

**POLITICAL COMMITTEE**  
**CITY/TOWN OF APACHE JUNCTION**  
**CAMPAIGN FINANCE REPORT**  
**2013 March/May Regular Election**

FOR OFFICE USE ONLY

CITY OF APACHE JUNCTION  
 CITY CLERK  
 300 E SUPERSTITION BLVD.  
 APACHE JUNCTION, AZ. 85119

1. Elect Christa Rizzi To City Council  
Full Name of Committee  
P.O. Box 3998  
Address  
Apache Jct. AZ. 85117 Pinal 480-330-7744  
City ZIP Code County Phone

2. Christa Rizzi  
Sponsoring Organization or Candidate and office  
Christa Rizzi  
Name of Candidate and Office Sought (if applicable)  
smilehappyup@gmail.com 480-288-9001  
E-Mail Address Fax#

3A. ID#  
  
 com-5-12

4. **REPORTING PERIOD** (Please check appropriate box) **DUE BETWEEN**
- January 31 Report - For Period of June 7, 2011 thru December 31, 2012 ..... January 1, 2013 and January 31, 2013
  - Pre-Primary Election Report - For Period of January 1, 2013 thru February 28, 2013 ..... March 1, 2013 and March 8, 2013
  - Post-Primary Election Report - For Period of March 1, 2013 thru April 1, 2013 ..... April 2, 2013 and April 11, 2013
  - Pre-General Election Report - For Period of April 2, 2013 thru May 9, 2013 ..... May 10, 2013 and May 17, 2013
  - Post-General Election Report - For Period of May 10, 2013 thru June 10, 2013 ..... June 11, 2013 and June 20, 2013
  - \*\*January 31 Report - For Period of June 11, 2013 thru December 31, 2014 ..... January 1, 2015 and January 31, 2015

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5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)	0	0
5b Cash on Hand at the Beginning of this Reporting Period	0	0
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	0	0
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	0	0
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]		0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$ 230. <sup>00</sup>	\$ 2510.06
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	0	0

\*Insert date which is 21 days after date of last election (A.R.S. §15-913).  
 \*\*Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Elect Christa Rizzi to City Council  
 3. Report covering period from 5-10-13 Thru 6-10-13

2. ID# Com-5-12

RECEIPTS		COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		0	0
(a) Individuals - more than \$50 (Total from Schedule A)			
(b) Individuals - aggregate \$50 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]			
DISBURSEMENTS			
9. Expenditures for operating expenses (Total from Schedule D)		\$230. <sup>00</sup>	\$2510.06
10. Independent Expenditures (Total from Schedule D-1)		0	0
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]		\$230. <sup>00</sup>	\$2510.06
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		0	0
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.			
Christa Rizzi			
Type or Print Name of Treasurer			
Christa Rizzi			
Signature of Treasurer or Candidate or Designating Individual			
		6-15-13	
		Date	

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# CONTRIBUTIONS more than \$50 - from INDIVIDUALS\*

# SCHEDULE A

2. ID #

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

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 OR CONTRIBUTOR				
4a.	LAST <span style="margin-left: 100px;">FIRST</span> <span style="float: right;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 100px;">STATE</span> <span style="float: right;">ZIP</span>			
	OCCUPATION <span style="margin-left: 100px;">EMPLOYER</span>			
b.	LAST <span style="margin-left: 100px;">FIRST</span> <span style="float: right;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 100px;">STATE</span> <span style="float: right;">ZIP</span>			
	OCCUPATION <span style="margin-left: 100px;">EMPLOYER</span>			
c.	LAST <span style="margin-left: 100px;">FIRST</span> <span style="float: right;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 100px;">STATE</span> <span style="float: right;">ZIP</span>			
	OCCUPATION <span style="margin-left: 100px;">EMPLOYER</span>			
d.	LAST <span style="margin-left: 100px;">FIRST</span> <span style="float: right;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 100px;">STATE</span> <span style="float: right;">ZIP</span>			
	OCCUPATION <span style="margin-left: 100px;">EMPLOYER</span>			
e.	LAST <span style="margin-left: 100px;">FIRST</span> <span style="float: right;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 100px;">STATE</span> <span style="float: right;">ZIP</span>			
	OCCUPATION <span style="margin-left: 100px;">EMPLOYER</span>			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]			

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\*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

**CONTRIBUTIONS of \$50 or less - AGGREGATE TOTAL\***

**SCHEDULE A-1**

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

2. ID #
---------

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

**4. Aggregate Total of Contributions of \$50 or less**

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
<p>N/A</p>			
<p>5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]</p>		<p>6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]</p>	

\*If contributions of \$50 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.

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**CONTRIBUTIONS FROM POLITICAL COMMITTEES**

**SCHEDULE B**

2. ID #

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

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

4	CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
IDENTITY OF CONTRIBUTOR AND DATE RECEIVED				
4a	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 <i>(If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column 4)</i>			

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**CANDIDATE LOANS**

**SCHEDULE C**

1.	Committee Name	2. ID #		
3.	Report covering period from _____ thru _____			
4.	<b>LOANS MADE OR GUARANTEED BY CANDIDATE</b>	<b>DATE RECEIVED</b>	<b>AMOUNT RECEIVED</b>	<b>CUMULATIVE TOTAL THIS CAMPAIGN TO DATE</b>
	NAME AND ADDRESS FROM WHOM RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY ON LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]			

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**OTHER LOANS**

**SCHEDULE C1**

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

2. ID#

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

	<b>ALL OTHER LOANS</b>	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) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	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(a), Column A]			

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**EXPENDITURES FOR OPERATING EXPENSES\***

**SCHEDULE D**

1. Committee Name Elect Christa Bizzi to City Council

2. ID# Com-5-12

3. Report covering period from 5-10-13 thru 6-10-13

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>City of Apache Junction</u> <u>300 E. Superstition Blvd.</u> <u>Apache Junction, AZ, 85219</u>  DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Late Fees</u>	<u>5/21/13</u>	<u>\$230<sup>00</sup></u>
b.	NAME, ADDRESS, CITY, STATE AND ZIP   DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
c.	NAME, ADDRESS, CITY, STATE AND ZIP   DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
d.	NAME, ADDRESS, CITY, STATE AND ZIP   DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP   DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	NAME, ADDRESS, CITY, STATE AND 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 Detail Summary Page Line 9, Column A]		

\*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

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# LOANS MADE BY REPORTING COMMITTEE

# SCHEDULE D-2

2. ID#

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

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

4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		

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**OFFSETS TO OPERATING EXPENSES \***

**SCHEDULE D-3**

2. ID #

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

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

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			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND 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

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**REPAYMENT OF CANDIDATE LOANS**

**SCHEDULE D-4**

2. ID#

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

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

REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		

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**REPAYMENT OF ALL OTHER LOANS**

**SCHEDULE D-5**

2. ID #

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

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			
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		

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**TRANSFERS TO OTHER POLITICAL COMMITTEES**

**SCHEDULE D-6**

2. ID#

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

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

4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		

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**ANY OTHER DISBURSEMENT**

**SCHEDULE D-7**

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

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

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

ANY OTHER DISBURSEMENTS		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]

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# IN-KIND CONTRIBUTIONS and EXPENDITURES

# SCHEDULE E

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

2. ID #
---------

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

4	IN-KIND CONTRIBUTIONS and EXPENDITURES	DATE	FAIR MARKET VALUE						
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN								
4a.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td>                     CONTRIBUTION <input type="checkbox"/>                      EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION									
OCCUPATION	EMPLOYER								
b.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td>                     CONTRIBUTION <input type="checkbox"/>                      EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION									
OCCUPATION	EMPLOYER								
c.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td>                     CONTRIBUTION <input type="checkbox"/>                      EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION									
OCCUPATION	EMPLOYER								
d.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td>                     CONTRIBUTION <input type="checkbox"/>                      EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
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]								

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**DIVIDENDS, INTEREST, AND OTHER RECEIPTS**

**SCHEDULE F-1**

2. ID #

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

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

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  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)

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**OFFSETS TO CONTRIBUTIONS RECEIVED \***

**SCHEDULE F-2**

2. ID#

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

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

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE		
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION OF REFUND		

*[Handwritten signature]*

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

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**DEBTS AND OBLIGATIONS (Excluding Loans)**

**SCHEDULE F-3**

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

2. ID#

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

4	DEBTS AND OBLIGATIONS	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED				
b.	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 [Transfer total to Detail Summary Page Line 19, Column A]				

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