

PINAL • COUNTY wide open opportunity

STATE OF ARIZONA PINAL COUNTY POLITICAL COMMITTEE CAMPAIGN FINANCE REPORT

Certification of the Certifica

FOR OFFICE USE ONLY

RECEIVED

AUG 27 2012

		Due Detuges
	Email Address Fax #	
	Name of Candidate and Office Sought (if applicable)	Primary Election: August 28, 2012 General Election: November 6, 2012
-•	Sponsoring Organization (if applicable)	
,		
	City Zip Code Phone	2011002 CSS
	Soutan Valley 85143 480-882-9593	3. ID#
	Address	
	1905 ESIlveromita Trail	BU
	Full Name of Committee	MAE OCOM I DOMOGE OF TOE
١.	Ves Forkido	PINAL COUNTY SCHOOL OFFICE

. Re	eporting Period (Please Check Appropriate Box)	Due Between
а	JANUARY 31ST REPORT - For Period of November 23, 2010 through December 31, 2011	Jan. 1, 2012 and Jan. 31, 2012
b	JUNE 30TH REPORT - For Period of January 1, 2012 through May 31, 2012	June 1, 2012 and July 2, 2012
c	PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2012 through August 16, 2012	Aug. 17, 2012 and Aug. 24, 2012
	POST-PRIMARY ELECTION REPORT - For Period of August 17, 2012 through September 17, 2012	Sept. 18, 2012 and Sept. 27, 2012
•	PRE-GENERAL ELECTION REPORT - For Period of September 18, 2012 through October 25, 2012	Oct. 26, 2012 and Nov. 2, 2012
f \Bigg 🗖	POST-GENERAL ELECTION REPORT - For Period of October 26, 2012 through November 26, 2012	Nov. 27, 2012 and Dec. 6, 2012

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5а	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		W357,38
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	5496.91	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	11,300.00	16,300,00
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	0.00 (6,796,9)	0.00 ₂₂₇ 657.38
6a	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		Ø
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	1190.82	2334.52
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	15,600.09	20,322,84

1. Committee Nam	DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	2. ID#	PAGE 2
3. Report covering	period of Trunel - August Uc, 201	<u></u>	
	RECEIPTS	Column A This Period	Column B Campaign to Date
4. Contributions of	other than loans and in-kind:		
(a) Individuals - me	ore than \$25 (Total from Schedule A)	10.500	15.500
(b) Individuals - ag	ggregate \$25 or less (Total from Schedule A-1)	<i>'</i> Ø	Ø
(c) Political Comm	nillees (Total from Schedule B)	Ó	(Ø)
(d) Subtotal Contri	ibutions [add 4(a), 4(b), and 4(c)]	10.500	15,500
(e) Refund of cont	ributions (Total from Schedule F-2)		\boxtimes
(f) Total Contribut	tions Other than Loans and In-kind [subtract 4(e) from 4(d)]	10.500	15.50
5. (a) Loans r	made or guaranteed by candidate (Total from Schedule C)	(°) Ø	'Ø
(b) All other	er loans (Total from Schedule C-1)	Ø	Ø
(c) Total Lo	oans [add 5(a) and 5(b)]	\bigcirc	8
6. In-kind contribu	utions (Total from Schedule E)	800,00	800.00
7. Dividends, inte	erest, and other forms of receipts (Total from Schedule F-1)		Ø .
8. Total Receipts	[add 4(f), 5(c), 6, and 7]	11,300	16,300
	DISBURSEMENTS		
9. Expenditures for	or operating expenses (Total from Schedule D)	390.82	1534,52
10. Independent E	xpenditures (Total from Schedule D-1)	0	\varnothing
11. Value of In-kind	d expenditures (Total from Schedule E)	500	800
12. Loans made by	y reporting committee (Total from Schedule D-2)	Ø	Ø
13. (a) Repayr	ment of loans made or guaranteed by candidate (Total from Schedule D-4)		Ø
(b) Repayr	ment of all other loans (Total from Schedule D-5)		Ø
(c) Total Lo	oan Repayments [add 13(a) and 13(b)]	Ø	(Z)
14. Transfers to otl	her political committees (Total from Schedule D-6)		Ø
15. Any other disbu	ursement (Total from Schedule D-7)	\varnothing	Ø
16. Subtotal disbur	rsements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	1190.82	2334.52
17. Rebates, refun	ds and other offsets to operating expenses (Total from Schedule D-3)	. Ø	Ø
18. Total disburser	ments [subtract line 17 from line 16]	1190.82	2334,52
19. Total Outstand	ing Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	Ø	0

[20. I certify, under penalty of perjury, that I have examined the conte	ents of this campaign finance report and to the best of my knowledge and belief it is true
and complete.	
Kalhet L. Cour	and at
	NIXIVA
Type or Print Name of Treasurer	
(1)000 A (1)	
I LICOLA (IMACOXI	A X-12-12
7 100	8
Signature of Treasurer or Candidate or Designating Individual	Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS* **SCHEDULE A** 2. ID# yes For Rids 1. Committee Name August 16,2012 3. Report covering period from \ CUMULATIVE **CONTRIBUTIONS AMOUNT TOTAL THIS** DATE **RECEIVED THIS** CAMPAIGN TO RECEIVED NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR **PERIOD** DATE Name Street Address (1000.00) (1000.00 47500.00 14100 State Occupation Employer 8/6/12 2000.00 City TUCSS Occupation Employer Name Street Address City State Zip Occupation Employer Name Street Address City State Zip Occupation Employer ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A 10,500.00 10,500.00 5 [Transfer total to Detailed Summary Page, Line 4(a), Column A]

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

Schedule A Page _____ of ____ revised 06/2011

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL* SCHE						
1. Committee Name 128 PS	r 19ds		2. ID#			
3. Report covering period from	el	thru Kugust 1	6,2012			
4. Aggregate Total of Contribution	ns of \$25 or less	v U	J			
DESCRIPTION	I	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE			
5. TOTAL THIS PERIOD [Transfer total to		6. CUMULATIVE TOTAL THIS				
Detailed Summary Page, Line 4(b) Column A]	Ø	CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	Ø			

if contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1.	Committee Name	s For19ds		2. ID#
3. \	Report covering period from	June 1	thru Augus	A 110,2012
		CONTRIBUTIONS	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN TO
4.	IDENTITY	OF CONTRIBUTOR AND DATE RECEIVED	PERIOD	DATE
	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
b	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	-		
C	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	-		
е	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	-		
f	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	1		
1	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAS total to Detailed Summary Pa	T PAGE OF SCHEDULE B [if last page of Schedule B, transfer ge, Line 4(c), Column A]	Ø	Ø

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name <u>UC</u>	SFOR	Kids			·	2. ID#	
3.	\ Report covering period from	Jun	el		thru	Augus	3-14,20	112
	LOANS MADE	OR GUAR	ANTEED BY	Y CANDIDATE		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN
4.	NAME, A	ADDRESS, FRO	OM WHOM RE	CEIVED			THOTENIOD	TO DATE
	Last	First		Initial				
	Street Address							
	City		State	Zip				
	Description							
b	Last	First		Initial				
	Street Address							
	City	· ·	State	Zip				
	Description							
C	Last	First		Initial				
	Street Address							
	City		State	Zip				
	Description							
j	Last	First		Initial				
	Street Address							
	City		State	Zip				
	Description				,			
3	Last	First		Initial				
	Street Address					:		
	City		State	Zip				
	Description			· · · · · · · · · · · · · · · · · · ·				
	ENTER TOTAL OF LOANS I of Schedule C, transfer total				IF LAST	PAGE OF SCHED	PULE C [If last page	Ø

01	r H F	=P	10	74	NS	١
_						

1.	Committee Name \ LPS For KIdS		2.10#	
	Report covering period from <u>June1</u> thru	August	- 16,20	12
	ALL OTHER LOANS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
а	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address City, State, Zip NAME OF ENDORSER OR GUARANTOR OF LOAN			
	HAME OF EMBORGEN ON GOTHUNION OF LOTH			
	Street Address			
	City, State, Zip			
	Description			
b	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
¢	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#		and the second s	
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
d	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule to Detailed Summary Page, Line 5(b), Column A]	e C-1, transfer total	Ø	Ø

SCHEDULE D EXPENDITURES FOR OPERATING EXPENSES* 2. ID# les For Kids 1. Committee Name Hugust 16,2012 3. Report covering period from thru DATE **AMOUNT EXPENDITURES EXPENDITURE** OF THE **EXPENDITURE** MADE NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE Name Internet Inc. Street Address 6/5/2012 Zip (108 Description of Items or Services Purchased, INTERNET SEMICES Name Street Address neek Post-Osfice 6/30/2012 %5142 Queen (neok Description of Items or Services Purchased FOSTAGE SA ENVELIZE Name indenied Finc. Street Address 7/4/2012 79087 Description of Items or Services Purchased Name Reprographics PSSA 7/19/2012 253.10 85140 Description of Items or Services Purchased Name Internot a Street Address 8/5/2012 Zip 19087 Inestervanusle Description of Items or Services Purchased TIMEN OF SELVICES Name Street Address

State

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed

Zlp

City

Description of Items or Services Purchased

Summary Page Line 9, Column A]

Schedule D Page ______ of _____ revised 06/2011

4,390,82

11-8 2ac

	INDEPE	SCHEDULE D-1				
1.	Committee Name <u>V-C></u> Fo	r Kids	<u> </u>		2. ID#	
3.	Report covering period from	ine 1	thru	August	Me,2012	-
_					DATE	AMOUNT
		NDENT EXPEN			EXPENDITURE MADE	OF THE EXPENDITURE
١.	IDENTIFY RECIPIENT OF EXPENDITU	TED OR OPPOSED	WHOL	EXTENSITORE		
1	Name					
	Street Address					
	City	State	Zip			
	Purpose and Description of Purchase		Benefited	d Opposed		
		TOffice Cought		Year of Election		
	Candidate	Office Sought		Tear of Election		
)	Name					
	Street Address					
	City	State	Zip			
	Purpose and Description of Purchase	<u></u>	Benefited	d Dpposed D		
	Candidate	Office Sought		Year of Election		масана на предостава на пр
	Candidate	Onice Gought		Tear or Election		
;	Name					
	Street Address					
	City	State	Zip			
	Purpose and Description of Purchase	<u> </u>	Benefited	d Dpposed D		
	Candidate	Office Sought	<u> </u>	Year of Election		
	ENTER TOTAL ONLY IF LAST PAGE O Summary Page Line 10, Column A]	F SCHEDULE D-1	I [If last page of Sched	ule D-1, transfer total	to Detailed	
	SEE A.R.S. §16-901(14)					
^	ertify, under penalty of perjury, that the ab	ove stated indene	endent expenditure(s) v	was not made in coon	eration, consultation (or concert with or at
h	e request or suggestion of any candidate	or any campaign co	ommittee or agent of t	hat candidate.		
	Signature of Treasurer		-			
				VENDU OF THE TH		
	NAMES, OCCUPATIONS AND EMPLOY CONTRIBUTORS WITHIN THE LAST S	REE TOP	AMOUNT			

LOANS MADE BY REPORTING COMMITTEE

	1. Committee Name 1. Committee Name 3. Report covering period from 1. Line thru Angust Logos				2, 10#	2, 10#		
	3. Report covering period from	Junel	thru A	ngust lle, a	1012			
4.	LOAN	IS MADE BY THE RE	PORTING COMM		DATE LOAN MADE	AMOUNT OF LOAN		
а	Committee Name	TOP OF COMMITTEE TO	THOM LOTH (DIODE	ID#	77.10			
	Address							
	City	State	Zip					
b	Committee Name			ID#				
	Address							
	City	State	Zip					
C	Committee Name			ID#				
	Address							
	City	State	Zip					
đ	Committee Name		<u>-</u>	ID#				
	Address							
	City	State	Zip					
e	Committee Name			ID#				
	Address			-				
	City	State	Zip					
f	Committee Name			ID#				
	Address							
	City	State	Zip					
g	Committee Name			ID#				
	Address							
	City	State	Zip					
ħ	Committee Name ID#							
	Address							
	City	State	Zip					
5	ENTER TOTAL ONLY IF LAST PA	GE OF SCHEDULE D-2 [if last p	age of Schedule D-2, tran	sfer total to Detailed Summary Pa	age, Line 12, Column A]	2		
	ī					1		

OFFSETS TO OPERATING EXPENSES*

	1. Committee Name Ves For ICids	2. ID#	
	3. Report covering period from Tune thru Malist	16,200	·
	BEDATES BEELINDS AND OTHER OFFSETS TO OBEDATING EVENISES		
4.	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
a	Name	NEGLIVED	KLIOND
	Street Address		
	City State Zip		
	Descrption of Refund	<u> </u>	
b	Name		·
	Street Address		
	SHOOT/MANOO		
	City State Zip		
	Descrption of Refund		
C	Name		
	Street Address		
	City State Zip		
	Descrption of Refund		
d	Name		
	Street Address		
	City State Zip		
	Descrption of Refund		
е	Name		
	Street Address		
	City State Zip		
	Descrption of Refund		
f	Name	·····	
	Street Address		
	City State Zip		;
	Descrption of Refund		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [if last page of Schedule D-3, transfer total to Detailed Summary Page	ge, Line 17, Column A]	8

^{*} Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

	1. Committee Name UES For Kids	2. ID#	
	3. Report covering period from Thru Thru	- 16,20	312
	G		
4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT	AMOUNT OF THE
Ţ.	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	MADE	REPAYMENT
а	Name		
	Street Address		

4.	REPAYMENT OF L	OANS MADE OR GUARA	NTEED BY CANDIDATE	DATE REPAYMENT	AMOUNT OF
••	NAME AND ADDRES	S TO WHOM REPAYMENT (DIS	BURSEMENT) WAS MADE	MADE	REPAYMENT
ı	Name	···			
	Street Address			4	
	olicet vadicas				
	City	State	Zip	1	1
	Name				
	Street Address				
	City	State	Zip		
	Name			<u> </u>	
	Street Address		, , , , , , , , , , , , , , , , , , , ,	1	
	City	State	Zíp	1	
1	Name				
	Street Address			-	
	City	State	Zip	1	
	Name				
	Street Address		 	1	
	City	State	Zip	1	
	Name				
	Street Address				
	City	State	Zip	†	
5	ENTER TOTAL ONLY IF LAST PAG	E OF SCHEDULE D-4 [if last page of Schedu	ule D-4, transfer total to Detailed Summary Pa	ge, Line 13(a), Column A)	0

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	revised 06/2011

REPAYMENT OF OTHER LOANS

	1. Committee Name	Yes For Kids		2.10#	
	3. Report covering peri	od from June	thru August	We,2012	
4.		REPAYMENT OF ALL OTHER L	OANS	DATE	
	NAME AND ADDR	ESS OF INDIVIDUAL (OR NAME, ID# AND A TTEE) TO WHOM REPAYMENT (DISBURSE	DDRESS OF THE POLITICAL MENT) WAS MADE	REPAYMENT MADE	AMOUNT OF THE REPAYMENT
а	Name and ID Number				
	Street Address	, , , , , , , , , , , , , , , , , , ,			
	City	State	Zip	_	
b	Name and ID Number				
	Street Address				
	City	State	Zip		
С	Name and ID Number				<u> </u>
	Street Address			-	
	City	State	Zip	1	
d	Name and ID Number				
	Street Address			-	
	City	State	Zip		
е	Name and ID Number				
	Street Address			-	
	City	State	Zip		
f	Name and ID Number				
	Street Address			-	
	City	State	Zip		
5	ENTER TOTAL ONLY IF	LAST PAGE OF SCHEDULE D-5 [if last page of schedu	uTransfer total to Detailed Summary Pag	e, Line 13(b), Column AJ	Ø
	I				

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	revised 06/2011

TRANSFERS TO OTHER POLITICAL COMMITTEES **SCHEDULE D-6** 2. lD# 1. Committee Name 3. Report covering period from \tag{7}U0 TRANSFERS MADE BY THE REPORTING COMMITTEE DATE TRANSFER AMOUNT OF THE WAS MADE **TRANSFER** NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE Name and ID Number Street Address City Zip State Name and ID Number Street Address City State Zip Name and ID Number Street Address City State Zip Name and ID Number Street Address City State Zip Name and ID Number Street Address City State Zip Name and ID Number Street Address City State Zip

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]

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ANY OTHER DISBURSEMENT

	1. Committee Name UPS FOT Mids	2. 10#	
	3. Report covering period from June thru August	lle Derro	<u> </u>
4.	ANY OTHER DISBURSEMENT NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
а	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
b	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
C	Name and ID Number		 /
	Street Address		
	City State Zip		
	Description		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
9	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
ſ	Name and iD Number		
	Street Address		
	City State Zip		
	Description		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [if last page of Schedule D-7, transfer total to Detailed Summary Pa	ge, Line 15, Column A]	8

IN-KIND CONTRIBUTIONS and EXPENDITURES SCHEDULE E 2. ID# les For Kids 1. Committee Name 3. Report covering period from 5 **IN-KIND CONTRIBUTIONS and EXPENDITURES FAIR MARKET** DATE NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) VALUE FROM WHOM RECEIVED OR TO WHOM GIVEN a Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer CONTRIBUTION Name, Address, City, State, Zip, and ID# EXPENDITURE Description Occupation Employer CONTRIBUTION Name, Address, City, State, Zip, and ID# EXPENDITURE Description Occupation Employer Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer 5 ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A] 6 ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E [if lest page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]

Schedule E Page _____ of ____

DIVIDENDS. INTEREST. AND OTHER RECEIPTS

SCHEDULE F-1

	DIVIDENDS, INTEREST, AND OTHER RECEIPTS		PUEDOFE L-1
	1. Committee Name LAS For Kids	2. ID#	
	3. Report covering period from thru AUSUS	₹ 16,2e	213
4.	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE)	DATE RECEIVED	AMOUNT OF THE
	FROM WHOM THE RECEIPT WAS RECEIVED	: NEGENTES	RECEIPT
а	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
b	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt	<u> </u>	
C	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt	ı	
d	Name and ID Number		
	Street Address	i	
	City State Zip	ı	
	Description of Receipt		
е	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
f	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		

5 ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [if last page of Schedule F-1, transfer total to Detailed Summary Page, Line 7, Column A]

Schedule F-1 Pag	ge of
	revised 06/2011

OFFSETS TO CONTRIBUTIONS RECEIVED* SCHEDULE F-2 2. ID# 1. Committee Name August 16,2012 3. Report covering period from thru REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED DATE REFUND AMOUNT OF THE NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) TO WAS MADE REFUND WHOM THE REFUND WAS MADE; DESCRIPTION Name and ID Number Street Address City Zip State Description of Refund Name and ID Number Street Address City State Zip Description of Refund Name and ID Number Street Address State Zip City Description of Refund Name and ID Number Street Address City State Zip Description of Refund Name and ID Number Street Address City State Zip Description of Refund Name and ID Number Street Address City State Zip Description of Refund

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [if last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(e), Column A]

^{*}Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans) SCHEDULE F-3 2. ID# 1. Committee Name 3. Report covering period from thru OUTSTANDING AMOUNT PAYMENT THIS OUTSTANDING **DEBTS AND OBLIGATIONS** BALANCE INCURRED THIS **PERIOD BALANCE AT BEGINNING THIS** PERIOD **CLOSE OF THIS** NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF PERIOD PERIOD THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED Name, Address, City, State, Zip, and ID# Description of Debt Name, Address, City, State, Zip, and ID# Description of Debt Name, Address, City, State, Zip, and ID# Description of Debt Name, Address, City, State, Zip, and ID# Description of Debt Name, Address, City, State, Zip, and ID#

ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [if last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]

Description of Debt

<u></u>

Schedule F-3 Page ____ of _