



PINAL COUNTY  
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STATE OF ARIZONA  
PINAL COUNTY  
POLITICAL COMMITTEE  
**CAMPAIGN FINANCE REPORT**

FOR OFFICE USE ONLY

**RECEIVED**

DEC 06 2013

PINAL COUNTY SCHOOL OFFICE

3. ID#  
2013004CSS

1. Yes For Kids Florence

Full Name of Committee

2231 N. Smithsonian Dr.

Address

Florence

85132

(480) 277-4794

City

Zip Code

Phone

2.

Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)

jumbo\_4512\_ffd@hotmail.com

Email Address

Fax #

Primary Election: August 28, 2012  
General Election: November 6, 2012

4. Reporting Period	(Please Check Appropriate Box)	Due Between
a	<input type="checkbox"/> JANUARY 31ST REPORT - For Period of November 23, 2010 through December 31, 2011	Jan. 1, 2012 and Jan. 31, 2012
b	<input type="checkbox"/> JUNE 30TH REPORT - For Period of January 1, 2012 through May 31, 2012	June 1, 2012 and July 2, 2012
c	<input type="checkbox"/> PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2012 through August 16, 2012	Aug. 17, 2012 and Aug. 24, 2012
d	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT - For Period of August 17, 2012 through September 17, 2012	Sept. 18, 2012 and Sept. 27, 2012
e	<input type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 18, 2012 through October 25, 2012	Oct. 26, 2012 and Nov. 2, 2012
f	<input checked="" type="checkbox"/> POST-GENERAL ELECTION REPORT - For Period of October 26, 2012 through November 26, 2012	Nov 26, 2012 and Dec. 5, 2012

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)	4,780.10	4,780.10
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	1,423.25	1,423.25
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	180.00	3,001.00
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	1,603.25	7,781.10
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]		
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	744.25	6,177.85
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	859.00	859.00

# **DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS**

**PAGE 2**

1. Committee Name Yes For Kids Florence

2. ID #

**2013004CSS**

3. Report covering period of \_\_\_\_\_

## **RECEIPTS**

4. Contributions other than loans and in-kind:
  - (a) Individuals - more than \$25 (Total from Schedule A)
  - (b) Individuals - aggregate \$25 or less (Total from Schedule A-1)
  - (c) Political Committees (Total from Schedule B)
  - (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]
  - (e) Refund of contributions (Total from Schedule F-2)
  - (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]
5.
  - (a) Loans made or guaranteed by candidate (Total from Schedule C)
  - (b) All other loans (Total from Schedule C-1)
  - (c) Total Loans [add 5(a) and 5(b)]
6. In-kind contributions (Total from Schedule E)
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)
8. Total Receipts [add 4(f), 5(c), 6, and 7]

Column A This Period	Column B Campaign to Date
-------------------------	------------------------------

\$180.00	\$906.00
\$180.00	\$906.00
\$180.00	\$906.00
\$180.00	\$906.00

## **DISBURSEMENTS**

9. Expenditures for operating expenses (Total from Schedule D)
10. Independent Expenditures (Total from Schedule D-1)
11. Value of In-kind expenditures (Total from Schedule E)
12. Loans made by reporting committee (Total from Schedule D-2)
13.
  - (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)
  - (b) Repayment of all other loans (Total from Schedule D-5)
  - (c) Total Loan Repayments [add 13(a) and 13(b)]
14. Transfers to other political committees (Total from Schedule D-6)
15. Any other disbursement (Total from Schedule D-7)
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)
18. Total disbursements [subtract line 17 from line 16]
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)

\$744.25	\$6,057.85
	\$120.00
\$744.25	\$6,177.85
\$744.25	\$6,177.85

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

**Dave Downey**

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

Date

revised 06/2011



# CONTRIBUTIONS more than \$25 - from INDIVIDUALS\*

## SCHEDULE A

1. Committee Name Yes For Kids Florence

2. ID#

**2013004CSS**

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4. CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR				
a	Name			
	Street Address			
	City State Zip			
	Occupation Employer			
b	Name			
	Street Address			
	City State Zip			
	Occupation Employer			
c	Name			
	Street Address			
	City State Zip			
	Occupation Employer			
d	Name			
	Street Address			
	City State Zip			
	Occupation Employer			
e	Name			
	Street Address			
	City State Zip			
	Occupation Employer			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [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.

**CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL\*****SCHEDULE A-1**1. Committee Name Yes For Kids Florence2. ID#  
**2013004CSS**

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

**4. Aggregate Total of Contributions of \$25 or less**

DESCRIPTION		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
11/04/2013 - 16 - \$10 Jeans Donations -\$160 11/21/2013 - 2 - \$10 Jeans Donations - \$20		\$180.00	\$906.00
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]		6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	
\$180.00			\$906.00

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

2. ID#

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
4.	a 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		
e	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		
i	ID#	NAME, ADDRESS, CITY, STATE AND ZIP	
	DATE RECEIVED		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [if last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]			

# CANDIDATE LOANS

# SCHEDULE C

2. ID#

1. Committee Name

3. Report covering period from thru

LOANS MADE OR GUARANTEED BY CANDIDATE			DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, FROM WHOM RECEIVED					
4.					
4a	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				
d	Last	First Initial			
	Street Address				
	City	State Zip			
	Description				
e	Last	First Initial			
	Street Address				
	City	State Zip			
	Description				
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]				



# OTHER LOANS

# SCHEDULE C-1

2. ID#

1. Committee Name

3. Report covering period from thru

ALL OTHER LOANS		DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4. NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN				
a	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			
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			
c	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			
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 C-1, transfer total to Detailed Summary Page, Line 5(b), Column A]				

## EXPENDITURES FOR OPERATING EXPENSES\*

## SCHEDULE D

1. Committee Name Yes For Kids Florence

2. ID#

2013004CSS

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

EXPENDITURES			DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name <b>Safeway</b> Street Address  City _____ State _____ Zip _____ Description of Items or Services Purchased <b>Water for Miracle Mile</b>		11/4/2013	\$5.09
b	Name <b>MBQF Consulting</b> Street Address  City _____ State _____ Zip _____ Description of Items or Services Purchased <b>Last payment for mailers and robo dialers</b>		11/4/2013	\$600.00
c	Name <b>M. Fryhover</b> Street Address  City _____ State _____ Zip _____ Description of Items or Services Purchased <b>Gift certificate to disburse to school for participation award</b>		11/22/2013	\$50.00
d	Name <b>John Schurer</b> Street Address  City _____ State _____ Zip _____ Description of Items or Services Purchased <b>Pancake breakfast items for school participation</b>		11/4/2013	\$89.16
e	Name  Street Address  City _____ State _____ Zip _____ Description of Items or Services Purchased 			
f	Name  Street Address  City _____ State _____ Zip _____ Description of Items or Services Purchased 			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page Line 9, Column A]			



# INDEPENDENT EXPENDITURES\*

# SCHEDULE D-1

2. ID#

1. Committee Name

3. Report covering period from thru

INDEPENDENT EXPENDITURES				DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4. IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED					
a Name					
Street Address					
City	State	Zip			
Purpose and Description of Purchase		Benefited <input type="checkbox"/> Opposed <input type="checkbox"/>			
Candidate	Office Sought	Year of Election			
b Name					
Street Address					
City	State	Zip			
Purpose and Description of Purchase		Benefited <input type="checkbox"/> Opposed <input type="checkbox"/>			
Candidate	Office Sought	Year of Election			
c Name					
Street Address					
City	State	Zip			
Purpose and Description of Purchase		Benefited <input type="checkbox"/> Opposed <input type="checkbox"/>			
Candidate	Office Sought	Year of Election			
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]					

\* SEE A.R.S. §16-901(14)

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT

# LOANS MADE BY REPORTING COMMITTEE

## SCHEDULE D-2

1. Committee Name \_\_\_\_\_

2. ID# \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4. LOANS MADE BY THE REPORTING COMMITTEE				DATE LOAN MADE	AMOUNT OF LOAN
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE					
a	Committee Name		ID#		
	Address				
	City	State	Zip		
b	Committee Name		ID#		
	Address				
	City	State	Zip		
c	Committee Name		ID#		
	Address				
	City	State	Zip		
d	Committee Name		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		
h	Committee Name		ID#		
	Address				
	City	State	Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [If last page of Schedule D-2, transfer total to Detailed Summary Page, Line 12, Column A]				

# OFFSETS TO OPERATING EXPENSES\*

## SCHEDULE D-3

2. ID#

1. Committee Name

3. Report covering period from thru

4. REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
a	Name		
	Street Address		
	City State Zip		
	Description of Refund		
b	Name		
	Street Address		
	City State Zip		
	Description of Refund		
c	Name		
	Street Address		
	City State Zip		
	Description of Refund		
d	Name		
	Street Address		
	City State Zip		
	Description of Refund		
e	Name		
	Street Address		
	City State Zip		
	Description of Refund		
f	Name		
	Street Address		
	City State Zip		
	Description 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, Line 17, Column A]		

\* Includes return of contributions made by reporting committee



# REPAYMENT OF CANDIDATE LOANS

## SCHEDULE D-4

1. Committee Name \_\_\_\_\_

2. ID# \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
a	Name  Street Address  City State Zip		
b	Name  Street Address  City State Zip		
c	Name  Street Address  City State Zip		
d	Name  Street Address  City State Zip		
e	Name  Street Address  City State Zip		
f	Name  Street Address  City State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [if last page of Schedule D-4, transfer total to Detailed Summary Page, Line 13(a), Column A]		

# REPAYMENT OF OTHER LOANS

## SCHEDULE D-5

1. Committee Name \_\_\_\_\_

2. ID# \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4. REPAYMENT OF ALL OTHER LOANS		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a	Name and ID Number		
	Street Address		
	City State Zip		
b	Name and ID Number		
	Street Address		
	City State Zip		
c	Name and ID Number		
	Street Address		
	City State Zip		
d	Name and ID Number		
	Street Address		
	City State Zip		
e	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 schedule Transfer total to Detailed Summary Page, Line 13(b), Column A]		

# ANY OTHER DISBURSEMENT

# SCHEDULE D-7

1. Committee Name \_\_\_\_\_

2. ID# \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4.	ANY OTHER DISBURSEMENT	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION		
a	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		
e	Name and ID Number Street Address City State Zip Description		
f	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 Page, Line 15, Column A]		



# IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Yes For Kids Florence

2. ID#  
**2013004CSS**

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

IN-KIND CONTRIBUTIONS and EXPENDITURES				DATE	FAIR MARKET VALUE
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN				
a	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			
		EXPENDITURE <input type="checkbox"/>			
	Description				
	Occupation	Employer			
b	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			
		EXPENDITURE <input type="checkbox"/>			
	Description				
	Occupation	Employer			
c	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			
		EXPENDITURE <input type="checkbox"/>			
	Description				
	Occupation	Employer			
d	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			
		EXPENDITURE <input type="checkbox"/>			
	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 last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]				

# DIVIDENDS, INTEREST, AND OTHER RECEIPTS

## SCHEDULE F-1

1. Committee Name \_\_\_\_\_

2. ID# \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4. DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS		DATE RECEIVED	AMOUNT OF THE RECEIPT
NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED			
a	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		
c	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
e	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]		

# OFFSETS TO CONTRIBUTIONS RECEIVED\*

## SCHEDULE F-2

1. Committee Name \_\_\_\_\_

2. ID# \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4. REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED		DATE REFUND WAS MADE	AMOUNT OF THE REFUND
NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) TO WHOM THE REFUND WAS MADE; DESCRIPTION			
a	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
b	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
c	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
e	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
f	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
5	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

1. Committee Name \_\_\_\_\_

2. ID# \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

DEBTS AND OBLIGATIONS		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED				
a	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
b	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
c	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
d	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
e	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
5	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)				