2022	500.00	500.00	500.00	
	Street Address 10801E Happy Valley Rd, 12						
5	city Scottsda l e	State AZ	ZIP 85255				
	Occupation Chair	Employer Cavan	- '				
	Enter total only if last page of sche (transfer the total received this period to	dule			15,075.00	15,075.00	

^{*}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 5 of 5



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	100.00	100.00
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(b))	100.00	100.00

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

MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

/	Individual Conf	ributor I nformatio	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		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 "Sun	nmary of Receipts,"	line 1(c))			

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

	Candidate Committee	Contributor Infor	mation	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 Receive	ed			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule					
	(transfer the total received this period to "Sum	mary of Receipts," I	ine 1(d))			

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

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

/				•		
	Political Action Committ	ee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name Southwest Gas Arizona Political Action	Committee		500.00	500.00	500.00
	Street Address PO Box 52075					
	^{City} Phoenix	State AZ	zip 85072			
	Committee ID Number C00076737	Date Contribution Receive 8/2/2022	ed			
	Committee Name					
	Street Address					
2	City	State	ZIP	_		
	Committee ID Number	Date Contribution Receive	I ed			
	Committee Name					
-	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Committee Name					
-	Street Address			_		
4	City	State	ZIP	_		
<u>-</u>	Committee ID Number	Date Contribution Received		_		
	Committee Name					
-	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	ed			
	Enter total only if last page of schedule (transfer the total received this period to "Sum				500.00	500.00

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

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

/						
/	Political Party Co	ntributor I nformat	ion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	mmittee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	d 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	City	State	ZIP			
	Committee ID Number	Date Contribution Receive				
	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	o Contributor Informati	on	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	Street Address			_		
1	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receive	ed	_		
	Partnership Name					
	Street Address					
2	City	State	ZIP	-		
	Corporation Commission File Number	Date Contribution Receiv	ved	-		
	Partnership Name					
	Street Address	et Address				
3	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receiv	ved			
	Partnership Name					
	Street Address	Street Address				
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	Date Contribution Received			
	Partnership Name					
	Street Address			-		
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	ved	-		
_	Enter total only if last page of sche (transfer the total received this period to	dule	line 1(a))	l		

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



MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				, тор от тор	
	Street Address					
1	City	State	ZIP	_		
	Corporation Commission File Number	Date Contribution Receive	ed			
	Corporation/LLC Name	I				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	l ved			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	l ved			
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receiv	red			
	Enter total only if last page of schedul (transfer the total received this period to "S	e ummary of Receipts,"	line 1(h))			
L	(transfer the total received this period to "S	ummary of Receipts,"	line 1(h))			

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

MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

1 (Labor Organization	Contributor Inform	nation	Amazont Darati	Cumulative	Cumulative
1 (abor Organization Name			Amount Received	Amount this Reporting Period	Amount this Election Cycle
1 (
Ĺ	Street Address			_		
C	City	State	ZIP			
- 1'	Corporation Commission File Number	Date Contribution Receive	4			
	Corporation Commission File Number	Date Contribution Receive	u			
L	abor Organization Name					
ę	Street Address			_		
2	City	State	ZIP			
(Corporation Commission File Number	Date Contribution Receive	ed			
4	_abor Organization Name					
ľ	abor Organization Name					
S	Street Address					
3	City	State	ZIP			
(Corporation Commission File Number	Date Contribution Receive	ed	_		
- 1	abor Organization Name					
	Street Address					
4	Dity	State	ZIP			
L						
C	Corporation Commission File Number	Date Contribution Receive	ed			
	abor Organization Name					
٤	Street Address					
5	Dity	State	ZIP			
(Corporation Commission File Number	Date Contribution Receive	ed			
\downarrow	Enter total only if last page of schedule					

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



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

/	Candidate	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date Contribution Received			j
	Street Address					
1	City	State	ZIP			
	Occupation	Employer	<u> </u>			
	Name		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	many of Rossints "	line 1(i))		0.00	1,484.83
	Table 10 total 1000 Wed this period to Odin	a. y or recouple,				,

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	(Contributor Information	n	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)	I	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			
	ID Number (if applicable)		Date of Original Contribution			
_	Enter total only if last page of s	ala aduda				

Schedule A(1)(I), page ____ of___

LOANS RECEIVED: SCHEDULE A(2)(a)

	ι	ender Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received	1			
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	se? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received	d			
	Street Address			_		
2	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	se? (PACs and Political Parties Only)			
	Lender Name	Date Loan Receiver	d.			
	Edition Name	Date Edail Necesives				
	Street Address					
3	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpos	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received	d			
	Street Address					
4	City	State	ZIP			
	Guarantor/Endorser Name		se? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received	d			
_	Street Address					
5	City	State	ZIP			
•	Guarantor/Endorser Name	Non-Electoral Purpos	L se? (PACs and Political Parties Only)			

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

FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

Date Forgiveness Received ZIP Utstanding Date Forgiveness Received ZIP	Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ZIP Jutstanding Date Forgiveness Received ZIP			
Date Forgiveness Received ZIP			
Date Forgiveness Received ZIP			
Date Forgiveness Received			
ZIP			
utstanding	 		Ì
Date Forgiveness Received			
ZIP			
utstanding			
Date Forgiveness Received			
	\dashv		
ZIP			
utstanding			
Date Forgiveness Received			
	_		
ZIP	_		
	_		
utstanding			
		Date Forgiveness Received ZIP Dutstanding	Date Forgiveness Received ZIP

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

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

/				ı	1 1	
	Borrowe	r Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name Julia Wheatley		Date Repayment Received 8/2/2022	1,484.83	1,484.83	1,484.83
	Street Address 22096 E Pecan Dr					
1	City Queen Creek	State AZ	^{ZIP} 85142			
	Original Amount Borrowed 1,484.83	Amount Still Outstanding 0.00				
	Borrower Name		Date Repayment Received			
	Street Address		•			
2	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding					
Ĺ	Borrower Name		Date Repayment Received			
	Street Address	1				
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Borrower Name		Date Repayment Received			
	Street Address	eet Address				
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	1			
	Borrower Name		Date Repayment Received			
	Street Address		1	_		
5	City	State	ZIP	\dashv		
	Original Amount Borrowed	Amount Still Outstanding		\dashv		
_	Enter total only if last page of schedule (transfer the total received this period to "Sur	mmon, of Dessiels."	line 2(a))		1,484.83	1,484.83

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

INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

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

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

REBATES AND REFUNDS RECEIVED: SCHEDULE A(3)

,				I	l	
	Payor	Information		Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Payor Name		Date Rebate/Refund Received			
	Street Address		1			
1	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	te			
	Payor Name		Date Rebate/Refund Received			
	Street Address		1			
2	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/Reba	te			
	Payor Name		Date Rebate/Refund Received			
	Street Address			1		
3	City	State	ZIP	1		
	Original Purchase Amount	Original Purchase Amount Reason for Refund/Rebate		1		
	Payor Name	<u> </u>	Date Rebate/Refund Received			
	Street Address		.1	1		
4	City	State	ZIP	1		
	Original Purchase Amount	Reason for Refund/Reba	te			
	Payor Name		Date Rebate/Refund Received			
	Street Address		1			
5	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Reba	te	1		
_	Enter total only if last page of schedule (transfer the total received this period to "Sur	1		I		

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 Contr	ributor Informatio	n	Amount Received	Cumulative Amount this	Cumulative Amount this
	Name	ibator imormation	Date In-Kind Contribution Received	7 WHOUNT NEGETY CO	Reporting Period	Election Cycle
	Street Address			<u> </u> -		
1	Street Address		,	_		
1	City	State	ZIP			
	Occupation	Employer	1			
	Name		Date In-Kind Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer		1		
	Name		Date In-Kind Contribution Received			
			Date in-Kind Continuation Neceived			
•	Street Address					
3	City	State	ZIP			
	Occupation	Employer		=		
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP	<u> </u> 		
	Occupation	Employer		<u> </u>		
		2	T			
	Name		Date In-Kind Contribution Received			
_	Street Address					
5	City	State	ZIP			
	Occupation	Employer	l	-		

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

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



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).



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

SCHEDULE A(5)(c)

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



IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

	Candidate Committee	Contributor Infor	rmation	Amount Received	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	Received			
	Committee Name	<u>I</u>				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name	l				
	Street Address	reet Address				
5	City	State	ZIP	-		
	Committee ID Number	Date In-Kind Contribution	Received			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	many of Possints "	line 5(d))			
	Transfer the total received this period to Suiti	mary of Necelpis, I				

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

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

/				ı	1	
	Political Actio	n Committee Contribut	or Information	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	l ibution Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received			
	Committee Name	<u> </u>				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Cont	ribution Received			
_	Enter total only if last page of a	schodulo				

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Political Party	Contributor Informa	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					,
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Received			
	Committee Name					
-	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Received			
	Committee Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributio	n Received			
_	Enter total only if last page of schedu (transfer the total received this period to "S	le				

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnership Con	tributor Information	on	Amount Received	Cumulative Amount this	Cumulative Amount this
	Partnership Name				Reporting Period	Election Cycle
-	Street Address			_		
1	City	State	ZIP	<u> </u>		
-	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address			-		
2		T	1	_		
-	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	<u> </u>		
\dashv	Enter total only if last page of schedule					

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

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

/	Corporation / LLC C	Contributor Inform	ation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				Troporang Forest	Ziodion Gyolo
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	 Received			
	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	l				
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Panaiyad			

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

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

,						
	Labor Organization	Contributor Inform	nation	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	Received	_		
	Labor Organization Name					
	Street Address			-		
3	City	State	ZIP	_		
	Corporation Commission File Number	Date In-Kind Contribution	Received	-		
	Labor Organization Name					
	Street Address			1		
4	City	State	ZIP	1		
	Corporation Commission File Number	Date In-Kind Contribution	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 schedule (transfer the total received this period to "Sum	mary of Receipte "	line 5(i))]		
	Transier me rotal received mis belion to Sum	mary or Necelpis,			<u> </u>	

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

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

SCHEDULE A(5)(j)

	Candidat	e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			
	Street Address		I .			
1	City	State	ZIP	_		
	Asset or Property Contributed			-		
	A SOCIAL PROPERTY COMMISSION					
	Name		Date In-Kind Contribution Received			
	Street Address			-		
2	City	State	ZIP			
	Asset or Property Contributed					
	Asset of Property Continuated					
	Name Date In-Kind Contribution		Date In-Kind Contribution Received			
	Street Address		1			
3	Gity	State	ZIP	<u>.</u>		
	Asset or Property Contributed					
	Name		Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Asset or Property Contributed					
	Total of Figure Communication					_
	Name		Date In-Kind Contribution Received			
	Street Address					
5	City	State	ZIP	-		
	Asset or Property Contributed					
	Enter total only if last page of schedule (transfer the total received this period to "Sur	nmary of Receipts,"	line 5(j))			
		Sch	nedule A(5)(j), page of	:		



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

SCHEDULE A(6)

Name Street Address City Type of Item Donated Name Street Address	State State	Date In-Kind Donation Received ZIP Date In-Kind Donation Received	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Street Address City Type of Item Donated Name Street Address		ZIP			
City Type of Item Donated Name Street Address			_		
Type of Item Donated Name Street Address					
Name Street Address City	State	Date In-Kind Donation Received			
Street Address	State	Date In-Kind Donation Received			
City	State		-		Ì
	State				
Type of Item Donated		ZIP			
	Type of Item Donated				
Name		Date In-Kind Donation Received			
Street Address					
Dity	State	ZIP			
Type of Item Donated					
Name		Date In-Kind Donation Received			
Street Address					
City	State	ZIP			
Type of Item Donated		I			
Name		Date In-Kind Donation Received			
Street Address					
Sity	State	ZIP			
Type of Item Donated					
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 6)					
	Type of Item Donated Name Street Address City Type of Item Donated Street Address City Type of Item Donated	Type of Item Donated Name Street Address City State Type of Item Donated Street Address City State Type of Item Donated Street Address City State Type of Item Donated Enter total only if last page of schedule transfer the total received this period to "Summary of Receipts,"	City State ZIP Type of Item Donated Name Date In-Kind Donation Received Street Address City State ZIP Type of Item Donated Name Date In-Kind Donation Received State ZIP Street Address Street Address	City State ZIP Type of Item Donated Name Date In-Kind Donation Received Street Address City State ZIP Type of Item Donated Name Date In-Kind Donation Received State ZIP Type of Item Donated Street Address Lity State ZIP Type of Item Donated	Type of Rem Donated State ZIP

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

_	treet Address State Strate Strate Strate State State		Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Name					
	rreet Address			-		
1	City	State	ZIP	-		
	Services or Goods Provided on Credit		Date of Extension of Credit	-		-
	Name					
	Street Address			-		
2	City	State	ZIP			
	Services or Goods Provided on Credit	I	Date of Extension of Credit			
	Name					
	Street Address		-			
3	City	State	ZIP	-		-
	Services or Goods Provided on Credit		Date of Extension of Credit	-		
	Name					
	Street Address			-		
4	City	State	ZIP	-		
	Services or Goods Provided on Credit	I	Date of Extension of Credit			
	Name		1			
	Street Address			1		
5	City	State	ZIP	1		
	Services or Goods Provided on Credit	1	Date of Extension of Credit	1		
	Enter total only if last page of schedule (transfer the total received this period to "Sum	mary of Receipts." I	ine 7(a))	1		
_	<u>r</u>	,	· //		<u> </u>	

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

PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Name Street Address City State ZIP Services or Goods Originally Provided on Credit Date of Origin Name Street Address City State ZIP Services or Goods Originally Provided on Credit Date of Origin Name			Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Enter total only if last page of schedule (transfer the total received this period to "Sum	manual Description	in a 7/h))			
L	transfer the total received this period to "Sum	mary of Receipts," I	ine /(b))			

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

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Com	mittee Information	1	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		Payment Date		Treporting Fenou	
	Street Address					
1	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)			
	Committee Name		Payment Date			
	Street Address					
2	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)			
	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)			
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expens	e (if applicable)			
_	Enter total only if last page of schedule (transfer the total received this period to "Su	<u> </u> 				

Schedule A(8), page____ of ____

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

/	Payor l ı	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,	' line 9)	1		

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	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	L	Date that Debt Accrued			
	Name					
	treet 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 (transfer the total received this period to "Sum					

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
ource 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	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					
1	City	State	ZIP			
		Cialo				
	Receipt Type	Receipt Date				
	Name					
5		Street Address				
	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 Receir	ots " line 12)			

Schedule A(12), page____ of ____

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	R	ecipient Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Shipley Strategies	Disbursement Da	tte	63.30	63.30	63.30
	Street Address 2114 E Montebello Ave					
1	City Phoenix	State AZ	ZIP 85016	□ Cash		
	Type of Operating Expense Paid Robo Calls	Non-Electoral Purp	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Amazon	Disbursement Da 7/31/2022	te	153.82		
	Street Address 1200 12th Ave. South, Ste. 1200)				
2	City Seattle	State WA	ZIP 98144	□ Cash		
	Type of Operating Expense Paid Materials for Campaign	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Credit		
	Name Olive Garden	Disbursement Date 8/2/2022		348.45		
	Street Address 21422 S Ellsworth Loop Rd					
3	City Queen Creek	State AZ	ZIP 85142	□ Cash		
	Type of Operating Expense Paid Food for Poll workers	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
	Name Fry's Food Store	Disbursement Da 8/2/2022	te	41.30		
	Street Address 25105 S Ellsworth Rd	<u>, </u>				
4	City Queen Creek	State AZ	ZIP 85142	 □ Cash		
	Type of Operating Expense Paid Supplies for Campaign	Non-Electoral Purp	pose? (PACs and Political Parties Only)	☐ Credit		
	Name Somburro's	Disbursement Da 8/2/2022	te	45.21		
	Street Address 20707 E Maya Rd					
5	City Queen Creek	State AZ	zıp 85142	☐ Cash☐ Credit		
	Type of Operating Expense Paid Campaign Meeting	Non-Electoral Purp	pose? (PACs and Political Parties Only)	L Orean		

Schedule B(1), page____ of ___

COMMITTEE ID NUMBER
PC22-006

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

/	Recipi	ent Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Crumbl Cookies	Disbursement Da	ate	48.91	48.91	48.91
	Street Address 21172 S Ellsworth Lp Rd, Ste 102					
1	City Queen Creek	State AZ	ZIP 85142	□ Cash		
	Type of Operating Expense Paid Non-Electoral Purpose? (PACs and Political Parties Only) Refreshments for Poll Workers □		□ Credit			
	Name Staples	Disbursement Date 8/3/2022		3.35	3.35	3.35
	Street Address 21168 E Ocotillo Rd					
2	City Queen Creek Type of Operating Expense Paid	State AZ Non-Electoral Purp	ZIP 85142 pose? (PACs and Political Parties Only)	□ Cash		
	copies	Disbursement Da	ate	12,00	12,00	12.00
ŀ	BMO Harris Bank 9/13/2022 Street Address 21479 S Ellsworth Rd					
3		State AZ	zip 85142	 ☑ Cash		
	Type of Operating Expense Paid Bank Fees	Non-Electoral Purp	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Name Nando's Mexican Food	Disbursement Da 7/20/2022	Disbursement Date 7/20/2022		35.47	35.47
	Street Address 20734 E Victoria Ln					
1	City Queen Creek	State AZ	zip 85142	□ Cash		
	Type of Operating Expense Paid Campaign Meeting	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
	Name Fry's Food Stores	Disbursement Da 7/30/2022	ate	59.25	100.55	100.55
_	Street Address 25105 S Ellsworth Rd					
5	City Queen Creek	State AZ	zip 85142	□ Cash □ Credit		
	Type of Operating Expense Paid Campaign Supplies	Non-Electoral Purpose? (PACs and Political Parties Only)				

Schedule B(1), page 2 of $_{--}3$

COMMITTEE ID NUMBER
PC22-006

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipien	Information		Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name Morenos Jump	Disbursement Date 8/2/2022	е	400.00	400.00	400.00
	Street Address 40879 N Coyote Rd					
1	City San Tan Valley	State AZ	zIP 85140	□ Cash		
	Type of Operating Expense Paid Campaign Event	Non-Electoral Purpo	ose? (PACs and Political Parties Only)	☐ Credit		
	Name Quick Trip	Disbursement Date 8/7/2022	е	174.43	174.43	174.43
	Street Address 22185 S Ellsworth Lp Rd					
2	City Queen Creek	State AZ	ZIP 85142	□ Cash		
	Type of Operating Expense Paid Gasoline	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Credit		
	Name	Disbursement Date				
	Street Address					
3	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Credit		
	Name	ame Disbursement Date				
	Street Address	l .				
4	City	State	ZIP	□ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		□ Credit		
	Name	Disbursement Date	е			
	Street Address	Street Address				
5	City	State	ZIP	☐ Cash☐ Credit		
	Type of Operating Expense Paid	Non-Electoral Purpo	Dose? (PACs and Political Parties Only)	L Credit		
	 Enter total only if last page of schedule			l	1,565.49	1,565.49

Schedule B(1), page 3 of 3

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate Commit	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		□ Cash		
	Committee Name					
	Street Address					
2	City	State	ZIP	E Cook		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
2	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP	□ Cook		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name	I				
	Street Address					
5	City	State	ZIP	☐ Cash		
	Committee ID Number	Committee ID Number Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "S	l e ummary of Disburser	ments," line 2(a))			

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political A	action Committee Recipien	nt Information	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	□ Cash □ Credit				
	Committee Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Committee ID Number	Date Contribution Made				
	Committee Name	l				
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution	Made	□ Cash □ Credit		
		of schedule s period to "Summary of Disbi				

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

/	Politica	al Party Recipient I nfori	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name				1 3	
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution N	Made	□ Cash □ Credit		
	Committee Name					
	Street Address					
2	City State ZIP					
	Committee ID Number	Date Contribution I	Made	☐ Cash☐ Credit		
	Committee Name					
	Street Address					
3						
J	City	State	ZIP	□ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name	•				
	Street Address					
4	City	State	ZIP			
	Committee ID Number Date Contribution Made			☐ Cash☐ Credit		
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution I	Made	☐ Cash☐ Credit		
	Enter total only if last page of transfer the total disbursed this pe	schedule				

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnersi	nip Recipient Informa	tion	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 Contribution Mac	l de	□ Cash □ Credit		
	Partnership Name	I				
	Street Address					
2	City	State	ZIP	□ Cook		
	Corporation Commission File Number Date Contribution Made			□ Cash □ Credit		
	Partnership Name	I				
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Ma	de	□ Cash □ Credit		
	Partnership Name	I				
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	☐ Casii				
	Partnership Name					
	Street Address					
5	City	State	ZIP	□ Cash		
	Corporation Commission File Number	Date Contribution Ma	de	☐ Casii		
	Enter total only if last page of sche (transfer the total disbursed this period	edule to "Summary of Disburs	sements " line 2(d))	l .		

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation	ı / LLC Recipient I nfor	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 Contribution Mad	l de	□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Corporation Commission File Number	☐ Credit				
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP	□ Cash		
	Corporation Commission File Number	□ Credit				
	Corporation/LLC Name					
	Street Address					
4	City	State	ZIP	□ Cash		
	Corporation Commission File Number	□ Credit				
	Corporation/LLC Name					
	Street Address					
5	City State ZIP			□ Cash		
	Corporation Commission File Number	Date Contribution Ma	de	□ Credit		
_	Enter total only if last page of sch (transfer the total disbursed this period	edule	to " line 2(a))			

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organ	nization Recipient Info	ormation	Amount Contributor	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 Ma	ade	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
3	City State ZIP					
	Corporation Commission File Number Date Contribution Made			☐ Cash☐ Credit		
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution M	lade	□ Cash □ Credit		
	Labor Organization Name					
	Street Address					
5	City State ZIP					
	Corporation Commission File Number Date Contribution Made			☐ Cash☐ Credit		
_	Enter total only if last page of sch					
	(transfer the total disbursed this perio	d to "Summary of Disbu	rsements," line 2(f))			

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

			1	i i	
Contributor	Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Committee Name		Date Refund Received			
Street Address		,			
City	State	ZIP			
Committee ID Number		Date of Original Contribution			
Committee Name		Date Refund Received			
Street Address					
City	State	ZIP			
Committee ID Number		Date of Original Contribution			
Committee Name		Date Refund Received			
Street Address					
City	State	ZIP			
Committee ID Number	Date of Original Contribution				
Committee Name	Date Refund Received				
Street Address		l	1		
City	State	ZIP	-		
Committee ID Number		Date of Original Contribution			
Committee Name		Date Refund Received			
Street Address			-		
City		ZIP	-		
Committee ID Number	Date of Original Contribution	-			
Enter total only if last page of schedule (transfer the total disbursed this period to "Sum					
	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 ID Number Committee ID Number Committee ID Number Committee ID Number Committee Name Street Address City Committee ID Number Street Address City Committee ID Number	Street Address City State Committee ID Number Committee ID Number Street Address City State Committee ID Number Committee ID Number Street Address City State Committee ID Number Street Address City State City State City State Committee ID Number Street Address City State	Committee Name Date Refund Received	Committee Name Street Address City State ZIP Committee ID Number Date Perfund Received Street Address City State ZIP Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Committee Name Date Refund Received Street Address City State ZIP Committee Name Date Refund Received Street Address City State ZIP Committee ID Number Date of Original Contribution Committee ID Number Date of Original Contribution Date of Original Contribution Committee ID Number Date of Original Contribution ZIP	Contributor Information Committee Name Date Natural Received Street Actines Committee Name Date of Original Contribution Date of Original Contribution Committee Name Date Parlund Received Street Actines City State ZIP Committee ID Number Date Parlund Received Street Actines City State ZIP Committee Name Date Refund Received Street Actines City State ZIP Committee Name Date Refund Received Street Actines City State ZIP Committee Name Date Refund Received Street Actines City State ZIP Committee Name Date Refund Received Committee Name Date Refund Received Committee Name Date Refund Received Street Actines City State ZIP Committee Name Date of Original Contitution Committee Name Date of Original Contitution

LOANS MADE: SCHEDULE B(3)(a)

/		Borrower Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					
	Street Address					
1	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made	I			
	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			
	uarantor/Endorser Name Date Loan Made					

Schedule B(3)(a), page___of ___

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

Borrower Name City Street Address City Street Address Street Address City Street Address Street Address Street Address City Street Address							
Street Address Cuty State Coty State State Coty State State State State State State State State State State		Gua	rantor Information			Amount this	Amount this
Copy State Copy State Copy State Copy		Guarantor Name					
Borrower Name Caurantor Name Steat Address Cory Seats 22P Borrower Name Consistor Name Steat Address Cony Seats 22P Borrower Name Dete Loan Guirranteed Courantor Name Steat Address Cony Seats 22P Borrower Name Courantor Name Steat Address Cony Seats 22P Borrower Name Courantor Name Courantor Name Courantor Name Courantor Name Courantor Name Courantor Name Steat Address Cony Seats		Street Address			-		
Guarantor Name Street Accines City State Date Loan Cuaranteed Courantor Name Oale Loan Cuaranteed Street Accines City Street Accines Street Accines Street Accines City Street Accines Street Accines Street Accines City Street Accines City Street Accines Street Accines Street Accines Street Accines Street Accines City Street Accines Street	1	City	State	ZIP	-		
Sheet Address City State ZIP Borrower Name Sheet Address City State ZIP Somower Name Date Loan Cuaranteed Cuarantor Name Street Address City State ZIP Somower Name Street Address Street Address City State ZIP Somower Name Street Address City State ZIP		Borrower Name	Date Loan Guaranteed		-		
City State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Street Address Guarantor Name Date Loan Guaranteed Cuarantor Name Date Loan Guaranteed Guarantor Name Date Loan Guaranteed Guarantor Name Street Address Grity State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Date Loan Guaranteed Guaranteed Street Address Guaran		Guarantor Name					
Borrower Name Guarantor Name Street Address Guarantor Name Date Loan Guaranteed Guarantor Name Street Address Street Address Guarantor Name Street Address Guarantor Name Date Loan Guaranteed Guarantor Name Date Loan Guaranteed Guarantor Name Street Address Guarantor Name Date Loan Guaranteed Guarantor Name Street Address Guarantor Name Street Address Guarantor Name		Street Address					
Guarantor Name	2	City	State	ZIP			
Street Address State		Borrower Name	Date Loan Guaranteed				
State ZIP		Guarantor Name					
Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Street Address Guarantor Name City State ZIP City State ZIP Street Address		Street Address			-		
Guarantor Name Street Address City State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State ZIP City State ZIP	3	City	State	ZIP	1		
Street Address City State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State ZIP		Borrower Name	Date Loan Guaranteed				
4 City State ZIP Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State ZIP		Guarantor Name					
Borrower Name Date Loan Guaranteed Guarantor Name Street Address City State ZIP		Street Address			1		
Guarantor Name Street Address City State ZIP	4	City	State	ZIP			
Street Address City State ZIP		Borrower Name	Date Loan Guaranteed	Date Loan Guaranteed			
5 City State ZIP		Guarantor Name					
Oily State ZIF		Street Address			-		
Borrower Name Date Loan Guaranteed	5	City	State	ZIP	_		
		Borrower Name	Date Loan Guaranteed		-		
	_	(transfer the total received this period to	"Summary of Disburseme	ents," line 3(b))			

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

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

/	Borrowe	er Information		Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made		-	-
	Street Address			-		
1	City	State	ZIP	_		
	Original Amount of Loan	Amount Still Outstanding	1			
	Borrower Name		Date Forgiveness Made			
	Street Address			-		
2	City	State	ZIP	-		
	Original Amount of Loan	Amount Still Outstanding		1		
	Borrower Name		Date Forgiveness Made			
	Street Address	1	1			
3	City	State	ZIP	1		
	Original Amount of Loan	Amount Still Outstanding	1	1		
	Borrower Name		Date Forgiveness Made			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name	I	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 "S)				
	Ruanisier the total dispursed this period to 5	uninary or Disburser	nens, ine s(c))			

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

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

Lender	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding	3			
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding	3			
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP	_		
Original Amount Borrowed	Amount Still Outstanding]			
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding]	\dashv		
Lender Name		Date Repayment Made			
Street Address					
City	State	ZIP			
Original Amount Borrowed	Amount Still Outstanding	<u> </u>	_		
	Lender Name Street Address City Original Amount Borrowed Lender Name Street Address City City Street Address City City Criginal Amount Borrowed	Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Original Amount Borrowed Amount Still Outstanding Lender Name Street Address City State Street Address City State Street Address	Lender Name Date Repayment Made Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Repayment Made Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Repayment Made Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Repayment Made Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Repayment Made Lender Name Date Repayment Made Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Lender Name Date Repayment Made	Lender Name City State City State City State Date Repayment Made City State Date Repayment Made City State ZIP City State Date Repayment Made City State ZIP City State Date Repayment Made City State ZIP City State Date Repayment Made Date Repayment Made	Lender Information Date Repayment Made Street Address City State 23P Original Amount Borrowed Amount Self Outstanding Lender Name Date Repayment Made Date Repayment Made Lender Name Date Repayment Made Date Repayment Made Street Address City State 21P Original Amount Borrowed Amount Self Outstanding Lender Name Date Repayment Made Street Address City State 21P Original Amount Borrowed Amount Self Outstanding Lender Name Date Repayment Made Street Address City State 21P Original Amount Borrowed Amount Self Outstanding Lender Name Date Repayment Made Street Address City State 21P Original Amount Borrowed Amount Self Outstanding Lender Name Date Repayment Made Street Address Street Address City State 21P Original Amount Borrowed Amount Self Outstanding Lender Name Date Repayment Made Street Address Street Address Date Repayment Made Street Address Street Address Date Repayment Made Street Address Date Repayment Made Street Address Date Repayment Made

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		. 0	,
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		_		
	Lender Name	<u> </u>	Date Interest Accrued			
	Street Address		<u>I</u>			
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	L			
	Lender Name		Date Interest Accrued			
	Street Address		<u> </u>			
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Lender Name		Date Interest Accrued			
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name	l	Date Interest Accrued			
	Street Address		l			
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	l			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Sur	nmary of Dishursen	nents " line 3(e))	l		

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

COMMIT	TEE ID	NUME	ER
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REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

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

Schedule B(4), page____ of ____

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

/	Candidate C	Committee Recipient I	nformation	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 Contri	bution Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Conti	ibution Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Conti	ibution Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Conti	ibution Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contr	l ibution Made			

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

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

/	Political Action Co	ommittee Recipient I r	nformation	Amount Contributed	Cumulative Amount this	Cumulative Amount this
	Committee Name				Reporting Period	Election Cycle
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	on Made			
	Committee Name					
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	on Made			
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	on Made			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	ion Made			
	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contributi	ion Made			
	Enter total only if last page of scheo (transfer the total disbursed this period to	<u> </u>				

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

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party Ro	ecipient I nformati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	<u>I</u> Made			
	Committee Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	I 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	I Made			
	Committee Name	I				
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			

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

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partners	ship Recipient Inform	ation	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 Contri	L bution Made			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
	Partnership Name					
3	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
	Partnership Name					
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
	Partnership Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
_	Enter total only if last page of scl (transfer the total disbursed this perio	hedule				

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation	n / LLC Recipient I nf	formation	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 Contr	ibution Made			
	Corporation/LLC Name	I				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Corporation/LLC Name	I				
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	ribution Made			
	Corporation/LLC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Cont	I ribution Made			
	Enter total only if last page of sch (transfer the total disbursed this perio	nedule		I		

COMMITTEE	I D NUMBER
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IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Orga	nization Recipient In	formation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name				Troporting Consu	
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contri	bution Made			
	Labor Organization Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
	Labor Organization Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contr	ibution Made			
	Labor Organization Name					
	Street Address					
5		Chata	ZIP			
	City	State				
	Corporation Commission File Number	Date In-Kind Contr				
	Enter total only if last page of sc (transfer the total disbursed this perio	hedule od to "Summary of Disbu	ursements." line 5(f))			

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

COMMITTEE ID NUMBER	COMMIT	TEE IC	NUMBER
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INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

/	Expenditure I	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		
1	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	I ncluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	- □ Credit		
-	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address					
2	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			1		
3	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	ncluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP	_		
•	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (in	ncluding % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought	☐ Credit		
_	Enter total only if last page of schedul	e Summary of Disburs	sements " line 6)			
\	Enter total only if last page of schedul (transfer the total disbursed this period to "	Summary of Disburs	sements," line 6) Schedule B(6), page of			

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

•	Expenditure l	Recipient Informati	on	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
1	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	l (including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			_		
2	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported) Ballot Measure(s) Oppose		d (including % opposed)	_ □ Cash		
	Date of First Publication, Display, Delivery, or Broadcast		_ □ Credit			
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			-		
3	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Election Month/Year			_ □ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address					
4	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed	I (including % opposed)	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
	Enter total only if last page of schedul (transfer the total disbursed this period to "	e Summary of Disburse	ments " line 7)	I		

RECALL EXPENDITURES MADE: SCHEDULE B(8)

	Expenditure F	Recipient Informati	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 Re	called	_ ☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Office Held		- □ Credit		
	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address			_		
2	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order? Candidate Sought to be F		☐ Cash			
	Date of First Publication, Display, Delivery, or Broadcast		_ □ Credit			
	Recipient Name	Mode of Advertising (TV, mail, etc)				
	Street Address					
3	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re	called	☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast Office Held			_ □ Credit		
	Recipient Name	<u> </u>	Mode of Advertising (TV, mail, etc)			
	Street Address			1		
4	City	State	ZIP	1		
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Re		☐ 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 "5"	l e Summary of Disburse	ments," line 8)			

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

/		Benefitted Candidate	9	Amount	Cumulative Amount this	Cumulative Amount this
	Candidate Name		Date Benefit Provided		Reporting Period	Election Cycle
	Street Address	Street Address				
1	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address		1			
2	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
3	Gity B	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Candidate Name		Date Benefit Provided			
	Street Address					
4		State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Enter total only if last page of s (transfer the total disbursed this per	chedule riod to "Summary of Disl	bursements," line 9)			

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 Friends of Bryan McClure		Payment Date 09/30/2022	180.00	180.00	180.00
	Street Address 22332 N Cherrywood Dr					
1	City Queen Creek	State AZ	ZIP 85142	☑ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	ense (if applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address		·			
2	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	ense (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address	'				
3	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	ense (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
4	City	State	ZIP	□ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	ense (if applicable)	□ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Exp	ense (if applicable)	□ Cash □ Credit		
	Enter total only if last page of sched	lula		1		

REIMBURSEMENTS MADE: SCHEDULE B(11)

_	Re	cipient Informatio	n	Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
	Street Address					
1	City	State	ZIP	T Oak		
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
2	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Name					
	Street Address	Street Address				
5	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	☐ Cash☐ Credit		
	Entertate and if last warms of					
	Enter total only if last page of scho (transfer the total disbursed this period	to "Summary of Dis	bursements," line 11)			

OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

		Debt Information		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	I	Date that Debt Accrued			
	Name		L			
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed	I	Date that Debt Accrued			
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Payable or Debt Owed	I	Date that Debt Accrued			
	Name					
	Street Address					
5	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued	-		

Schedule B(12), page____ of ____

TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 13)		

Schedule B(13), page____ of ____

MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

		Recipient Information	า	Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					
1	Street Address					
	City	State	ZIP	□ Cash		
	Disbursement Type	·	Disbursement Date	□ Credit		
	Name					
	Street Address					
2	City	State	ZIP	□ Cash		
	Disbursement Type		Disbursement Date	☐ Casii		
	Name					
	Street Address					
3	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
4	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Name					
	Street Address					
5	City	State	ZIP			
	Disbursement Type		Disbursement Date	□ Cash □ Credit		
	Enter total only if last page of s (transfer the total disbursed this pe	schedule	hursements " line 14)			

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 (If disbursements of \$250 or less are listed on any of the other disbursement schedules, do not include them on Schedule B(15))		
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 ____