



PINAL COUNTY  
wide open opportunity

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

FOR OFFICE USE ONLY

PINAL COUNTY  
ELECTIONS DEPARTMENT

2012 SEP 28 PM 3:40

3. ID#

1. Alicia for Supervisor  
Full Name of Committee

1995 W. American Ave  
Address

Oracle 85023 520 609 7484  
City Zip Code Phone

2. \_\_\_\_\_  
Sponsoring Organization (if applicable)

\_\_\_\_\_  
Name of Candidate and Office Sought (if applicable)

\_\_\_\_\_  
Email Address Fax #

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

4. Reporting Period	(Please Check Appropriate Box)	Due Between
a	<input type="checkbox"/> <b>JANUARY 31ST REPORT -</b> For Period of November 23, 2010 through December 31, 2011	Jan. 1, 2012 and Jan. 31, 2012
b	<input type="checkbox"/> <b>JUNE 30TH REPORT -</b> For Period of January 1, 2012 through May 31, 2012	June 1, 2012 and July 2, 2012
c	<input type="checkbox"/> <b>PRE-PRIMARY ELECTION REPORT -</b> For Period of June 1, 2012 through August 16, 2012	Aug. 17, 2012 and Aug. 24, 2012
d	<input checked="" type="checkbox"/> <b>POST-PRIMARY ELECTION REPORT -</b> For Period of August 17, 2012 through September 17, 2012	Sept. 18, 2012 and Sept. 27, 2012
e	<input type="checkbox"/> <b>PRE-GENERAL ELECTION REPORT -</b> For Period of September 18, 2012 through October 25, 2012	Oct. 26, 2012 and Nov. 2, 2012
f	<input type="checkbox"/> <b>POST-GENERAL ELECTION REPORT -</b> For Period of October 26, 2012 through November 26, 2012	Nov. 27, 2012 and Dec. 6, 2012

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a	Total 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 (ending balance from the previous reporting period)	\$1600.00	\$829.00
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)		\$334.83
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	0.00	0.00
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	0
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)		\$1334.83
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)		\$829.00

**DETAILED SUMMARY PAGE OF  
RECEIPTS AND DISBURSEMENTS**

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

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

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

**RECEIPTS**

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

Column A This Period	Column B Campaign to Date
0	0 <sup>DK</sup> 1
0	0
0	0
0	1
0	0
0	346.50
0	0
0	0
0	0
0	346.50
0	0
	346.50

**DISBURSEMENTS**

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

0	400.00
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
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.

*EISA A. SALAZ-Contreras*

Type or Print Name of Treasurer

*Elsa A. Salaz-Contreras*

9/28/12

Signature of Treasurer or Candidate or Designating Individual

Date

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

**SCHEDULE A**

2. ID#

1. Committee Name Alicia for Supervisor

3. Report covering period from Sept 18 - Sept 27th thru \_\_\_\_\_

	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4.	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR			
a	Name <u>Dian &amp; Kelly Neal</u> Street Address <u>5700 Tangent Rd. Arizona</u> City <u>100 Valley</u> State <u>85741</u> Zip Occupation <u>Self employed</u> Employer	9-20-12	100. <sup>00</sup>	100. <sup>00</sup>
b	Name Street Address City State Zip Occupation Employer			
c	Name Street Address City State Zip Occupation Employer			
d	Name Street Address City State Zip Occupation Employer			
e	Name Street Address City State Zip Occupation Employer			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]			

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

**CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL\***

**SCHEDULE A-1**

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

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

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

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

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

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

# CONTRIBUTIONS FROM POLITICAL COMMITTEES

# SCHEDULE B

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

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

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

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

# CANDIDATE LOANS

# SCHEDULE C

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

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

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

	<b>LOANS MADE OR GUARANTEED BY CANDIDATE</b>	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																
4.	NAME, ADDRESS, FROM WHOM RECEIVED																			
4a	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Last</td> <td style="width: 25%;">First</td> <td style="width: 25%;">Initial</td> <td></td> </tr> <tr> <td colspan="4">Street Address</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip</td> <td></td> </tr> <tr> <td colspan="4">Description</td> </tr> </table>	Last	First	Initial		Street Address				City	State	Zip		Description						
Last	First	Initial																		
Street Address																				
City	State	Zip																		
Description																				
b	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Last</td> <td style="width: 25%;">First</td> <td style="width: 25%;">Initial</td> <td></td> </tr> <tr> <td colspan="4">Street Address</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip</td> <td></td> </tr> <tr> <td colspan="4">Description</td> </tr> </table>	Last	First	Initial		Street Address				City	State	Zip		Description						
Last	First	Initial																		
Street Address																				
City	State	Zip																		
Description																				
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City	State	Zip																		
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Last	First	Initial																		
Street Address																				
City	State	Zip																		
Description																				
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]																			

# OTHER LOANS

# SCHEDULE C-1

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

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

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

<b>ALL OTHER LOANS</b>		DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
<b>4.</b>	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN			
<b>a</b>	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
<b>b</b>	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
<b>c</b>	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
<b>d</b>	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
<b>5.</b>	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(b), Column A]			

**EXPENDITURES FOR OPERATING EXPENSES\***

**SCHEDULE D**

2. ID#

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

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

	<b>EXPENDITURES</b>	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
a	Name <u>Rosario Cruz</u> Street Address <u>PO BOX 1203</u> City <u>Oracle</u> State <u>AZ</u> Zip <u>85073</u> Description of Items or Services Purchased <u>labor</u>	9-27-12	\$400. <sup>00</sup>
b	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
c	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
d	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
e	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
f	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page Line 9, Column A]		

**INDEPENDENT EXPENDITURES\***

**SCHEDULE D-1**

2. ID#

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

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

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

\* SEE A.R.S. §16-901(14)

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

\_\_\_\_\_  
Signature of Treasurer

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

**LOANS MADE BY REPORTING COMMITTEE**

**SCHEDULE D-2**

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

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

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

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

**OFFSETS TO OPERATING EXPENSES\***

**SCHEDULE D-3**

2. ID#

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

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

4.	<b>REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES</b>	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
a	Name Street Address City State Zip Description of Refund		
b	Name Street Address City State Zip Description of Refund		
c	Name Street Address City State Zip Description of Refund		
d	Name Street Address City State Zip Description of Refund		
e	Name Street Address City State Zip Description of Refund		
f	Name Street Address City State Zip Description of Refund		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [if last page of Schedule D-3, transfer total to Detailed Summary Page, Line 17, Column A]		

\* Includes return of contributions made by reporting committee

# REPAYMENT OF CANDIDATE LOANS

## SCHEDULE D-4

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

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

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

4.	<b>REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE</b>	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a	Name		
	Street Address		
	City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip</span>		
b	Name		
	Street Address		
	City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip</span>		
c	Name		
	Street Address		
	City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip</span>		
d	Name		
	Street Address		
	City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip</span>		
e	Name		
	Street Address		
	City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip</span>		
f	Name		
	Street Address		
	City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip</span>		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [if last page of Schedule D-4, transfer total to Detailed Summary Page, Line 13(a), Column A]		

# REPAYMENT OF OTHER LOANS

## SCHEDULE D-5

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

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

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

4.	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a	Name and ID Number <hr/> Street Address <hr/> City State Zip		
b	Name and ID Number <hr/> Street Address <hr/> City State Zip		
c	Name and ID Number <hr/> Street Address <hr/> City State Zip		
d	Name and ID Number <hr/> Street Address <hr/> City State Zip		
e	Name and ID Number <hr/> Street Address <hr/> City State Zip		
f	Name and ID Number <hr/> Street Address <hr/> City State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [if last page of scheduTransfer total to Detailed Summary Page, Line 13(b), Column A]		

# TRANSFERS TO OTHER POLITICAL COMMITTEES

## SCHEDULE D-6

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

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

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

4.	<b>TRANSFERS MADE BY THE REPORTING COMMITTEE</b>	DATE TRANSFER WAS MADE	AMOUNT OF THE TRANSFER
	NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE		
a	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
b	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
c	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
d	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
e	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
f	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		

**ANY OTHER DISBURSEMENT**

**SCHEDULE D-7**

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

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

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

4. ANY OTHER DISBURSEMENT		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			
a	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
b	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
c	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
e	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
f	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [if last page of Schedule D-7, transfer total to Detailed Summary Page, Line 15, Column A]		

**IN-KIND CONTRIBUTIONS and EXPENDITURES**

**SCHEDULE E**

2. ID#

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

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

IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE						
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN								
a	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Name, Address, City, State, Zip, and ID# <i>MBQF Consulting LLC</i></td> <td>                     CONTRIBUTION <input checked="" type="checkbox"/>                       EXPENDITURE <input checked="" type="checkbox"/> <i>psc</i> </td> </tr> <tr> <td colspan="2">Description <i>Cards, mailouts, signs</i></td> </tr> <tr> <td>Occupation <i>consultant</i></td> <td>Employer <i>MBQF</i></td> </tr> </table>	Name, Address, City, State, Zip, and ID# <i>MBQF Consulting LLC</i>	CONTRIBUTION <input checked="" type="checkbox"/>  EXPENDITURE <input checked="" type="checkbox"/> <i>psc</i>	Description <i>Cards, mailouts, signs</i>		Occupation <i>consultant</i>	Employer <i>MBQF</i>	<i>9-26-12</i>	<i>346.50</i>
Name, Address, City, State, Zip, and ID# <i>MBQF Consulting LLC</i>	CONTRIBUTION <input checked="" type="checkbox"/>  EXPENDITURE <input checked="" type="checkbox"/> <i>psc</i>								
Description <i>Cards, mailouts, signs</i>									
Occupation <i>consultant</i>	Employer <i>MBQF</i>								
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		
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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)								

**DIVIDENDS, INTEREST, AND OTHER RECEIPTS**

**SCHEDULE F-1**

2. ID#

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

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

	<b>DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS</b>	DATE RECEIVED	AMOUNT OF THE RECEIPT
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED		
a	Name and ID Number Street Address City State Zip Description of Receipt		
b	Name and ID Number Street Address City State Zip Description of Receipt		
c	Name and ID Number Street Address City State Zip Description of Receipt		
d	Name and ID Number Street Address City State Zip Description of Receipt		
e	Name and ID Number Street Address City State Zip Description of Receipt		
f	Name and ID Number Street Address City State Zip Description of Receipt		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [if last page of Schedule F-1, transfer total to Detailed Summary Page, Line 7, Column A]		

**OFFSETS TO CONTRIBUTIONS RECEIVED\***

**SCHEDULE F-2**

2. ID#

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

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

4.	<b>REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED</b>	DATE REFUND WAS MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) TO WHOM THE REFUND WAS MADE; DESCRIPTION		
a	Name and ID Number		
	Street Address		
	City <span style="float: right;">State <span style="float: right;">Zip</span></span>		
	Description of Refund		
b	Name and ID Number		
	Street Address		
	City <span style="float: right;">State <span style="float: right;">Zip</span></span>		
	Description of Refund		
c	Name and ID Number		
	Street Address		
	City <span style="float: right;">State <span style="float: right;">Zip</span></span>		
	Description of Refund		
d	Name and ID Number		
	Street Address		
	City <span style="float: right;">State <span style="float: right;">Zip</span></span>		
	Description of Refund		
e	Name and ID Number		
	Street Address		
	City <span style="float: right;">State <span style="float: right;">Zip</span></span>		
	Description of Refund		
f	Name and ID Number		
	Street Address		
	City <span style="float: right;">State <span style="float: right;">Zip</span></span>		
	Description of Refund		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [if last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(e), Column A]		

\*Includes return of contributions received by reporting committee

# DEBTS AND OBLIGATIONS (Excluding Loans)

## SCHEDULE F-3

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

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

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

	<b>DEBTS AND OBLIGATIONS</b>	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED				
a	Name, Address, City, State, Zip, and ID#  Description of Debt				
b	Name, Address, City, State, Zip, and ID#  Description of Debt				
c	Name, Address, City, State, Zip, and ID#  Description of Debt				
d	Name, Address, City, State, Zip, and ID#  Description of Debt				
e	Name, Address, City, State, Zip, and ID#  Description of Debt				
5	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [if last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]				

# STATEMENT

**MBQF Consulting, LLC**

STATEMENT # 104  
DATE: SEPTEMBER 26, 2012

1102 N 84<sup>th</sup> Pl  
Scottsdale, AZ 85257  
Michael@mbqfconsulting.com

**BILL TO** Alicia for Supervisor Committee

**COMMENTS** Please Make Check Payable to MBQF Consulting, LLC

DATE	DESCRIPTION	BALANCE	AMOUNT
9/26/2012	In-Kind Contribution-Graphic Design for Palm Card		\$346.50
<b>CURRENT</b>	<b>1-30 DAYS PAST DUE</b>		
	<b>31-60 DAYS PAST DUE</b>	<b>61-90 DAYS PAST DUE</b>	<b>OVER 90 DAYS PAST DUE</b>
			<b>AMOUNT DUE</b>
			0

REMITTANCE	
Statement #	104
Date	
Amount Due	
Amount Enclosed	

Make all checks payable to MBQF Consulting, LLC