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STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Singleton for Maricopa

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought: ☐ County Office: ☐ Special District Office:
■ City/Town Office: City Council ☐ School Board District:

Cumulative Report:
☐ Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.
Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below): _____

REPORTING PERIOD (check one):

	REPORTING PERIOD	REPORT DUE
	2026 March PAC Pre-Election Report (Election in Qtr): January 1, 2026 to February 21, 2026	February 22, 2026 to February 23, 2026
	2026 Post-Primary Election Report (Local March Candidates): January 1, 2026 to March 10, 2026	March 11, 2026 to March 25, 2026
	2026 March PAC Post-Election (Q1) Report (Election in Qtr): February 22, 2026 to March 31, 2026	April 1, 2026 to April 15, 2026
	2026 Quarter 1 Report (Local March Candidates): March 11, 2026 to March 31, 2026	April 1, 2026 to April 15, 2026
	2026 Quarter 1 Report: January 1, 2026 to March 31, 2026	April 1, 2026 to April 15, 2026
	2026 May PAC Pre-Election Report (Election in Qtr): April 1, 2026 to May 2, 2026	May 3, 2026 to May 4, 2026
	2026 May PAC Post-Election (Q2) Report (Election in Qtr): May 3, 2026 to June 30, 2026	July 1, 2026 to July 15, 2026
	2026 Quarter 2 Report: April 1, 2026 to June 30, 2026	July 1, 2026 to July 15, 2026
	2026 July PAC Pre-Election Report (Election in Qtr): July 1, 2026 to July 4, 2026	July 5, 2026 to July 6, 2026
	2026 July Post-Primary Election Report (State/Local July Candidates): July 1, 2026 to July 21, 2026	July 22, 2026 to August 5, 2026
	2026 July PAC Post-Election (Q3) Report (Election in Qtr): July 5, 2026 to September 30, 2026	October 1, 2026 to October 15, 2026
	2026 Quarter 3 Report (State/Local July Candidates): July 22, 2026 to September 30, 2026	October 1, 2026 to October 15, 2026
	2026 Quarter 3 Report: July 1, 2026 to September 30, 2026	October 1, 2026 to October 15, 2026
	2026 November PAC Pre-Election Report: October 1, 2026 to October 17, 2026	October 18, 2026 to October 19, 2026
	2026 November Post-Primary Election Report (Local Nov Candidates)**: Oct. 1, 2026 to Nov. 3, 2026	November 4, 2026 to November 18, 2026
	2026 November PAC Post-Election (Q4) Report: October 18, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
	2026 Quarter 4 Report (Local Nov Candidates)**: November 4, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
	2026 Quarter 4 Report: October 1, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
	2026 Annual (Cumulative) Report (Local Candidates)*: January 1, 2026 to December 31, 2026	January 1, 2027 to January 15, 2027
✔	Final Campaign Finance Report Prior to Committee Termination: End of Previous Period through Today's Date 07/22/2026 - 10/09/2026	Same Date of Termination 10/09/2026

*Excluding local candidates who reported in their general election year.
**Applies to charter cities that allow candidate primary elections on November election date.

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)	554.18	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	1.39	3,468.33
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)	555.57	3,468.33
(d) = Balance at close of reporting period	0.00	

☐ Check here if filing no financial activity during the reporting period. *Lines (a)-(d) must still be completed*, but only this cover page and the following signed certification page need to be filed.

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity.

STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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.

James Singleton		10/09/2026
Printed Name of Committee Treasurer	Signature of Committee Treasurer	Date

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

SUMMARY OF RECEIPTS (Schedule A):

Receipts	Cash	Equity
1. Monetary Contributions Received		
(a) In-State Individuals - More than $100		
(b) In-State Individuals - $100 or Less (Aggregate)		
(c) Out-of-State Individuals		
(d) Candidate Committees		
(e) Political Action Committees		
(f) Political Parties		
(g) Partnerships		
(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
(i) Labor Organizations (PACs & Political Parties Only)		
(j) Candidate's Personal Monies (Candidate Committees Only)		
(k) Monetary Contributions Subtotal (add 1(a) through 1(j))		
(l) Refunds Given Back to Contributors		
(m) Net Monetary Contributions (subtract 1(l) from 1(k))		
2. Loans		
(a) Loans Received		
(b) Forgiveness on Loans Received		2,444.43
(c) Repayment on Loans Made		
(d) Interest Accrued on Loans Made		
(e) Loans Subtotal (cash: add 2(a), 2(c) & 2(d))		
3. Rebates and Refunds Received		
4. Interest Accrued on Committee Monies	1.39	
5. In-Kind Contributions Received		
(a) In-State Individuals - More than $100		
(b) In-State Individuals - $100 or Less (Aggregate)		
(c) Out-of-State Individuals		
(d) Candidate Committees		
(e) Political Action Committees		
(f) Political Parties		
(g) Partnerships		
(h) Corporations & Limited Liability Companies (PACs & Political Parties Only)		
(i) Labor Organizations (PACs & Political Parties Only)		
(j) Candidate's Personal Assets or Property (Candidate Committees Only)		
(k) In-Kind Contributions Subtotal (equity: add 5(a) through 5(j))		
6. In-Kind Donations Received (Non-Contributions) (Political Parties Only)		
7. Extensions of Credit		
(a) Extensions of Credit Received		
(b) Payments on Extensions of Credit Received		
(c) Net Extensions of Credit (subtract 7(b) from 7(a))		
8. Joint Fundraising / Shared Expense Payments Received		
9. Payments Received for Goods / Services		
10. Outstanding Accounts Receivable / Debts Owed to Committee		
11. Transfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)		
12. Miscellaneous Receipts (use cash and/or equity as applicable)		
13. Total Receipts (cash: add 1(m), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(k), 6-7(c), 10-12)	1.39	2,444.43

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
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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	555.57	
(e) Accrued Interest on Loans Received		
(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 3(b) & 3(c))	555.57	
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)	555.57	

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN $100 DURING ELECTION CYCLE:* SCHEDULE A(1)(a)

	Individual Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
2	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(a))			0		

*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 ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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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.

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS RECEIVED FROM OUT-OF-STATE INDIVIDUALS

SCHEDULE A(1)(c)

	Individual Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
2	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(c))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(d)

	Candidate Committee Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name: Singleton for Maricopa			0		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name			0		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name			0		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name			0		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name			0		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to “Summary of Receipts,” line 1(d))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(e)

	Political Action Committee Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to “Summary of Receipts,” line 1(e))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(f)

	Political Party Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
5	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(f))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(g)

	Partnership Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
2	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
3	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
4	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
5	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to “Summary of Receipts,” line 1(g))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(h)

	Corporation / LLC Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
5	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(h))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(i)

	Labor Organization Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
2	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
3	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
4	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
5	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Received				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(i))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

	Candidate Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
2	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(j))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(I)

	Contributor Information			Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
2	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
3	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
4	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
5	Name		Date Contribution Refunded			
	Street Address					
	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(I))			0		

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Schedule A(1)(I), page____ of___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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LOANS RECEIVED:

SCHEDULE A(2)(a)

	Lender Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name	Date Loan Received				
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
2	Lender Name	Date Loan Received				
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
3	Lender Name	Date Loan Received				
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
4	Lender Name	Date Loan Received				
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
5	Lender Name	Date Loan Received				
	Street Address					
	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 "Summary of Receipts," line 2(a))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

	Lender Information			Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name: James Robert Singleton		Date Forgiveness Received: 10/09/2026	2,444.43	2,444.43	2,444.43
	Street Address: 36112 W Catalonia Dr					
	City: Maricopa	State: AZ	ZIP: 85138			
	Original Amount of Loan: 3,000.00	Amount Still Outstanding: 0.00				
2	Lender Name:		Date Forgiveness Received:			
	Street Address:					
	City:	State:	ZIP:			
	Original Amount of Loan:	Amount Still Outstanding:				
3	Lender Name:		Date Forgiveness Received:			
	Street Address:					
	City:	State:	ZIP:			
	Original Amount of Loan:	Amount Still Outstanding:				
4	Lender Name:		Date Forgiveness Received:			
	Street Address:					
	City:	State:	ZIP:			
	Original Amount of Loan:	Amount Still Outstanding:				
5	Lender Name:		Date Forgiveness Received:			
	Street Address:					
	City:	State:	ZIP:			
	Original Amount of Loan:	Amount Still Outstanding:				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 2(b))			2,444.43	2,444.43	2,444.43

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrower Information			Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
2	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
3	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
4	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
5	Borrower Name		Date Repayment Received			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to “Summary of Receipts,” line 2(c))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

	Borrower Information			Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
2	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
3	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
4	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
5	Borrower Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total received this period to “Summary of Receipts,” line 2(d))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

	Payor Information			Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Payor Name		Date Rebate/Refund Received			
	Street Address					
	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
2	Payor Name		Date Rebate/Refund Received			
	Street Address					
	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
3	Payor Name		Date Rebate/Refund Received			
	Street Address					
	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
4	Payor Name		Date Rebate/Refund Received			
	Street Address					
	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
5	Payor Name		Date Rebate/Refund Received			
	Street Address					
	City	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 3)			0		

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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) American Express - Checking	1.39	3.90
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)	1.39	3.90

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS RECEIVED FROM IN-STATE INDIVIDUALS - MORE THAN $100 DURING ELECTION CYCLE:* SCHEDULE A(5)(a)

	Individual Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
2	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(a))			0		

*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 ___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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

SCHEDULE A(5)(b)

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

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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

SCHEDULE A(5)(c)

	Individual Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	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 “Summary of Receipts,” line 5(c))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(5)(d)

	Candidate Committee Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	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 “Summary of Receipts,” line 5(d))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(e)

	Political Action Committee Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	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 "Summary of Receipts," line 5(e))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(f)

	Political Party Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Received				
5	Committee Name					
	Street Address					
	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 "Summary of Receipts," line 5(f))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(g)

	Partnership Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
2	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
3	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
4	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
5	Partnership Name					
	Street Address					
	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))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(h)

	Corporation / LLC Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
5	Corporation/LLC Name					
	Street Address					
	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(h))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(i)

	Labor Organization Contributor Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
2	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
3	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
4	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
5	Labor Organization Name					
	Street Address					
	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(i))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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

SCHEDULE A(5)(j)

	Candidate Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Asset or Property Contributed					
2	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Asset or Property Contributed					
3	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Asset or Property Contributed					
4	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Asset or Property Contributed					
5	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Asset or Property Contributed					
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(j))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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
1	Name		Date In-Kind Donation Received			
	Street Address					
	City	State	ZIP			
	Type of Item Donated					
2	Name		Date In-Kind Donation Received			
	Street Address					
	City	State	ZIP			
	Type of Item Donated					
3	Name		Date In-Kind Donation Received			
	Street Address					
	City	State	ZIP			
	Type of Item Donated					
4	Name		Date In-Kind Donation Received			
	Street Address					
	City	State	ZIP			
	Type of Item Donated					
5	Name		Date In-Kind Donation Received			
	Street Address					
	City	State	ZIP			
	Type of Item Donated					
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 6)			0		

Schedule A(6), page_____ of _____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

	Creditor Information			Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
2	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
3	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
4	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
5	Name					
	Street Address					
	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 "Summary of Receipts," line 7(a))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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
1	Name					
	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			
4	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
5	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 7(b))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

	Payor Committee Information			Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
2	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
3	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
4	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
5	Committee Name		Payment Date			
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 8)			0		

Schedule A(8), page____ of ___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor Information			Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
2	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
3	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
4	Name					
	Street Address					
	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
5	Name					
	Street Address					
	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)			0		

Schedule A(9), page____ of ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
2	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
3	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
4	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
5	Name					
	Street Address					
	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 "Summary of Receipts," line 10)			0		

Schedule A(10), page____ of ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

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)		

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

MISCELLANEOUS RECEIPTS:

SCHEDULE A(12)

	Source Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
2	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
3	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
4	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
5	Name					
	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 12)			0		

Schedule A(12), page____ of ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipient Information			Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name	Disbursement Date		☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
2	Name	Disbursement Date		☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
3	Name	Disbursement Date		☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
4	Name	Disbursement Date		☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
5	Name	Disbursement Date		☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only) ☐				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 1)			0		

Schedule B(1), page____ of ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate Committee Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(a))			0		

Schedule B(2)(a), page____ of ___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(2)(b)

	Political Action Committee Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(b))			0		

Schedule B(2)(b), page____ of ___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

	Political Party Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
2	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
3	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
4	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
5	Committee Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(c))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	Partnership Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Partnership Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Partnership Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Partnership Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Partnership Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(d))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation / LLC Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Corporation/LLC Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Corporation/LLC Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Corporation/LLC Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Corporation/LLC Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(e))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organization Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
2	Labor Organization Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
3	Labor Organization Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
4	Labor Organization Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
5	Labor Organization Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 2(f))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

CONTRIBUTION REFUNDS RECEIVED:

SCHEDULE B(2)(h)

	Contributor Information			Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
2	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
3	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
4	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
5	Committee Name		Date Refund Received			
	Street Address					
	City	State	ZIP			
	Committee ID Number		Date of Original Contribution			
	Enter total only if last page of schedule (transfer the total disbursed this period to “Summary of Disbursements,” line 2(h))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

LOANS MADE:

SCHEDULE B(3)(a)

	Borrower Information			Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
2	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
3	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
4	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
5	Borrower Name					
	Street Address					
	City	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Enter total only if last page of schedule (transfer the total received this period to “Summary of Receipts,” line 3(a))			0		

Schedule B(3)(a), page____of ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

LOAN GUARANTEES MADE:

SCHEDULE B(3)(b)

	Guarantor Information			Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
2	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
3	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
4	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
5	Guarantor Name					
	Street Address					
	City	State	ZIP			
	Borrower Name	Date Loan Guaranteed				
	Enter total only if last page of schedule (transfer the total received this period to “Summary of Receipts,” line 3(b))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

	Borrower Information			Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
2	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
3	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
4	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
5	Borrower Name		Date Forgiveness Made			
	Street Address					
	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to “Summary of Disbursements,” line 3(c))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender Information			Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name: James Robert Singleton		Date Repayment Made: 10/09/2026	555.57	555.57	555.57
	Street Address: 36112 W Catalonia Dr					
	City: Maricopa	State: AZ	ZIP: 85138			
	Original Amount Borrowed: 3,000.00	Amount Still Outstanding: 2,444.43				
2	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
3	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
4	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
5	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 3(d))			555.57	555.57	555.57

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

ACCRUED INTEREST ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lender Information			Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
2	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
3	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
4	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
5	Lender Name		Date Interest Accrued			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 3(e))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Recipient Information			Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
2	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
3	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
4	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
5	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 4)			0		

Schedule B(4), page____ of ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	Candidate Committee Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	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 "Summary of Disbursements," line 5(a))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Action Committee Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	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 "Summary of Disbursements," line 5(b))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
2	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
3	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
4	Committee Name					
	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made				
5	Committee Name					
	Street Address					
	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 "Summary of Disbursements," line 5(c))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partnership Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
2	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
3	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
4	Partnership Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
5	Partnership Name					
	Street Address					
	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 "Summary of Disbursements," line 5(d))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

	Corporation / LLC Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
2	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
3	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
4	Corporation/LLC Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
5	Corporation/LLC Name					
	Street Address					
	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 "Summary of Disbursements," line 5(e))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organization Recipient Information			Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
2	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
3	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
4	Labor Organization Name					
	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Made				
5	Labor Organization Name					
	Street Address					
	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 "Summary of Disbursements," line 5(f))			0		

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure Recipient Information			Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought			
2	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought			
3	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought			
4	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	Office Sought			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 6)			0		

Schedule B(6), page____ of ___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

	Expenditure Recipient Information			Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
2	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
3	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
4	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)				
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 7)			0		

Schedule B(7), page____ of ___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

RECALL EXPENDITURES MADE:

SCHEDULE B(8)

	Expenditure Recipient Information			Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast	Office Held				
2	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast	Office Held				
3	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast	Office Held				
4	Recipient Name		Mode of Advertising (TV, mail, etc)	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Supporting or Opposing Issuance of Recall Order?	Candidate Sought to be Recalled				
	Date of First Publication, Display, Delivery, or Broadcast	Office Held				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 8)			0		

Schedule B(8), page____ of ___

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Benefitted Candidate			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
2	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
3	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
4	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP			
	Type of Benefit Provided					
	Notes:					
	Enter total only if last page of schedule (transfer the total disbursed this period to “Summary of Disbursements,” line 9)			0		

Schedule B(9), page____ of ____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
CAN 26-07

JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient Committee Information			Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Committee Name		Payment Date	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
2	Committee Name		Payment Date	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
3	Committee Name		Payment Date	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
4	Committee Name		Payment Date	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
5	Committee Name		Payment Date	☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if applicable)				
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 10)			0		

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STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
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REIMBURSEMENTS MADE:

SCHEDULE B(11)

	Recipient Information			Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
2	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
3	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
4	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
5	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 11)			0		

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STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
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OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

	Debt Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
2	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
3	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
4	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
5	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 12)			0		

Schedule B(12), page____ of _____

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

COMMITTEE ID NUMBER
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TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

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

STATE OF ARIZONA COMMITTEE CAMPAIGN FINANCE REPORT

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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

	Recipient Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
2	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
3	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
4	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
5	Name			☐ Cash ☐ Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
	Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 14)			0		

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STATE OF ARIZONA
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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)		