

| COMMITTEE | INFORMATION | (required): |
|-----------|-------------|-------------|
|-----------|-------------|-------------|

| | Committee Information: | Committee Name: | |
|------|---------------------------------|---|---|
| CANI | DIDATE INFORMATION (only if fil | ing 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 | e candidate committee's first, cumulative rep | ort for the election cycle. Also select appropriate Reporting Period below. |
| | Cumulative reporting perio | od start date (which supersedes the start d | ate for the Reporting Period selected below): |
| REP | ORTING PERIOD (check one): | | |

| REPORTING PERIOD | REPORT DUE |
|--|--------------------------------------|
| 2023 March Pre-Election Report (Local Only): January 1, 2023 to February 25, 2023 | February 26, 2023 to March 4, 2023 |
| 2023 March Post-Election (Q1) Report (Local Only): February 26, 2023 to March 31, 2023 | April 1, 2023 to April 15, 2023 |
| 2023 Quarter 1 Report: January 1, 2023 to March 31, 2023 | April 1, 2023 to April 17, 2023 |
| 2023 May Pre-Election Report (Local Only): April 1, 2023 to April 29, 2023 | April 30, 2023 to May 6, 2023 |
| 2023 May Post-Election (Q2) Report (Local Only): April 30, 2023 to June 30, 2023 | July 1, 2023 to July 15, 2023 |
| 2023 Quarter 2 Report: April 1, 2023 to June 30, 2023 | July 1, 2023 to July 17, 2023 |
| 2023 August Pre-Election Report (Local Only): July 1, 2023 to July 15, 2023 | July 16, 2023 to July 22, 2023 |
| 2023 August Post-Election (Q3) Report (Local Only): July 16, 2023 to September 30, 2023 | October 1, 2023 to October 16, 2023* |
| 2023 Quarter 3 Report: July 1, 2023 to September 30, 2023 | October 1, 2023 to October 16, 2023* |
| 2023 November Pre-Election Report (Local Only): October 1, 2023 to October 21, 2023 | October 22, 2023 to October 28, 2023 |
| 2023 November Post-Election (Q4) Report (Local Only): October 22, 2023 to December 31, 2023 | January 1, 2024 to January 16, 2024* |
| 2023 Quarter 4 Report: October 1, 2023 to December 31, 2023 | January 1, 2024 to January 16, 2024* |
| 2024 March Pre-Election Report (Local Only): January 1, 2024 to February 24, 2024 | February 25, 2024 to March 2, 2024 |
| 2024 March Post-Election (Q1) Report (Local Only): February 25, 2024 to March 31, 2024 | April 1, 2024 to April 15, 2024 |
| 2024 Quarter 1 Report: January 1, 2024 to March 31, 2024 | April 1, 2024 to April 15, 2024 |
| 2024 May Pre-Election Report (Local Only): April 1, 2024 to May 4, 2024 | May 5, 2024 to May 11, 2024 |
| 2024 May Post-Election (Q2) Report (Local Only): May 5, 2024 to June 30, 2024 | July 1, 2024 to July 15, 2024 |
| 2024 Quarter 2 Report: April 1, 2024 to June 30, 2024 | July 1, 2024 to July 15, 2024 |
| 2024 August Pre-Primary Election Report: July 1, 2024 to July 20, 2024 | July 21, 2024 to July 27, 2024 |
| 2024 August Post-Primary Election (Q3) Report: July 21, 2024 to September 30, 2024 | October 1, 2024 to October 15, 2024 |
| 2024 Quarter 3 Report: July 1, 2024 to September 30, 2024 | October 1, 2024 to October 15, 2024 |
| 2024 November Pre-General Election Report: October 1, 2024 to October 19, 2024 | October 20, 2024 to October 26, 2024 |
| 2024 November Post-General Election (Q4) Report: October 20, 2024 to December 31, 2024 | January 1, 2025 to January 15, 2025 |
| Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date | Same Date of Termination |
| *Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§§ 1-24 | 3(A) 1-301 and 1-303 |

*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§§ 1-243(A), 1-301 and 1-303.

FINANCIAL SUMMARY (required):

| Activity | Cash Activity This Reporting Period | Election Cycle to Date |
|---|--|---------------------------|
| (a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period) | | |
| (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. Lines (a)-(d) still must be following page need to be filed. | e completed, but only this c | over 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.

| Printed Name of Committee Treasurer | Signature of Committee Treasurer | Date | |
|-------------------------------------|----------------------------------|----------|--|

SUMMARY OF RECEIPTS (Schedule A):

| uity |
|------|
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SUMMARY OF DISBURSEMENTS (Schedule B):

| / | Disbursements | Cash | Equity |
|-----|--|------|--------|
| 1. | Disbursements for Operating Expenses | | |
| 2. | Contributions Made | | |
| | (a) Candidate Committees | | |
| | (b) Political Action Committees | | |
| | (c) Political Parties | | |
| | (d) Partnerships | | |
| | (e) Corporations & Limited Liability Companies (PAC & Political Parties Only) | | |
| | (f) Labor Organizations (PAC & Political Parties Only) | | |
| | (g) Monetary Contributions Subtotal (add 2(a) through 2(f)) | | |
| | (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 2(b) & 2(c)) | | |
| 4. | Rebates and Refunds Made (Non-Contributions) | | |
| 5. | Value of In-Kind Contributions Provided | | |
| | (a) Candidate Committees | | |
| | (b) Political Action Committees | | |
| | (c) Political Parties | | |
| | (d) Partnerships | | |
| | (e) Corporations & Limited Liability Companies (PAC & Political Parties Only) | | |
| | (f) Labor Organizations (PAC & Political Parties Only) | | |
| | (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 | | 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 | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | | | | |

*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)

| / | | | | | Cumulative | Cumulative |
|---|--|--------------------|----------------------------|-----------------|---------------------------------|----------------------------|
| / | Individual Co | ontributor Informa | tion | Amount Received | Amount this Reporting Period | Amount this Election Cycle |
| | Name | | Date Contribution Received | | . 0 | · |
| | Street Address | | I | | | |
| 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 | | 7ID | | | |
| | | | Lii | | | |
| | Occupation | Employer | | | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Occupation | Employer | I | | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Enter total only if last page of schedu (transfer the total received this period to "S | | | | | |

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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 | | | | | |
| 2 | City | State ZIP | | | | |
| | Committee ID Number | Date Contribution Receive | ed | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Received | | | | |
| | 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 school de | | | | | |
| | 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 Committe | ee Contributor In | formation | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---------------------------|--|---------------------|-----------------|---|---|
| mmittee Name | | | | | |
| eet Address | | | | | |
| , | State | ZIP | | | |
| mmittee ID Number | Date Contribution Receive | d | | | |
| mmittee Name | | | | | |
| eet Address | | | | | |
| 1 | State | ZIP | | | |
| mmittee ID Number | Date Contribution Receive | ed | | | |
| mmittee Name | | | | | |
| Street Address | | | | | |
| / | State | ZIP | | | |
| mmittee ID Number | Date Contribution Receive | <u>l</u> ed | | | |
| mmittee Name | | | | | |
| eet Address | | | | | |
| / | State | ZIP | | | |
| mmittee ID Number | Date Contribution Receive | <u>l</u> | | | |
| mmittee Name | | | | | |
| eet Address | | | | | |
| 1 | State | ZIP | | | |
| mmittee ID Number | Date Contribution Receive | d ed | | | |
| iter total only if la | st page of schedule ived this period to "Sumr | st page of schedule | | st page of schedule | st page of schedule |

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 | 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 Con | tributor Informatio | 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 Receive | ed | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Corporation Continues Date Continuent Neceived | | | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | - | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | Supplied to thinks on the number | Date Contribution (Cock) | | | | |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | - | | |
| | Corporation Commission File Number | Date Contribution Receive | ed | | | |
| | | | | | | 1 |
| | Enter total only if last page of schedule (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 Inform | nation | Amount Received | 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 | 1 | | | | |
| | 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 | <u>l</u> | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sur | mmony of Descints " | line 1/h)\ | | | |
| | triansier the total received this period to Sur | illiary of Receipts, | IIIIC 1(II)) | | | |

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



MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

| | | Labor Organization (| Contributor Inforn | 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 Contribution Receive | I ed | | | |
| | | Labor Organization Name | | | | | |
| | | Street Address | | | | | |
| | 2 | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date Contribution Receive | <u> </u> ed | | | |
| - | | Labor Organization Name | | | | | |
| | | Street Address | | | | | |
| | 3 | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date Contribution Receive | <u> </u> ed | | | |
| - | | Labor Organization Name | | | | | |
| | | Street Address | | | | | |
| | 4 | City | State | ZIP | | | |
| | | Corporation Commission File Number | Date Contribution Receive | <u>l</u> ed | | | |
| | | Labor Organization 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 "Sumi | I mary of Receipts," I | ine 1(i)) | <u> </u> | | |

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 | | |
| 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 | <u> </u> | | |
| | Occupation | Employer | | - | | |
| | Name | | Date Contribution Received | | | |
| | Street Address | | | _ | | |
| 5 | | 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(j)) | | | |

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



REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

| / | Contributo | r Information | | Amount Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------|-------------------------------|-----------------|---|---|
| | Name | | Date Contribution Refunded | | | |
| | Street Address | | <u> </u> | _ | | |
| 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 | - | | |
| | ID Number (if applicable) | | Date of Original Contribution | - | | |
| | Enter total only if last page of eah adda | | | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," | line 1(I)) | | | |

Schedule A(1)(I), page____ of___



LOANS RECEIVED: SCHEDULE A(2)(a)

| / | Lender I | nformation | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--|----------------------------------|-----------------|---|---|
| | Lender Name | Date Loan Received | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (| PACs and Political Parties Only) | - | | |
| | Lender Name | Date Loan Received | | | | |
| | Street Address | <u> </u> | | | | |
| 2 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (| PACs and Political Parties Only) | | | |
| | Lender Name | Date Loan Received | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (PACs and Political Parties Only) | | | | |
| | Lender Name | Date Loan Received | | | | |
| | Street Address | <u> </u> | | | | |
| 4 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (PACs and Political Parties Only) | | | | |
| | Lender Name | Date Loan Received | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Non-Electoral Purpose? (| PACs and Political Parties Only) | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | | ine 2(a)) | | | |

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



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

| Lender Information Amount Forgiven Amount this Amoun | |
|--|-----------------------------------|
| Street Addresss 1 City State ZPP Criginal Amount of Loan London Name Date Forgivenese Received Street Addresss 2 City State ZPP Criginal Amount of Loan Amount Still Cutstanding London Name Date Forgivenese Received Street Addresss 3 City State ZPP Criginal Amount of Loan Amount Still Cutstanding London Name Date Forgivenese Received Street Addresss 4 City State ZPP Criginal Amount of Loan Amount Still Cutstanding London Name Date Forgivenese Received Street Addresss 4 City State Street Addresss 5 City State Date Forgivenese Received Date Forgivenese Received Street Addresss Date Forgivenese Received Street Addresss City State Date Forgivenese Received | nulative unt this ion Cycle |
| Cay | |
| Criginal Amount of Loan Lender Name Date Forgineness Received Street Address City Original Amount of Loan Amount Self Outstanding Date Forgiveness Received Street Address City Original Amount of Loan Amount Self Outstanding Date Forgiveness Received Street Address City Original Amount of Loan Amount Self Outstanding Lender Name Date Forgiveness Received Street Address Lender Name Date Forgiveness Received Street Address Lender Name Date Forgiveness Received City Original Amount of Loan Amount Self Outstanding Lender Name Date Forgiveness Received Street Address Lender Name Date Forgiveness Received Street Address Lender Name Date Forgiveness Received Street Address Lender Name Date Forgiveness Received | |
| Lander Name Date Forgiveness Received Street Address ZIP Original Amount of Loan Amount Still Outstanding Lander Name Date Forgiveness Received Street Address 3 City Original Amount of Loan Amount Still Outstanding Lander Name Date Forgiveness Received Street Address 3 City Original Amount of Loan Amount Still Outstanding Lander Name Date Forgiveness Received Street Address 4 City Original Amount of Loan Amount Still Outstanding Lander Name Date Forgiveness Received Street Address 4 City Original Amount of Loan Amount Still Outstanding Lander Name Date Forgiveness Received | |
| Street Address Stre | |
| City State ZIP | |
| Original Amount of Loan Amount Still Outstanding Lander Name Date Forgiveness Received Street Address City Original Amount of Loan Amount Still Outstanding Lander Name Date Forgiveness Received Street Address Lander Name Date Forgiveness Received Lander Name Date Forgiveness Received Lander Name Date Forgiveness Received Street Address Lander Name Date Forgiveness Received Street Address Lander Name Date Forgiveness Received | |
| Lender Name Date Forgiveness Received | |
| Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address Tip Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address Tip Original Amount of Loan Amount Still Outstanding | |
| State ZIP | |
| City State ZIP City State ZIP | |
| Lender Name Street Address City Original Amount of Loan Amount Still Outstanding Date Forgiveness Received Street Address City State ZIP Date Forgiveness Received Street Address City Street Address City Original Amount of Loan Amount Still Outstanding City Original Amount of Loan Amount Still Outstanding | |
| Street Address City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding | |
| City State ZIP | |
| City State ZIP Original Amount of Loan Amount Still Outstanding Lender Name Date Forgiveness Received Street Address City State ZIP Original Amount of Loan Amount Still Outstanding | |
| Lender Name Street Address City Original Amount of Loan Date Forgiveness Received ZIP Amount Still Outstanding | |
| Street Address City State ZIP Original Amount of Loan Amount Still Outstanding | |
| 5 City State ZIP Original Amount of Loan Amount Still Outstanding | |
| Original Amount of Loan Amount Still Outstanding | |
| | |
| Enter total only if last page of schedule | |
| Entertotal only it last page of sofiedule | |

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 |
|---------------------|-------------------------------|---|-----------------------------------|---|--|
| wer Name | | Date Repayment Received | | | |
| t Address | | | | | |
| | State | ZIP | - | | |
| nal Amount Borrowed | Amount Still Outstanding | I | - | | |
| wer Name | | Date Repayment Received | | | |
| t Address | | | - | | |
| | State | ZIP | | | |
| nal Amount Borrowed | Amount Still Outstanding | | - | | |
| wer Name | | Date Repayment Received | | | |
| t Address | | _ | | | |
| | State | ZIP | _ | | |
| nal Amount Borrowed | Amount Still Outstanding | | | | |
| wer Name | | Date Repayment Received | | | |
| t Address | | | - | | |
| | State | ZIP | _ | | |
| nal Amount Borrowed | Amount Still Outstanding | | _ | | |
| wer Name | | Date Repayment Received | | | |
| t Address | | | - | | |
| | State | ZIP | _ | | |
| nal Amount Borrowed | Amount Still Outstanding | | _ | | |
| er total o | only if last page of schedule | Borrowed Amount Still Outstanding Only if last page of schedule | Borrowed Amount Still Outstanding | Amount Still Outstanding only if last page of schedule | Borrowed Amount Still Outstanding only if last page of schedule |

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



INTEREST ACCRUED ON LOANS MADE: SCHEDULE A(2)(d)

| | | Information | , | Amount of Interest Accrued | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------|-----------------------|-------------------------------|---|---|
| | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | l | | | |
| 1 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | 1 | | | |
| | Borrower Name | I | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Borrower Name Date Interest Accrued | | 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 | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Borrower Name | | Date Interest Accrued | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Original Amount Borrowed | Amount Still Outstanding | | | | |
| | Enter total only if lost wass of sales did- | | | | | |
| | 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)

| | | 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 | <u>l</u> | | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | l | | | |
| 2 | City | State | ZIP | | | |
| | Original Purchase Amount | Reason for Refund/Rebate | <u> </u> | | | |
| | Payor Name | | Date Rebate/Refund Received | | | |
| | Street Address | | | | | |
| 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 | | Date Rebate/Refund Received | | | |
| | Street Address | | | | | |
| 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 | | | | | |
| | (transfer the total received this period to "Sum | mary of Receipts," I | ine 3) | | | |

Schedule A(3), 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)

| | Individ | lual Contributor Informat | ion | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|---------------------------------------|------------------------------------|-----------------|---|---|
| | Name | | Date In-Kind Contribution Received | | | - |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | I | Date In-Kind Contribution Received | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Occupation | Employer | | | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | 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 | Street Address | | | | |
| 5 | City | State | ZIP | | | |
| | Occupation | Employer | | _ | | |
| | Enter total only if last name of a | ah adula | | | | |
| | Enter total only if last page of so (transfer the total received this period | chedule od to "Summary of Receipts | ," line 5(a)) | | | |

 * 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 1(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)

| / | Candidate Committe | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | | |
|---|---------------------|---------------------------|---|---|--|--|
| | Committee Name | | | | | |
| | Street Address | | | - | | |
| | Sueet Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | I Received | | | |
| | Committee Name | | | | | |
| | 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 | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | _ | | |
| | | | | | | |

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 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 Committee ID Number Date In-Kind Contribution Committee ID Number Date In-Kind Contribution 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 City State ZIP Committee Name 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 |

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



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

| / | / | Political Action Committ | 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 In-Kind Contribution I | Received | | | |
| | | Committee Name | | | | | |
| | = | Street Address | | | | | |
| 2 | 2 | City | State | ZIP | | | |
| | = | Committee ID Number | Date In-Kind Contribution | Received | | | |
| - | | Committee Name | | | | | |
| | = | Street Address | | | | | |
| 3 | 3 | City | State | ZIP | | | |
| | = | Committee ID Number | Date In-Kind Contribution | Received | | | |
| - | | Committee Name | | | | | |
| | = | Street Address | | | | | |
| 4 | 4 | City | State | ZIP | | | |
| | = | Committee ID Number | Date In-Kind Contribution Received | | | | |
| | | Committee Name | | | | | |
| | = | Street Address | | | | | |
| Ę | 5 | City | State | ZIP | | | |
| | - | Committee ID Number | Date In-Kind Contribution | Received | | | |
| \mid | | Enter total only if last page of schedule (transfer the total received this period to "Sumi | (5) | | | | |
| | - [| (transter the total received this period to "Sumi | mary of Receipts," I | ine 5(e)) | | | |

Arizona Secretary of State Revision 9/28/23

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



IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

| / | | | | | | |
|---|--|---------------------------|------------|-----------------|---|---|
| | Political Party Co | ntributor Informat | ion | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| | Committee Name | | | | | |
| 1 | Street Address | | | | | |
| | 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 Contribution | Received | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Received | | | |
| | Committee Name | | | | | |
| | Street Address | Street Address | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Received | _ | | |
| | Committee Name | | | | | |
| | 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 "Sum | mary of Receipts," I | line 5(f)) | | | |

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



IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

| / | | | | | | |
|---|---|---------------------------|----------|-----------------|---|---|
| | Partnership Co | ontributor Informati | 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 | <u>-</u> | | |
| | 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 "Summary of Receipts," line 5(g)) | | | | | |

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 | Cumulative Amount this |
|---|--|---------------------------|------------|-----------------|---------------------------|---------------------------|
| | Corporation/LLC Name | | | 7 | Reporting Period | Election Cycle |
| | 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 | | | | | |
| F | 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 "Sur | nmary of Receipts," l | line 5(h)) | | | |

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



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

| | Labor Organization | Contributor Inforr | 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 | Received | _ | | |
| | Labor Organization Name | | | | | |
| | Street Address | | _ | | | |
| 3 | City | State | ZIP | _ | | |
| | | | | _ | | |
| | Corporation Commission File Number Date In-Kind Contribution Received | | | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number Date In-Kind Contribution Received | | | 1 | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | Received | 1 | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sur | <u>, </u> | | | | |
| _ | transier the total received this period to "Sur | nmary of Receipts," | line ɔ(l)) | | | |

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 | | | - | | |
| 1 | City | State | ZIP | _ | | |
| | Asset or Property Contributed | | | _ | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | _ | | |
| 2 | City | State | ZIP | _ | | |
| | Asset or Property Contributed | | | | | |
| - | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | _ | | |
| 3 | City | State | ZIP | | | |
| | Asset or Property Contributed | | | - | | |
| | | | | | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | - | | |
| | Asset or Property Contributed | 1 | 1 | 1 | | |
| | Name | | Date In-Kind Contribution Received | | | |
| | Street Address | | | - | | |
| 5 | City | State | ZIP | - | | |
| | Asset or Property Contributed | | | - | | |
| H | Enter total only if last page of schedule (transfer the total received this period to "Sur | | | | | |
| Ļ | (transfer the total received this period to "Sur | | line 5(j)) | | | |



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

SCHEDULE A(6)

| | Source | Information | | Amount Received | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|--------------------------------|--------------------------------|-----------------|---|---|
| | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | <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 | I | | | | |
| | 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 | | | | | |
| | Name | | Date In-Kind Donation Received | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Type of Item Donated | | | - | | |
| | 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," | line 6) | | | |

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 | | | | | |
| 1 | City | State | ZIP | | | |
| | Services or Goods Provided on Credit | l | Date of Extension of Credit | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Services or Goods Provided on Credit | | Date of Extension of Credit | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Services or Goods Provided on Credit Date of Extension of | | | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Services or Goods Provided on Credit | | Date of Extension of Credit | _ | | |
| | Name | | | | | |
| | Street Address | | | _ | | |
| 5 | City | State | ZIP | | | |
| | Services or Goods Provided on Credit | | Date of Extension of Credit | - | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts " | line 7(a)) | | | |
| _ | <u>'</u> | | ` '' | | 1 | |

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



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

| | Creditor Information | | | Payment Amount on Credit Extended | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|----------------------|--------------------------------------|---|---|---|
| | Name | | | | | |
| 1 | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| 2 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| 3 | Name | | | | | |
| | Street Address | | | | | |
| | City | State | ZIP | | | |
| | Services or Goods Originally Provided on Credit | | Date of Original Extension of Credit | | | |
| | Name | | | | | |
| 4 | 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 | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line | | | | | |
| | (transfer the total received this period to "Sum | mary of Receipts," l | ine 7(b)) | | | |

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



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

| Payor Coi | Payment Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | | |
|---|---|--|---|--------------|---------------------------|
| Committee Name | | Payment Date | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Date of Joint Fundraising Event (if applicable) | Type of Shared Expe | ense (if applicable) | | | |
| Committee Name | | Payment Date | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Date of Joint Fundraising Event (if applicable) | Type of Shared Expe | ense (if applicable) | | | |
| Committee Name | | Payment Date | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Date of Joint Fundraising Event (if applicable) | Type of Shared Expe | ense (if applicable) | | | |
| Committee Name | | Payment Date | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Date of Joint Fundraising Event (if applicable) | Type of Shared Expe | ense (if applicable) | | | |
| Committee Name | | Payment Date | | | |
| Street Address | | | | | |
| City State | | ZIP | | | |
| Date of Joint Fundraising Event (if applicable) | Type of Shared Expe | ense (if applicable) | | | |
| Enter total only if last page of schedule | | | | | |
| | Committee Name Street Address City Date of Joint Fundraising Event (if applicable) Committee Name Street Address City Date of Joint Fundraising Event (if applicable) Committee Name Street Address City Date of Joint Fundraising Event (if applicable) Committee Name Street Address City Date of Joint Fundraising Event (if applicable) Committee Name Street Address City Date of Joint Fundraising Event (if applicable) Committee Name Street Address City Date of Joint Fundraising Event (if applicable) Enter total only if last page of schedu | Committee Name Street Address City State Date of Joint Fundraising Event (if applicable) Type of Shared Expending Ev | Street Address City State ZIP Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable) Committee Name Payment Date Street Address City State ZIP Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable) Committee Name Payment Date Street Address City State ZIP Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable) Committee Name Payment Date Street Address City State ZIP Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable) Committee Name Payment Date Street Address City State ZIP Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable) Committee Name Payment Date Street Address City State ZIP Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) Type of Shared Expense (if applicable) | Payment Date | Payment Amount Management |

Schedule A(8), page____ of ____



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

| | Payor Information | | | 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 "Summary of Receipts," line 9) | | | | | |

Schedule A(9), page____ of ____



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

| / | Info | rmation | | 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 | | | | | |
| | 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 A | | | | | |
| | 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 | | | | | |
| | (transfer the total received this period to "Sum | mary of Receipts," | line 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)

| | | 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 | I | Receipt Date | | | |
| | Name | | L | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Receipt Type | | Receipt Date | | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Receipt Type | <u> </u> | Receipt Date | | | |
| | Name | | <u> </u> | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Receipt Type | I | Receipt Date | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," li | ine 12) | <u> </u> | | |

Schedule A(12), page____ of ____



DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

| Recipient Information | | Amount Paid | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | | |
|-----------------------|--------------------------------|--|---|---|--|--|
| | Name Disbursement Date | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Type of Operating Expense Paid | Non-Electoral Pur | pose? (PACs and Political Parties Only) | ☐ Cash☐ Credit | | |
| | | | | | | |
| | Name | Disbursement Da | ate | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Type of Operating Expense Paid | Non-Electoral Purpose? (PACs and Political Parties Only) | | □ Cash □ Credit | | |
| | Name | | Disbursement Date | | | |
| | Street Address | Street Address | | | | |
| 3 | City | State | ZIP | | | |
| | Type of Operating Expense Paid | Non-Electoral Purpose? (PACs and Political Parties Only) | | □ Cash □ Credit | | |
| | Name | Disbursement Da | ate | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Type of Operating Expense Paid | | pose? (PACs and Political Parties Only) | □ Cash □ Credit | | |
| | Name | Disbursement Date | | | | |
| | | | | | | |
| _ | Street Address | | | | | |
| 5 | City | State | ZIP | □ Cash □ Credit | | |
| | Type of Operating Expense Paid | Non-Electoral Pur | pose? (PACs and Political Parties Only) | i orean | | |

Schedule B(1), page____ of ____



MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

| / | Candidate Committee | ee Recipient Infor | mation | Amount Contributed | Cumulative Amount this | Cumulative Amount this |
|---|--|--|--------------------|-----------------------|---------------------------|---------------------------|
| | Committee Name | | | | Reporting Period | Election Cycle |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | □ Credit | | |
| | Committee Name | | | | | |
| 2 | Street Address | T | 1 | | | |
| _ | City | State | ZIP | □ Cash □ Credit | | |
| | Committee ID Number Committee Name | Committee ID Number Date Contribution Made | | | | |
| 3 | Street Address | | | | | |
| | | 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 | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | ☐ Credit | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Su | manan, of Diahumaan | nente " line 2(a)) | | | |



MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

| / | Political Action Commit | tee Recipient Info | ormation | 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 | | | | | |
| _ | Street Address | | | | | |
| 2 | 2 City | State | ZIP | □ Cash | | |
| | Committee ID Number Date Contribution Made | | | ☐ Credit | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | □ Cash | | |
| | Committee ID Number Date Contribution Made | | | ☐ Credit | | |
| | Committee Name | Committee Name | | | | |
| | Street Address | Street Address | | | | |
| 4 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | ☐ Credit | | |
| | Committee Name | Committee Name | | | | |
| | Street Address | Street Address | | | | |
| 5 | 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 "Sun | nmary of Disbursen | nents," line 2(b)) | | | |
| \ | _ | O-t- | edule B(2)(b), page of | · | | / |



MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

| | Political Party Ro | ecipient Information | on | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|-----|---|-------------------------------|-----|-----------------------|---|---|
| | Committee Name | | | | , | |
| 1 | Street Address City | State | ZIP | | | |
| | Committee ID Number | Date Contribution Made | | ☐ Cash☐ Credit | | |
| | Committee Name | | | | | |
| - | Street Address | | | | | |
| | City | State | ZIP | | | |
| • | Committee ID Number | Date Contribution Made | | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| • | Committee ID Number | Date Contribution Made | | □ Cash □ Credit | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Committee ID Number | Date Contribution Made | | □ Credit | | |
| | Committee Name | | | | | |
| . [| Street Address | | | | | |
| | City Committee ID Number | State Date Contribution Made | ZIP | ☐ Cash☐ Credit | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sui | | | | | |



MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

| | Partner | ship Recipient Information | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|-----|-------------------------------------|--|-----------------------|---|---|
| | Partnership Name | | | 1 0 | |
| | Street Address | | | | |
| 1 | City | State ZIP | □ Cash | | |
| | Corporation Commission File Number | Date Contribution Made | □ Credit | | |
| | Partnership Name | | | | |
| | Street Address | | | | |
| 2 | City | State ZIP | □ Cash | | |
| | Corporation Commission File Number | Date Contribution Made | ☐ Casii | | |
| 3 0 | Partnership Name | | | | |
| | Street Address | | | | |
| | City | State ZIP | □ Cash | | |
| | Corporation Commission File Number | Date Contribution Made | ☐ Casii | | |
| | Partnership Name | | | | |
| | Street Address | | | | |
| 1 | City | State ZIP | □ Cook | | |
| | Corporation Commission File Number | Date Contribution Made | □ Cash □ Credit | | |
| | Partnership Name | 1 | | | |
| | Street Address | | | | |
| | City | State ZIP | | | |
| | Corporation Commission File Number | Date Contribution Made | □ Cash □ Credit | | |
| - | Enter total only if last page of sc | hedule bd to "Summary of Disbursements," line 2(d)) | | | |



MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

| | Corporation | n / LLC Recipient In | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle | |
|---|--|----------------------|-----------------------|---|---|--|
| | Corporation/LLC Name | 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 | Made | □ Cash □ Credit | ☐ Cash☐ Credit | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Corporation/LLC Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | 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 perio | l hedule | | | | |



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

| | Labor Orga | nization Recipient In | formation | Amount Contributor | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--------------------------------------|-------------------------|-----------|-----------------------|---|---|
| | Labor Organization Name | Labor Organization Name | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cook | | |
| | Corporation Commission File Number | Date Contribution I | Made | □ Cash □ Credit | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date Contribution | Made | □ 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 | Made | □ Cash □ Credit | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | П C | | |
| | Corporation Commission File Number | Date Contribution | Made | □ Cash □ Credit | | |
| | Enter total only if last page of scl | nedule | | <u> </u> | | |

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



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

| / | Contribute | or Information | | Amount Refunded | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|----------------------|-------------------------------|-----------------|---|---|
| | Committee Name | Date Refund Received | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Committee ID Number | | Date of Original Contribution | | | |
| | Committee Name | | Date Refund Received | | | |
| | 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 | | | _ | | |
| 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 | | | | | |

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



LOANS MADE: SCHEDULE B(3)(a)

| | Borrower | Information | | Amount Loaned | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|----------------------|-----------|---------------|---|---|
| | Borrower Name | | | | | |
| | Street Address | | | | | |
| 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 | l | | | |
| | Borrower Name | I | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Date Loan Made | I | | | |
| | Borrower Name | I | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Guarantor/Endorser Name | Date Loan Made | 1 | | | |
| | Enter total only if last page of schedule (transfer the total received this period to "Sum | mary of Receipts," I | ine 3(a)) | | | |

Schedule B(3)(a), page___of ___



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

| | | 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 | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Guarantor Name | <u> </u> | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Guarantor Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Borrower Name | Date Loan Guaranteed | | | | |
| | Guarantor Name | <u> </u> | | | | |
| | 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," I | ine 3(b)) | | | |

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



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

| / | <u> </u> | 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 | l | Date Forgiveness Made | | | |
| | et Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | Borrower Name | Borrower Name | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Original Amount of Loan | Amount Still Outstanding | | | | |
| | 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 | | | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sur | nmary of Disbursen | nents," line 3(c)) | | | |

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



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

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

Arizona Secretary of State Revision 9/28/23

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



ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

| Lender I | nformation | | Amount of Interest Accrued | Amount this | Cumulative Amount this Election Cycle | |
|--------------------------|--|--|---|---|--|--|
| Lender Name | | Date Interest Accrued | | | - | |
| Street Address | | <u> </u> | | | | |
| City | State | ZIP | | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | | |
| Lender Name | l | Date Interest Accrued | | | | |
| Street Address | et Address | | | | | |
| City | State | ZIP | | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | | |
| Lender Name | | Date Interest Accrued | | | | |
| Street Address | | | | | | |
| City | State | ZIP | | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | | |
| Lender Name | | Date Interest Accrued | | | | |
| treet Address | | | | | | |
| City | State | ZIP | | | | |
| Original Amount Borrowed | Amount Still Outstanding | | | | | |
| Lender Name | | Date Interest Accrued | | | | |
| Street Address | | | | | | |
| City | State | ZIP | | | | |
| | Amount Still Outstanding | | _ | | | |
| | Lender Name Street Address City Original Amount Borrowed Lender Name Lender Name Street Address City Original Amount Borrowed Lender Name Lender Name | 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 Original Amount Borrowed Amount Still Outstanding Lender Name 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 Street Address | Ender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Sill Outstanding Ender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Sill Outstanding Lender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Sill Outstanding Ender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Sill Outstanding Ender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Sill Outstanding Ender Name Date Interest Accrued Street Address City State ZIP Original Amount Borrowed Amount Sill Outstanding Date Interest Accrued Street Address City Date Interest Accrued Street Address Date Interest Accrued | Lender Name Sireet Address City State City | Lender Information Lender Name Date Inferest Accoused Street Address City State City State Date Inferest Accoused Amount Still Outstanding Date Inferest Accoused Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Date Inferest Accoused Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Date Inferest Accoused Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Date Inferest Accoused Street Address City State ZIP Original Amount Borrowed Amount Still Outstanding Date Inferest Accoused Street Address City State Date Inferest Accoused Date Inferest Accoused Street Address City State Date Inferest Accoused Date Inferest Accoused Street Accoused Date Inferest Accoused Street Accoused Date Inferest Accoused Street Accoused Date Inferest Accoused Date Inferest Accoused Street Accoused Date Inferest Accoused Date Inferest Accoused Date Inferest Accoused Street Accoused Date Inferest Accoused | |

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 | | | | | |
| 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 | Street Address | | | | |
| 3 | 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 | | | | | |
| 1 | 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 | | | | | |
| | City | State | ZIP | | | |
| | Corporation Commission File Number (if applicable) | Original Payment Amount | Name of Original Payor | | | |
| | Enter total only if last page of sche (transfer the total disbursed this period | edule | | | | |

Schedule B(4), page____ of ____



IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

| | Candidate Committe | e Recipient Inforr | nation | 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 | Made | | | |
| | Committee Name | l | | | | |
| | 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 | et Address | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | Made | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sur | mmary of Disbursen | nents," line 5(a)) | | | |

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



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

| / | Political Action C | ommittee Recipient In | formation | 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 Contributio | n Made | | | |
| | Committee Name | l . | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | on Made | | | |
| | Committee Name | Committee Name | | | | |
| | Street Address | | | | | |
| 3 | 3 City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | on Made | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | on Made | | | |
| | Committee Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | | | |
| | Committee ID Number | Date In-Kind Contribution | on Made | | | |
| | Enter total only if last name of sche | dule | | | | |
| | Enter total only if last page of sche (transfer the total disbursed this period | to "Summary of Disburse | ements," line 5(b)) | | | |

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



IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

| Political Party Re | ecipient Information | on | Amount Contributed | 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 Made | | | |
| Committee Name | | | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Committee ID Number | Date In-Kind Contribution | Made | | | |
| Committee Name | | | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Committee ID Number | Date In-Kind Contribution | Made | | | |
| Committee Name | | | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Committee ID Number | Date In-Kind Contribution Made | | | | |
| Committee Name | | | | | |
| Street Address | | | | | |
| City | State | ZIP | | | |
| Committee ID Number | Date In-Kind Contribution | Made | | | |
| | Committee Name Street Address City Committee ID Number Committee Name Street Address City Committee Name Street Address City Committee ID Number Committee ID Number City Committee ID Number Committee ID Number Committee ID Number Committee ID Number Committee Name Street Address City Committee ID Number Committee ID Number | Street Address City State Committee ID Number Date In-Kind Contribution Committee Name 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 Committee Name Street Address City State Committee Name Street Address City State Committee ID Number Date In-Kind Contribution Street Address City State Committee Name Street Address Street Address | Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee Name Street Address City State ZIP Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made | Committee ID Number Committee ID Number Date In-Kind Contribution Made Committee ID Number Date In-Kind Contribution Made | Committee Name Street Address City State Date in Kind Contribution Made Committee ID Number Date in Kind Contribution Made Committee ID Number Date in Kind Contribution Made Committee ID Number Date in Kind Contribution Made Committee Name Street Address City State ZiP Committee Name Street Address City State ZiP Committee ID Number Date in Kind Contribution Made Committee ID Number Street Address City State ZiP Committee ID Number Date in Kind Contribution Made Committee ID Number Date in Kind Contribution Made |

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



IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

| , | | | | | | |
|---|---|---------------------------|--------------------|-----------------------|---|---|
| | Partnership Red | cipient Informatio | n | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
| | Partnership Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | I Made | | | |
| | Partnership Name | L | | | | |
| | 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 | | | | | |
| 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 "Sur | mmary of Disbursen | nents," line 5(d)) | | | |

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



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

| Corporation / LLC proporation/LLC Name reet Address by proporation Commission File Number proporation/LLC Name reet Address by proporation Commission File Number proporation Commission File Number proporation/LLC Name | Recipient Informa State Date In-Kind Contribution State Date In-Kind Contribution | ZIP Made | Amount Contributed | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|---|---|--|---|
| proporation Commission File Number proporation/LLC Name reet Address | Date In-Kind Contribution | Made | | | |
| prporation Commission File Number proporation/LLC Name reet Address by proporation Commission File Number | Date In-Kind Contribution | Made | | | |
| orporation Commission File Number orporation/LLC Name reet Address by orporation Commission File Number | Date In-Kind Contribution | Made | | | |
| reet Address by proporation Commission File Number | State | ZIP | | | |
| reet Address ty proporation Commission File Number | | | | | |
| iy orporation Commission File Number | | | | | |
| proration Commission File Number | | | | | |
| | Date In-Kind Contribution | Made | | 1 | |
| orporation/LLC Name | | | | | |
| | | | | | |
| reet Address | | | | | |
| ly | State | ZIP | | | |
| orporation Commission File Number | Date In-Kind Contribution | Made | | | |
| prporation/LLC Name | | | | | |
| reet Address | | | | | |
| ly | State | ZIP | | | |
| proration Commission File Number | Date In-Kind Contribution Made | | | | |
| orporation/LLC Name | | | | | |
| reet Address | | | | | |
| ty | State | ZIP | - | | |
| orporation Commission File Number | Date In-Kind Contribution | Made | - | | |
| n tr | proporation Commission File Number reet Address y proporation/LLC Name proporation Commission File Number reet Address y proporation/LLC Name reet Address | proporation Commission File Number Date In-Kind Contribution proporation/LLC Name State State Date In-Kind Contribution Proporation Commission File Number Date In-Kind Contribution Date In-Kind Contribution Proporation/LLC Name Proporation Commission File Number Date In-Kind Contribution Date In-Kind Contribution Date In-Kind Contribution | proration Commission File Number Date In-Kind Contribution Made Proved Address State ZIP Proporation/LLC Name Date In-Kind Contribution Made Date In-Kind Contribution Made | proration Commission File Number Date In-Kind Contribution Made proration/LLC Name State ZIP proration Commission File Number Date In-Kind Contribution Made proration/LLC Name State ZIP proration/LLC Name State ZIP State ZIP State ZIP State ZIP | proration Commission File Number Date In-Kind Contribution Made proration/LLC Name State ZIP proration Commission File Number Date In-Kind Contribution Made proration/LLC Name State ZIP proration/LLC Name Tele Address y State ZIP Troporation Commission File Number Date In-Kind Contribution Made Date In-Kind Contribution Made |

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



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

| | Labor Organizatio | n Recipient Inform | ation | 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 | Made | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | _ | | |
| 2 | City | State | ZIP | _ | | |
| | Corporation Commission File Number | Date In-Kind Contribution | Made | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 3 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | Made | | | |
| | Labor Organization Name | | | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | | | |
| | Corporation Commission File Number | Date In-Kind Contribution | Made | _ | | |
| | Labor Organization 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 | | | | | _ |

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



INDEPENDENT EXPENDITURES MADE: SCHEDULE B(6)

| / | | Recipient Informa | | 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 | Locluding % 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 | | | |
| | Candidate(s) Supported (including % supported) | Candidate(s) Opposed (in | ncluding % opposed) | ☐ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Year | | □ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | | | |
| 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 | | □ Credit | | |
| | Recipient Name | <u> </u> | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | | | |
| 4 | City | State | ZIP | 1 | | |
| | 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 | | |

Schedule B(6), page____ of ____



BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

| | Expenditure | Recipient Info | ormation | 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 (including % opposed) | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Ye | ar | ☐ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | | | |
| | | | Opposed (including % opposed) | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast Election Month/Year | | ar | _ □ 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 (including % opposed) | _ □ Cash | | |
| | Date of First Publication, Display, Delivery, or Broadcast | Election Month/Yea | ar | _ □ Credit | | |
| | Recipient Name | | Mode of Advertising (TV, mail, etc) | | | |
| | Street Address | | | 1 | | |
| | City | State | ZIP | 1 | | |
| 4 | Ballot Measure(s) Supported (including % supported) | Ballot Measure(s) Opposed (including % opposed) | | _ □ Cash | | |
| 4 | Danot Measure(s) Supported (including % supported) | | | □ Credit | | |

Schedule B(7), page____ of ____



RECALL EXPENDITURES MADE: SCHEDULE B(8)

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

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SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

| / | | Benefitted Candidate | Э | 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 | | | | | |
| 3 | City | State | ZIP | | | |
| | Type of Benefit Provided | | | | | |
| | 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 | | | | |
| | Enter total only if last page (transfer the total disbursed this | s period to "Summary of Dis | bursements," line 9) | | | |

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JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

| / | Recipient Com | nmittee Information | ı | 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 | | | | | |
| 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 | | | | | |
| 3 | City | State | ZIP | □ Cash | | |
| | Date of Joint Fundraising Event (if applicable) Type of Shared Expense | | (if applicable) | □ Credit | | |
| | Committee Name | | Payment Date | | | |
| 4 | Street Address | | | | | |
| 4 | City | State | ZIP | □ Cash | | |
| | Date of Joint Fundraising Event (if applicable) Type of Shared Expense (| | (if applicable) | □ Credit | | |
| | Committee Name | | Payment Date | | | |
| 5 | Street Address | | T | | | |
| | City | State | ZIP | ☐ Cash | | |
| L | Date of Joint Fundraising Event (if applicable) | Type of Shared Expense (| (if applicable) | ☐ Credit | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Su | mmary of Disbursen | nents," line 10) | | | |
| \ | 1 | | | | ı | / |

Schedule B(10), page____ of ____



REIMBURSEMENTS MADE: SCHEDULE B(11)

| | Recipient | Information | | Reimbursement Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|---|-------------|--------------------|-------------------------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | State | ZIP | □ Cash | | |
| | Services or Goods Reimbursed | | Reimbursement Date | □ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 2 | City | State | ZIP | □ Cash | | |
| | Services or Goods Reimbursed | <u> </u> | Reimbursement Date | ☐ Cash | | |
| | 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 | | | | | |
| 5 | City | State ZIP | | | | |
| | Services or Goods Reimbursed | | Reimbursement Date | ☐ Cash☐ Credit | | |
| | Dervices di Guodis Reii/IDUI'Séd | | Reimbursement Date | | | |
| | Enter total only if last page of schedule (transfer the total disbursed this period to "Sui | (D) | | | | |

Schedule B(11), page____ of ____



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 | <u> </u> | 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," l | ine 12) | | | |

Schedule B(12), page____ of ____

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 | | |
| ecipient of Surplus Monies / Source of Transferred Debt | | |
| ecipient of Surplus Monies / Source of Transferred Debt | | |
| ecipient of Surplus Monies / Source of Transferred Debt | | |
| otal ransfer the total disbursed this period to "Summary of Disbursements," line 13) | | |

Schedule A(13), page____ of ____



MISCELLANEOUS DISBURSEMENTS: SCHEDULE B(14)

| | | Recipient Information | n | Amount | Cumulative Amount this Reporting Period | Cumulative Amount this Election Cycle |
|---|--|-----------------------|-------------------|-----------------|---|---|
| | Name | | | | | |
| | Street Address | | | | | |
| 1 | City | | ZIP | □ Cash | | |
| | Disbursement Type | | Disbursement Date | □ Credit | | |
| | Name | | • | | | |
| | Street Address | | | | | |
| 2 | City | | ZIP | □ Cash | | |
| | Disbursement Type | | Disbursement Date | □ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 3 | City | | ZIP | □ Cash | | |
| | Disbursement Type | 1 | Disbursement Date | □ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 4 | City | | ZIP | □ Cash | | |
| | Disbursement Type | ' | Disbursement Date | □ Credit | | |
| | Name | | | | | |
| | Street Address | | | | | |
| 5 | City | State | ZIP | □ Cash | | |
| | Disbursement Type | | Disbursement Date | □ Casn □ Credit | | |
| | Enter total only if last page (transfer the total disbursed this | of schedule | 1 | | | |

Schedule B(14), page____ of ____



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

Lane, Benjamin

Subject: FW: CASARES / Amended / City of Scottsdale Campaign Finance Report Due on Monday, April 15,

2024

Attachments: CASARES - Campaign Finance - Q1 - 15 Apr 2024.pdf

Stephen Casares

0

Mon 11:30 PM

From: Stephen Casares <stephen.h.casares@gmail.com>

Sent: Wednesday, April 10, 2024 9:53 AM **To:** Lane, Benjamin <BLane@scottsdaleaz.gov>

Subject: CASARES / Amended / City of Scottsdale Campaign Finance Report Due on Monday, April 15, 2024

↑ External Email: Please use caution if opening links or attachments!

Changes to the first two pages.

No other activity.

On Sun, Apr 14, 2024 at 9:50 PM Lane, Benjamin <BLane@scottsdaleaz.gov> wrote:

Dear Candidate Committees:

The 2024 Quarter 1 Campaign Finance Report is *due no later than tomorrow (Monday, April 15, 2024) by 11:59 p.m.*

IMPORTANT NOTE #1: State law recently changed and reports are now due on the third Monday of the reporting month.

Candidate Committees are required to file a 2024 Quarter 1 Report covering activity from January 1, 2024 to March 31, 2024.

If this is the first report you are filing for this election cycle, please make sure to do the following:

At the top of page 1 of the attached report, please check the "Cumulative Report" box.

Cumulative Report:

Check here if this is the candidate committee's first, cumulative report for the

For all candidates:

For the "Reporting Period" please check the "2024 Quarter 1 Report" box, which can be found in the middle of the first page.



2024 Quarter 1 Report: January 1, 2024 to March 31, 2024

IMPORTANT NOTE #2: If you did not have any activity during this period (either contributions or expenditures), you can file a "No Activity" report. Please contact me for more information on how to file a "No Activity" report if it is applicable to your committee.

A fillable version of the Campaign Finance Report is attached for your use and also can be found at:

https://www.scottsdaleaz.gov/Assets/ScottsdaleAZ/Elections/CampaignFinanceReport.pdf.

IMPORTANT NOTE #3: This is a new report form that has been updated to comply with recent changes in State law related to reporting dates. This form also covers activity for the 2023-24 Election Cycle. For this reason, please use the attached form to fill out your Campaign Finance Report.

Reports may be filed in the following ways:

- 1.Electronically after completing the report, you may email it to me prior to the filing deadline. I will send you an email confirming your report was received.
- 2.Hard copy reports may be filed in person with the City Clerk's Office at Scottsdale City Hall (3939 N. Drinkwater Blvd.) during normal business hours.

Any reports filed after the deadline will be assessed a late fee.

For reference, previously filed campaign finance reports for your committee can be found at: https://eservices.scottsdaleaz.gov/cityclerk/CampaignFinance

Campaign Finance Reports must be filed by 11:59 p.m. on Monday, April 15, 2024.

I hope this information helps and please contact me with any questions.

Sincerely, Ben



Ben Lane | City Clerk City of Scottsdale 3939 N. Drinkwater Blvd. | Scottsdale, AZ 85251 480-312-2411 | scottsdaleaz.gov