



STATE OF ARIZONA
 PINAL COUNTY
 POLITICAL COMMITTEE
CAMPAIGN FINANCE REPORT

PINAL COUNTY
wide open opportunity

FOR OFFICE USE ONLY

RECEIVED

AUG 25 REC'D

PINAL COUNTY
 RECORDER'S OFFICE

1. Committee to elect Jill Broussard
 Full Name of Committee
3552 E. Superior Rd.
 Address
San Tan Valley 85143 (480)332-3301
 City Zip Code Phone

3. ID#

2. _____
 Sponsoring Organization (if applicable)

 Name of Candidate and Office Sought (if applicable)

 Email Address Fax #

4. Reporting Period (Please Check Appropriate Box)		Due Between
a	<input type="checkbox"/> JANUARY 31ST REPORT - For Period of November 25, 2014 through December 31, 2015	Jan. 1, 2016 and Feb. 1, 2016
b	<input type="checkbox"/> JUNE 30TH REPORT - For Period of January 1, 2016 through May 31, 2016	June 1, 2016 and June 30, 2016
c	<input checked="" type="checkbox"/> PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2016 through August 18, 2016	Aug. 19, 2016 and Aug. 26, 2016
d	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT - For Period of August 19, 2016 through September 19, 2016	Sept. 20, 2016 and Sept. 29, 2016
e	<input type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 20, 2016 through October 27, 2016	Oct. 28, 2016 and Nov. 4, 2016
f	<input type="checkbox"/> POST-GENERAL ELECTION REPORT - For Period of October 28, 2016 through November 28, 2016	Nov. 29, 2016 and Dec. 8, 2016

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)		2579.83
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	2579.83	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	0	2700.00
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
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	120.17	460.17
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	2579.83	2239.83

**DETAILED SUMMARY PAGE OF
RECEIPTS AND DISBURSEMENTS**

1. Committee Name Committee to Elect Jill Broussard

2. ID #

3. Report covering period of 6/1/16 - 8/18/16

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	2700.00
0	0
0	0
0	2760.00
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	2700.00

DISBURSEMENTS

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

340.00	460.17
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
340.00	460.17
0	0
340.00	460.17
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.

Jill Broussard

Type or Print Name of Treasurer

Jill Broussard

September 25, 2016

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR			
a	Name Street Address City State Zip Occupation Employer		0	↓
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 Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
N/A	N/A	N/A
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

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

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 <u>N/A</u>	<u>N/A</u>	<u>N/A</u>
	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)]	<u>0</u>	<u>0</u>

CANDIDATE LOANS

SCHEDULE C

2. ID#

1. Committee Name Committee to elect Jill Braussard

3. Report covering period from June 1, 2016 thru August 18, 2016

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

OTHER LOANS

SCHEDULE C-1

1. Committee Name Committee to elect Jill Broussard 2. ID# _____

3. Report covering period from June 1, 2016 thru August 18, 2016

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4. NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name <u>Michael Anderson</u> Street Address <u>1209 W. Gascon</u> City <u>San Tan Valley</u> State <u>AZ</u> Zip <u>85143</u> Description of Items or Services Purchased <u>Post signs, gas, post driver, gloves (STV, AJ)</u>	<u>6/30/16</u>	<u>\$120.00</u>
b	Name <u>Michael Anderson</u> Street Address <u>1209 W. Gascon</u> City <u>San Tan Valley</u> State <u>AZ</u> Zip <u>85143</u> Description of Items or Services Purchased <u>Post signs (Florence, Coolidge, CG), gas</u>	<u>7/07/16</u>	<u>200.00</u>
c	Name <u>Ean Broussard</u> Street Address <u>3552 E. Superior Rd</u> City <u>San Tan Valley</u> State <u>AZ</u> Zip <u>85143</u> Description of Items or Services Purchased <u>Post Signs (STV, AJ)</u>	<u>6/30</u>	<u>\$20</u>
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]			<u>\$340.00</u>

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name Committee to elect Jill Brasseur

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
INDEPENDENT EXPENDITURES		
4. IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED		
a		
Name <u>N/A</u>	N/A	∅
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.

Jill Brasseur
Signature of Treasurer

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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name Committee to elect Jill Brassard 2. ID# _____

3. Report covering period from June 1, 2016 thru August 18, 2016

4. LOANS MADE BY THE REPORTING COMMITTEE				DATE LOAN MADE	AMOUNT OF LOAN
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE					
a	Committee Name	N/A		ID#	N/A
	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

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

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

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a	Name <div style="text-align: center; font-size: 2em;">N/A</div>	N/A	N/A
	Street Address	↓	↓
	City State Zip		
b	Name	↓	↓
	Street Address		
	City State Zip		
c	Name	↓	↓
	Street Address		
	City State Zip		
d	Name	↓	↓
	Street Address		
	City State Zip		
e	Name	↓	↓
	Street Address		
	City State Zip		
f	Name	↓	↓
	Street Address		
	City State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [if last page of Schedule D-4, transfer total to Detailed Summary Page, Line 13(a), Column A]		

REPAYMENT OF OTHER LOANS

SCHEDULE D-5

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

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 <u>N/A</u>	<u>N/A</u>	<u>N/A</u>
	Street Address		
	City State Zip		
b	Name and ID Number		
	Street Address		
	City State Zip		
c	Name and ID Number		
	Street Address		
	City State Zip		
d	Name and ID Number		
	Street Address		
	City State Zip		
e	Name and ID Number		
	Street Address		
	City State Zip		
f	Name and ID Number		
	Street Address		
	City State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [if last page of scheduTransfer total to Detailed Summary Page, Line 13(b), Column A]		<u>0</u>

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4. TRANSFERS MADE BY THE REPORTING COMMITTEE			DATE TRANSFER WAS MADE	AMOUNT OF THE TRANSFER
NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE				
a	Name and ID Number		N/A	N/A
	Street Address			
	City	State Zip		
b	Name and ID Number			
	Street Address			
	City	State Zip		
c	Name and ID Number			
	Street Address			
	City	State Zip		
d	Name and ID Number			
	Street Address			
	City	State Zip		
e	Name and ID Number			
	Street Address			
	City	State Zip		
f	Name and ID Number			
	Street Address			
	City	State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]			0

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

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 <u>N/A</u>	<u>N/A</u>	<u>∅</u>
	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]		<u>∅</u>

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 16, 2016

IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN		
a	Name, Address, City, State, Zip, and ID# <div style="text-align: center; font-size: 1.2em;">N/A</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input checked="" type="checkbox"/> </div> Description Occupation Employer	N/A	∅
b	Name, Address, City, State, Zip, and ID# Description Occupation Employer		↓
c	Name, Address, City, State, Zip, and ID# Description Occupation Employer		↓
d	Name, Address, City, State, Zip, and ID# Description Occupation Employer		↓
5	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A]		∅
6	ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]		∅

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Committee to Elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	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 <div style="text-align: center; font-size: 1.2em;">N/A</div> Street Address City State Zip Description of Receipt	N/A	∅
b	Name and ID Number Street Address City State Zip Description of Receipt		↓
c	Name and ID Number Street Address City State Zip Description of Receipt		
d	Name and ID Number Street Address City State Zip Description of Receipt		
e	Name and ID Number Street Address City State Zip Description of Receipt		
f	Name and ID Number Street Address City State Zip Description of Receipt		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [if last page of Schedule F-1, transfer total to Detailed Summary Page, Line 7, Column A]		

OFFSETS TO CONTRIBUTIONS RECEIVED*

SCHEDULE F-2

1. Committee Name Committee to elect Jill Broussard

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4. REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED		DATE REFUND WAS MADE	AMOUNT OF THE REFUND
NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) TO WHOM THE REFUND WAS MADE; DESCRIPTION			
a	Name and ID Number <u>N/A</u> Street Address City State Zip Description of Refund	<u>N/A</u>	<u>0</u>
b	Name and ID Number Street Address City State Zip Description of Refund		
c	Name and ID Number Street Address City State Zip Description of Refund		
d	Name and ID Number Street Address City State Zip Description of Refund		
e	Name and ID Number Street Address City State Zip Description of Refund		
f	Name and ID Number Street Address City State Zip Description of Refund		<u>↓</u>
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]		<u>0</u>

*Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name

Committee to Elect Jill Broussard

2. ID#

3. Report covering period from

June 1, 2016

thru

August 18, 2016

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					
a	Name, Address, City, State, Zip, and ID# N/A	N/A	∅ N/A	∅ N/A	N/A
	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]				∅