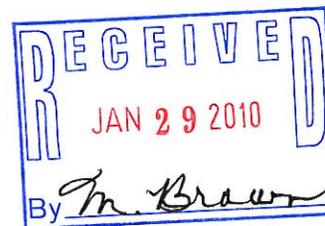


POLITICAL COMMITTEE
CITY/TOWN OF FLAGSTAFF
CAMPAIGN FINANCE REPORT
2010 March/May Regular Election

FOR OFFICE USE ONLY



1. Art Babbott for City Council
Full Name of Committee
1414 N Rim Dr
Address 928-774-9781
Flagstaff AZ 86001 Coconino
City ZIP Code County Phone

2. Art Babbott Flagstaff City Council
Sponsoring Organization or Candidate and office
artforflag@gmail.com
Name of Candidate and Office Sought (if applicable)
E-Mail Address Fax #

3A. ID#

4. **REPORTING PERIOD** (Please check appropriate box) **DUE BETWEEN**

- January 31 Report - For Period of June 2009 thru December 31, 2009 January 1, 2010 and January 31, 2010
- Pre-Primary Election Report - For Period of January 1, 2010 thru February 17, 2010 February 18, 2010 and February 25, 2010
- Post-Primary Election Report - For Period of February 18, 2010 thru March 29, 2010 March 30, 2010 thru April 8, 2010
- Pre-General Election Report - For Period of March 30, 2010 thru April 28, 2010 April 29, 2010 thru May 6, 2010
- Post-General Election Report - For Period of April 29, 2010 thru June 7, 2010 June 8, 2010 and June 17, 2010
- **January 31 Report - For Period of June 8, 2010 thru December 31, 2011 January 1, 2012 and January 31, 2012

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)		
5b Cash on Hand at the Beginning of this Reporting Period	0	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$ 5490	
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	\$ 5490	
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$ 1156.12	
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	\$ 4333.88	

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**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: Art Babbott for City Council
 3. Report covering period from _____ Thru _____

2. ID#

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$25 (Total from Schedule A)	\$4440	
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	\$250	
(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)]	\$4690	
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	\$500.00	
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]	\$500.00	
6. In-kind contributions (Total from Schedule E)	\$300	
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]	\$5490	
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).		
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	1156.12	
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]	1156.12	
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	1156.12	
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		

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.

Heather Babbott
 Type or Print Name of Treasurer

[Signature]
 Signature of Treasurer or Candidate or Designating Individual

1/28/10
 Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from Jan 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Castleberry</td> <td>George</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2233 E. Hemberg Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Real estate investor</td> <td colspan="2">Self</td> </tr> </table>	LAST	FIRST	MI	Castleberry	George		STREET ADDRESS			2233 E. Hemberg Dr			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		Real estate investor	Self		5/15/09	\$100.00	100.00
LAST	FIRST	MI																										
Castleberry	George																											
STREET ADDRESS																												
2233 E. Hemberg Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
Real estate investor	Self																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Castleberry</td> <td>Debbie</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2233 E. Hemberg Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>photographer</td> <td colspan="2">Self</td> </tr> </table>	LAST	FIRST	MI	Castleberry	Debbie		STREET ADDRESS			2233 E. Hemberg Dr			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		photographer	Self		5/15/09	\$100.00	200.00 erhb
LAST	FIRST	MI																										
Castleberry	Debbie																											
STREET ADDRESS																												
2233 E. Hemberg Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
photographer	Self																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Brandt</td> <td>Karl</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2131 Sarazen Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Dunedin</td> <td>FL</td> <td>34698</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Brandt	Karl		STREET ADDRESS			2131 Sarazen Dr			CITY	STATE	ZIP	Dunedin	FL	34698	OCCUPATION	EMPLOYER		retired			5/26/09	\$100.00	300.00
LAST	FIRST	MI																										
Brandt	Karl																											
STREET ADDRESS																												
2131 Sarazen Dr																												
CITY	STATE	ZIP																										
Dunedin	FL	34698																										
OCCUPATION	EMPLOYER																											
retired																												
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Breed</td> <td>William</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">422 E David Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Breed	William		STREET ADDRESS			422 E David Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		retired			6/1/09	\$150.00	
LAST	FIRST	MI																										
Breed	William																											
STREET ADDRESS																												
422 E David Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
retired																												
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Babbott</td> <td>David</td> <td>✓</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">388 Thomas Rd</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Shelburne</td> <td>VT</td> <td>05482</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>financial Advisor</td> <td colspan="2">Morgan Stanley</td> </tr> </table>	LAST	FIRST	MI	Babbott	David	✓	STREET ADDRESS			388 Thomas Rd			CITY	STATE	ZIP	Shelburne	VT	05482	OCCUPATION	EMPLOYER		financial Advisor	Morgan Stanley		6/1/09	\$100.00	
LAST	FIRST	MI																										
Babbott	David	✓																										
STREET ADDRESS																												
388 Thomas Rd																												
CITY	STATE	ZIP																										
Shelburne	VT	05482																										
OCCUPATION	EMPLOYER																											
financial Advisor	Morgan Stanley																											
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]																											

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																												
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Babbott</td> <td>Meredith</td> <td>B</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">901 Wake Robin Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Shelburne</td> <td>VT</td> <td>05482</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Babbott	Meredith	B	STREET ADDRESS			901 Wake Robin Dr			CITY	STATE	ZIP	Shelburne	VT	05482	OCCUPATION	EMPLOYER		retired			6/12/09	\$250.00	
LAST	FIRST	MI																										
Babbott	Meredith	B																										
STREET ADDRESS																												
901 Wake Robin Dr																												
CITY	STATE	ZIP																										
Shelburne	VT	05482																										
OCCUPATION	EMPLOYER																											
retired																												
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Wallen</td> <td>Norm Lina</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3716 N Grandview</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>retired ^{or} Manager</td> <td colspan="2">Flagstaff Housing Authority</td> </tr> </table>	LAST	FIRST	MI	Wallen	Norm Lina		STREET ADDRESS			3716 N Grandview			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		retired ^{or} Manager	Flagstaff Housing Authority		6/21/09	\$100.00	
LAST	FIRST	MI																										
Wallen	Norm Lina																											
STREET ADDRESS																												
3716 N Grandview																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
retired ^{or} Manager	Flagstaff Housing Authority																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Chapman</td> <td>Laura</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1819 N San Francisco</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>restaurant owner</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Chapman	Laura		STREET ADDRESS			1819 N San Francisco			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		restaurant owner	self		8/2/09	\$40.00	
LAST	FIRST	MI																										
Chapman	Laura																											
STREET ADDRESS																												
1819 N San Francisco																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
restaurant owner	self																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Beaury</td> <td>Melissa</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">PO Box 1676</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86002</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Art teacher</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Beaury	Melissa		STREET ADDRESS			PO Box 1676			CITY	STATE	ZIP	Flagstaff	AZ	86002	OCCUPATION	EMPLOYER		Art teacher	self		8/4/09	\$50.00	
LAST	FIRST	MI																										
Beaury	Melissa																											
STREET ADDRESS																												
PO Box 1676																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86002																										
OCCUPATION	EMPLOYER																											
Art teacher	self																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Davis</td> <td>Greg</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">415 1/2 N San Francisco</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>manager</td> <td colspan="2">TOP LLC</td> </tr> </table>	LAST	FIRST	MI	Davis	Greg		STREET ADDRESS			415 1/2 N San Francisco			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		manager	TOP LLC		8/4/09	\$7000	
LAST	FIRST	MI																										
Davis	Greg																											
STREET ADDRESS																												
415 1/2 N San Francisco																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
manager	TOP LLC																											
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)																											

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babboth for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																							
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Wright</td> <td>Byrle</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">411 W. Cedar Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>owner</td> <td colspan="2">AZ Bikes</td> </tr> </table>	LAST	FIRST	MI	Wright	Byrle		STREET ADDRESS			411 W. Cedar Ave			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		owner	AZ Bikes		8/4/09	\$35.00
LAST	FIRST	MI																									
Wright	Byrle																										
STREET ADDRESS																											
411 W. Cedar Ave																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
owner	AZ Bikes																										
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Bernstein</td> <td>Eli</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3723 N Grandview Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Manager</td> <td colspan="2">Diablo Burger</td> </tr> </table>	LAST	FIRST	MI	Bernstein	Eli		STREET ADDRESS			3723 N Grandview Dr			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		Manager	Diablo Burger		8/4/09	\$35.00
LAST	FIRST	MI																									
Bernstein	Eli																										
STREET ADDRESS																											
3723 N Grandview Dr																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86004																									
OCCUPATION	EMPLOYER																										
Manager	Diablo Burger																										
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Agnostini</td> <td>Marco</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">317 N Humphrey</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>owner</td> <td colspan="2">NJ Pizza Co</td> </tr> </table>	LAST	FIRST	MI	Agnostini	Marco		STREET ADDRESS			317 N Humphrey			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		owner	NJ Pizza Co		8/4/09	\$70.00
LAST	FIRST	MI																									
Agnostini	Marco																										
STREET ADDRESS																											
317 N Humphrey																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
owner	NJ Pizza Co																										
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Begay</td> <td>Shonto</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">7 E Aspen #4</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Artist</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Begay	Shonto		STREET ADDRESS			7 E Aspen #4			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Artist	self		8/5/09	\$20.00
LAST	FIRST	MI																									
Begay	Shonto																										
STREET ADDRESS																											
7 E Aspen #4																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
Artist	self																										
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Reimer</td> <td>Frances</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3300 N. Adrienne</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Professor</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Reimer	Frances		STREET ADDRESS			3300 N. Adrienne			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		Professor	NAU		8/5/09	\$200.00
LAST	FIRST	MI																									
Reimer	Frances																										
STREET ADDRESS																											
3300 N. Adrienne																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86004																									
OCCUPATION	EMPLOYER																										
Professor	NAU																										
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]																										

*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.

180

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

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.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Katz</td> <td>Scott</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">214 W Cedar</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RN</td> <td colspan="2">FMC</td> </tr> </table>	LAST	FIRST	MI	Katz	Scott		STREET ADDRESS			214 W Cedar			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		RN	FMC		8/5/09	\$50.00
LAST	FIRST	MI																									
Katz	Scott																										
STREET ADDRESS																											
214 W Cedar																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
RN	FMC																										
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Tena</td> <td>Phil</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1109 W Shullenbarger</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Mason</td> <td colspan="2">Self</td> </tr> </table>	LAST	FIRST	MI	Tena	Phil		STREET ADDRESS			1109 W Shullenbarger			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Mason	Self		8/6/09	\$25
LAST	FIRST	MI																									
Tena	Phil																										
STREET ADDRESS																											
1109 W Shullenbarger																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
Mason	Self																										
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Dunn</td> <td>Edward</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">21 W Pine Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>contractor</td> <td colspan="2">Self</td> </tr> </table>	LAST	FIRST	MI	Dunn	Edward		STREET ADDRESS			21 W Pine Ave			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		contractor	Self		8/6/09	\$50.00
LAST	FIRST	MI																									
Dunn	Edward																										
STREET ADDRESS																											
21 W Pine Ave																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
contractor	Self																										
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Castleberry</td> <td>Richard</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">988 Vallombrosa Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Chico</td> <td>CA</td> <td>95926</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>property manager</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Castleberry	Richard		STREET ADDRESS			988 Vallombrosa Ave			CITY	STATE	ZIP	Chico	CA	95926	OCCUPATION	EMPLOYER		property manager			8/5/09	\$40.00
LAST	FIRST	MI																									
Castleberry	Richard																										
STREET ADDRESS																											
988 Vallombrosa Ave																											
CITY	STATE	ZIP																									
Chico	CA	95926																									
OCCUPATION	EMPLOYER																										
property manager																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Bessler</td> <td>Andy</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3405 N Grandview</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>tribal partner represent</td> <td colspan="2">Sierra Club</td> </tr> </table>	LAST	FIRST	MI	Bessler	Andy		STREET ADDRESS			3405 N Grandview			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		tribal partner represent	Sierra Club		8/12/09	\$50.00
LAST	FIRST	MI																									
Bessler	Andy																										
STREET ADDRESS																											
3405 N Grandview																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86004																									
OCCUPATION	EMPLOYER																										
tribal partner represent	Sierra Club																										
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]																										

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Widmark</td> <td>Derrick</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3723 N Grandview Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>sm business owner</td> <td colspan="2">Diablo Burger</td> </tr> </table>	LAST	FIRST	MI	Widmark	Derrick		STREET ADDRESS			3723 N Grandview Dr			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		sm business owner	Diablo Burger		8/23/09	\$40.00	
LAST	FIRST	MI																										
Widmark	Derrick																											
STREET ADDRESS																												
3723 N Grandview Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
sm business owner	Diablo Burger																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Keeler</td> <td>Benjamin</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2328 N Lantern Lane</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RN</td> <td colspan="2">FMC</td> </tr> </table>	LAST	FIRST	MI	Keeler	Benjamin		STREET ADDRESS			2328 N Lantern Lane			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		RN	FMC		8/23/09	\$30.00	
LAST	FIRST	MI																										
Keeler	Benjamin																											
STREET ADDRESS																												
2328 N Lantern Lane																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
RN	FMC																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>McDougal</td> <td>Charles</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">4429 N mtn meadow</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>farmer</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	McDougal	Charles		STREET ADDRESS			4429 N mtn meadow			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		farmer	self		8/23/09	\$50.00	
LAST	FIRST	MI																										
McDougal	Charles																											
STREET ADDRESS																												
4429 N mtn meadow																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
farmer	self																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Roof</td> <td>Marcy</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1909 N marion Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>color specialist</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Roof	Marcy		STREET ADDRESS			1909 N marion Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		color specialist	self		8/25/09	\$60.00	
LAST	FIRST	MI																										
Roof	Marcy																											
STREET ADDRESS																												
1909 N marion Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
color specialist	self																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Chandler</td> <td>Gay</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2912 N Creekside Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>food consultant</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Chandler	Gay		STREET ADDRESS			2912 N Creekside Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		food consultant	self		8/27/09	\$50.00	
LAST	FIRST	MI																										
Chandler	Gay																											
STREET ADDRESS																												
2912 N Creekside Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
food consultant	self																											
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]																											

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																							
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																										
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Meronuck</td> <td>Andrea</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">12 N Hillside</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>graduate student</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Meronuck	Andrea		STREET ADDRESS			12 N Hillside			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		graduate student	NAU		9/1/09	\$70.00
LAST	FIRST	MI																									
Meronuck	Andrea																										
STREET ADDRESS																											
12 N Hillside																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
graduate student	NAU																										
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Leary</td> <td>Michael</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">PO Box 684</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86002</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>landscape Architect</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Leary	Michael		STREET ADDRESS			PO Box 684			CITY	STATE	ZIP	Flagstaff	AZ	86002	OCCUPATION	EMPLOYER		landscape Architect	self		9/8/09	\$200.00
LAST	FIRST	MI																									
Leary	Michael																										
STREET ADDRESS																											
PO Box 684																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86002																									
OCCUPATION	EMPLOYER																										
landscape Architect	self																										
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Bliss</td> <td>Rachel</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">17 W Silver Spruce</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>business owner</td> <td colspan="2">self Animas</td> </tr> </table>	LAST	FIRST	MI	Bliss	Rachel		STREET ADDRESS			17 W Silver Spruce			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		business owner	self Animas		9/10/09	\$35.00
LAST	FIRST	MI																									
Bliss	Rachel																										
STREET ADDRESS																											
17 W Silver Spruce																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
business owner	self Animas																										
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Otten</td> <td>Karna</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1909 N Marion Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Coordinator</td> <td colspan="2">CSA</td> </tr> </table>	LAST	FIRST	MI	Otten	Karna		STREET ADDRESS			1909 N Marion Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Coordinator	CSA		9/10/09	\$35.00
LAST	FIRST	MI																									
Otten	Karna																										
STREET ADDRESS																											
1909 N Marion Dr																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
Coordinator	CSA																										
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Propper</td> <td>Kathy</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">11325 Homestead Ln</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Professor</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Propper	Kathy		STREET ADDRESS			11325 Homestead Ln			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		Professor	NAU		9/12/09	\$70.00
LAST	FIRST	MI																									
Propper	Kathy																										
STREET ADDRESS																											
11325 Homestead Ln																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86004																									
OCCUPATION	EMPLOYER																										
Professor	NAU																										
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]																										

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																							
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Taylor</td> <td>Liz</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3314 Grave Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Richmond</td> <td>VA</td> <td>23221</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Consultant</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Taylor	Liz		STREET ADDRESS			3314 Grave Ave			CITY	STATE	ZIP	Richmond	VA	23221	OCCUPATION	EMPLOYER		Consultant	self			\$155.00
LAST	FIRST	MI																									
Taylor	Liz																										
STREET ADDRESS																											
3314 Grave Ave																											
CITY	STATE	ZIP																									
Richmond	VA	23221																									
OCCUPATION	EMPLOYER																										
Consultant	self																										
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>McCleskey</td> <td>Nancy</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">PO Box 1023</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86002</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Councilor</td> <td colspan="2">FUSD</td> </tr> </table>	LAST	FIRST	MI	McCleskey	Nancy		STREET ADDRESS			PO Box 1023			CITY	STATE	ZIP	Flagstaff	AZ	86002	OCCUPATION	EMPLOYER		Councilor	FUSD		10/9/09	\$75.00
LAST	FIRST	MI																									
McCleskey	Nancy																										
STREET ADDRESS																											
PO Box 1023																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86002																									
OCCUPATION	EMPLOYER																										
Councilor	FUSD																										
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Rinaldi</td> <td>James</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1600 S River Valley Rd</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86002</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>hotelier</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Rinaldi	James		STREET ADDRESS			1600 S River Valley Rd			CITY	STATE	ZIP	Flagstaff	AZ	86002	OCCUPATION	EMPLOYER		hotelier	self		10/9/09	\$100.00
LAST	FIRST	MI																									
Rinaldi	James																										
STREET ADDRESS																											
1600 S River Valley Rd																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86002																									
OCCUPATION	EMPLOYER																										
hotelier	self																										
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Petersons</td> <td>Rodney</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1506 N Sunset Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>retired fire fighter</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Petersons	Rodney		STREET ADDRESS			1506 N Sunset Dr			CITY	STATE	ZIP	Flagstaff	AZ		OCCUPATION	EMPLOYER		retired fire fighter			10/9/09	\$50.00
LAST	FIRST	MI																									
Petersons	Rodney																										
STREET ADDRESS																											
1506 N Sunset Dr																											
CITY	STATE	ZIP																									
Flagstaff	AZ																										
OCCUPATION	EMPLOYER																										
retired fire fighter																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Kotalik</td> <td>Jennifer</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">4701 E Monroe St</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RN</td> <td colspan="2">FMC</td> </tr> </table>	LAST	FIRST	MI	Kotalik	Jennifer		STREET ADDRESS			4701 E Monroe St			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		RN	FMC		10/9/09	\$40.00
LAST	FIRST	MI																									
Kotalik	Jennifer																										
STREET ADDRESS																											
4701 E Monroe St																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86004																									
OCCUPATION	EMPLOYER																										
RN	FMC																										
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]																										

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

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.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">LAST Mckell</td> <td style="width: 25%;">FIRST David</td> <td style="width: 10%;">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS 111 E oak Ave # 4</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION Professor</td> <td colspan="2">EMPLOYER NAU</td> </tr> </table>	LAST Mckell	FIRST David	MI	STREET ADDRESS 111 E oak Ave # 4			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION Professor	EMPLOYER NAU		10/9/09	\$100.00
LAST Mckell	FIRST David	MI													
STREET ADDRESS 111 E oak Ave # 4															
CITY Flagstaff	STATE AZ	ZIP 86001													
OCCUPATION Professor	EMPLOYER NAU														
b.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">LAST McFadden</td> <td style="width: 25%;">FIRST Jim</td> <td style="width: 10%;">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS 3425 S Litzler</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION retired</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST McFadden	FIRST Jim	MI	STREET ADDRESS 3425 S Litzler			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION retired	EMPLOYER		10/9/09	\$50.00
LAST McFadden	FIRST Jim	MI													
STREET ADDRESS 3425 S Litzler															
CITY Flagstaff	STATE AZ	ZIP 86001													
OCCUPATION retired	EMPLOYER														
c.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">LAST Pearce</td> <td style="width: 25%;">FIRST Shar</td> <td style="width: 10%;">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS 724 W aspen</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION optician</td> <td colspan="2">EMPLOYER Flagstaff EyeCare</td> </tr> </table>	LAST Pearce	FIRST Shar	MI	STREET ADDRESS 724 W aspen			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION optician	EMPLOYER Flagstaff EyeCare		10/9/09	\$20.00
LAST Pearce	FIRST Shar	MI													
STREET ADDRESS 724 W aspen															
CITY Flagstaff	STATE AZ	ZIP 86001													
OCCUPATION optician	EMPLOYER Flagstaff EyeCare														
d.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">LAST Babbott</td> <td style="width: 25%;">FIRST Heather</td> <td style="width: 10%;">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1414 N Rum Dr</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION RN</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST Babbott	FIRST Heather	MI	STREET ADDRESS 1414 N Rum Dr			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION RN	EMPLOYER		10/9/09	\$20.00
LAST Babbott	FIRST Heather	MI													
STREET ADDRESS 1414 N Rum Dr															
CITY Flagstaff	STATE AZ	ZIP 86001													
OCCUPATION RN	EMPLOYER														
e.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">LAST Miranda</td> <td style="width: 25%;">FIRST Todd</td> <td style="width: 10%;">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS 678 N Fox St</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION fire fighter</td> <td colspan="2">EMPLOYER Sedona Fire</td> </tr> </table>	LAST Miranda	FIRST Todd	MI	STREET ADDRESS 678 N Fox St			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION fire fighter	EMPLOYER Sedona Fire		10/9/09	\$100.00
LAST Miranda	FIRST Todd	MI													
STREET ADDRESS 678 N Fox St															
CITY Flagstaff	STATE AZ	ZIP 86001													
OCCUPATION fire fighter	EMPLOYER Sedona Fire														
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to Detailed Summary Page Line 4(2), 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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Andriani</td> <td>Lucinda</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3505 E Rainer Loop</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Director</td> <td colspan="2">Cocorino County</td> </tr> </table>	LAST	FIRST	MI	Andriani	Lucinda		STREET ADDRESS			3505 E Rainer Loop			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		Director	Cocorino County		10/9/09	\$75.00	
LAST	FIRST	MI																										
Andriani	Lucinda																											
STREET ADDRESS																												
3505 E Rainer Loop																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
Director	Cocorino County																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Barotz</td> <td>Celia</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">900 N Switzer Canyon # 248</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>land use consultant</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Barotz	Celia		STREET ADDRESS			900 N Switzer Canyon # 248			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		land use consultant	self		10/9/09	\$50.00	
LAST	FIRST	MI																										
Barotz	Celia																											
STREET ADDRESS																												
900 N Switzer Canyon # 248																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
land use consultant	self																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Vargas</td> <td>Steve</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1410 N Rim Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>IT</td> <td colspan="2">GORE</td> </tr> </table>	LAST	FIRST	MI	Vargas	Steve		STREET ADDRESS			1410 N Rim Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		IT	GORE		10/9/09	\$75.00	
LAST	FIRST	MI																										
Vargas	Steve																											
STREET ADDRESS																												
1410 N Rim Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
IT	GORE																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Dagget</td> <td>Becky</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1195 E Apple Way</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Educator Admin</td> <td colspan="2">FALA</td> </tr> </table>	LAST	FIRST	MI	Dagget	Becky		STREET ADDRESS			1195 E Apple Way			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Educator Admin	FALA		10/9/09	\$100.00	
LAST	FIRST	MI																										
Dagget	Becky																											
STREET ADDRESS																												
1195 E Apple Way																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Educator Admin	FALA																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Johnson</td> <td>Cynthia</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1545 E Linda Vista</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>IT</td> <td colspan="2">GORE</td> </tr> </table>	LAST	FIRST	MI	Johnson	Cynthia		STREET ADDRESS			1545 E Linda Vista			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		IT	GORE		10/9/09	\$100.00	
LAST	FIRST	MI																										
Johnson	Cynthia																											
STREET ADDRESS																												
1545 E Linda Vista																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
IT	GORE																											
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]																											

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

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.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Brodeur</td> <td>Thomas</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">4279 E. Coburn Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>energy consultant</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Brodeur	Thomas		STREET ADDRESS			4279 E. Coburn Dr			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		energy consultant	self		10/9/09	\$25.00	
LAST	FIRST	MI																										
Brodeur	Thomas																											
STREET ADDRESS																												
4279 E. Coburn Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
energy consultant	self																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Linda</td> <td>Deb</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2808 E Lours Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>RN</td> <td colspan="2">FMC</td> </tr> </table>	LAST	FIRST	MI	Linda	Deb		STREET ADDRESS			2808 E Lours Dr			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		RN	FMC		10/9/09	\$100.00	
LAST	FIRST	MI																										
Linda	Deb																											
STREET ADDRESS																												
2808 E Lours Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
RN	FMC																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Khalsa</td> <td>Artar</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">PO BOX 23577</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86002</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>researcher</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Khalsa	Artar		STREET ADDRESS			PO BOX 23577			CITY	STATE	ZIP	Flagstaff	AZ	86002	OCCUPATION	EMPLOYER		researcher	NAU		10/9/09	\$25.00	
LAST	FIRST	MI																										
Khalsa	Artar																											
STREET ADDRESS																												
PO BOX 23577																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86002																										
OCCUPATION	EMPLOYER																											
researcher	NAU																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Fontanini</td> <td>Roger</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">4042 Fallen Oak Way</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Developer</td> <td colspan="2">SUF</td> </tr> </table>	LAST	FIRST	MI	Fontanini	Roger		STREET ADDRESS			4042 Fallen Oak Way			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		Developer	SUF		10/9/09	\$100.00	
LAST	FIRST	MI																										
Fontanini	Roger																											
STREET ADDRESS																												
4042 Fallen Oak Way																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
Developer	SUF																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Ellison</td> <td>Travis</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3206 S Little Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>archeologist</td> <td colspan="2">Envirosystems mgmt</td> </tr> </table>	LAST	FIRST	MI	Ellison	Travis		STREET ADDRESS			3206 S Little Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		archeologist	Envirosystems mgmt		10/9/09	\$100.00	
LAST	FIRST	MI																										
Ellison	Travis																											
STREET ADDRESS																												
3206 S Little Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
archeologist	Envirosystems mgmt																											
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]																											

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31 2009

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Tilman</td> <td>Lee</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">809 W. Murray Rd</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Tilman	Lee		STREET ADDRESS			809 W. Murray Rd			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Retired			10/27/09	\$ 50.00	
LAST	FIRST	MI																										
Tilman	Lee																											
STREET ADDRESS																												
809 W. Murray Rd																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Retired																												
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Martens</td> <td>Tamara</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1420 N Rim Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Case manager</td> <td colspan="2">NARBA</td> </tr> </table>	LAST	FIRST	MI	Martens	Tamara		STREET ADDRESS			1420 N Rim Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Case manager	NARBA		11/6/09	\$25.00	
LAST	FIRST	MI																										
Martens	Tamara																											
STREET ADDRESS																												
1420 N Rim Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Case manager	NARBA																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Horstman</td> <td>Patrice</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2200 Marion Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Lawyer</td> <td colspan="2">Hufford Horstman Mongini</td> </tr> </table>	LAST	FIRST	MI	Horstman	Patrice		STREET ADDRESS			2200 Marion Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Lawyer	Hufford Horstman Mongini		11/6/09	\$100.00	
LAST	FIRST	MI																										
Horstman	Patrice																											
STREET ADDRESS																												
2200 Marion Dr																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Lawyer	Hufford Horstman Mongini																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Whelan</td> <td>Jaime</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1819 N San Francisco</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>educator</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Whelan	Jaime		STREET ADDRESS			1819 N San Francisco			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		educator	NAU		11/6/09	\$100.00	
LAST	FIRST	MI																										
Whelan	Jaime																											
STREET ADDRESS																												
1819 N San Francisco																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
educator	NAU																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Whelan</td> <td>Donna</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1819 N San Francisco</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>homemaker</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Whelan	Donna		STREET ADDRESS			1819 N San Francisco			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		homemaker			11/6/09	\$20.00	
LAST	FIRST	MI																										
Whelan	Donna																											
STREET ADDRESS																												
1819 N San Francisco																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
homemaker																												
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(2), 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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

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.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Mierendorf</td> <td>Brett</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">2006 N Crescent Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>fire fighter</td> <td colspan="2">Flagstaff fire Dept</td> </tr> </table>	LAST	FIRST	MI	Mierendorf	Brett		STREET ADDRESS			2006 N Crescent Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		fire fighter	Flagstaff fire Dept		11/6/09	\$50.00
LAST	FIRST	MI																									
Mierendorf	Brett																										
STREET ADDRESS																											
2006 N Crescent Dr																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
fire fighter	Flagstaff fire Dept																										
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Scurlock</td> <td>Rodger</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">301 W Juniper Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Scurlock	Rodger		STREET ADDRESS			301 W Juniper Ave			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER					11/6/09	\$100.00
LAST	FIRST	MI																									
Scurlock	Rodger																										
STREET ADDRESS																											
301 W Juniper Ave																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Shuller</td> <td>Naima</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">103 N Hilltop Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>mother</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Shuller	Naima		STREET ADDRESS			103 N Hilltop Dr			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		mother			11/30/09	\$50.00
LAST	FIRST	MI																									
Shuller	Naima																										
STREET ADDRESS																											
103 N Hilltop Dr																											
CITY	STATE	ZIP																									
Flagstaff	AZ	86001																									
OCCUPATION	EMPLOYER																										
mother																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Rouvier</td> <td>Julia</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1450 W Kaibab # 83</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff, AZ</td> <td></td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>sign language interpreter</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Rouvier	Julia		STREET ADDRESS			1450 W Kaibab # 83			CITY	STATE	ZIP	Flagstaff, AZ		86001	OCCUPATION	EMPLOYER		sign language interpreter	NAU		11/20/09	\$60.00
LAST	FIRST	MI																									
Rouvier	Julia																										
STREET ADDRESS																											
1450 W Kaibab # 83																											
CITY	STATE	ZIP																									
Flagstaff, AZ		86001																									
OCCUPATION	EMPLOYER																										
sign language interpreter	NAU																										
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Keith</td> <td>Art</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">624 W Tombstone Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>8600</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>researcher</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Keith	Art		STREET ADDRESS			624 W Tombstone Ave			CITY	STATE	ZIP	Flagstaff	AZ	8600	OCCUPATION	EMPLOYER		researcher	NAU		11/18/09	\$30.00
LAST	FIRST	MI																									
Keith	Art																										
STREET ADDRESS																											
624 W Tombstone Ave																											
CITY	STATE	ZIP																									
Flagstaff	AZ	8600																									
OCCUPATION	EMPLOYER																										
researcher	NAU																										
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]																										

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbott for City Council

2. ID #

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.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Ehrenreich</td> <td>Amy</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">669 Commanche</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86601</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>event coordinator</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Ehrenreich	Amy		STREET ADDRESS			669 Commanche			CITY	STATE	ZIP	Flagstaff	AZ	86601	OCCUPATION	EMPLOYER		event coordinator			12/8/09	\$100.00	
LAST	FIRST	MI																										
Ehrenreich	Amy																											
STREET ADDRESS																												
669 Commanche																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86601																										
OCCUPATION	EMPLOYER																											
event coordinator																												
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Donaldson</td> <td>Joseph</td> <td>C</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1325 E Linda Vista</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>consultant</td> <td colspan="2">self</td> </tr> </table>	LAST	FIRST	MI	Donaldson	Joseph	C	STREET ADDRESS			1325 E Linda Vista			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		consultant	self		12/14/09	\$100.00	
LAST	FIRST	MI																										
Donaldson	Joseph	C																										
STREET ADDRESS																												
1325 E Linda Vista																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
consultant	self																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Hirst</td> <td>Stephen</td> <td>M</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1035 E. Apple Way</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Hirst	Stephen	M	STREET ADDRESS			1035 E. Apple Way			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Retired			12/17/09	\$25.00	
LAST	FIRST	MI																										
Hirst	Stephen	M																										
STREET ADDRESS																												
1035 E. Apple Way																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Retired																												
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Silver</td> <td>Charles</td> <td>W</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">720 W Aspen Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Silver	Charles	W	STREET ADDRESS			720 W Aspen Ave			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		retired			12/17/09	\$100.00	
LAST	FIRST	MI																										
Silver	Charles	W																										
STREET ADDRESS																												
720 W Aspen Ave																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
retired																												
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Hartgroves</td> <td>Laura</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1040 E Apple Way</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Contract Admin</td> <td colspan="2">NARBHA</td> </tr> </table>	LAST	FIRST	MI	Hartgroves	Laura		STREET ADDRESS			1040 E Apple Way			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Contract Admin	NARBHA		12/17/09	\$50.00	
LAST	FIRST	MI																										
Hartgroves	Laura																											
STREET ADDRESS																												
1040 E Apple Way																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Contract Admin	NARBHA																											
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)																											

*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 more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbitt for City Council
 3. Report covering period from _____ thru _____

2. ID # _____

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR				
4a.	LAST FIRST MI Weissman Marilyn J STREET ADDRESS 1055 E Apple Way CITY STATE ZIP Flagstaff AZ 86001 OCCUPATION EMPLOYER Land Surveyor Four Winds	12/17/09	\$50.00	
b.	LAST FIRST MI Zahl Kathleen J STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER Administration CCC	12/17/09	\$25.00	
c.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
d.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
e.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
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]		4690	

*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.

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name <u>Art Babbott for City Council</u>	2. ID #		
3.	Report covering period from _____ thru _____			
4.	LOANS MADE OR GUARANTEED BY CANDIDATE	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS FROM WHOM RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP <u>Art Babbott</u> <u>1477 N Rim Dr</u> <u>Flagstaff AZ 86001</u>	<u>5/09</u>	<u>\$500.00</u>	
	DESCRIPTION <u>personal loan to campaign</u>			
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 IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]		<u>500</u>	

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name _____

2. ID #

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 A]</i>			

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Art Bebbitt for City Council

2. ID #

3. Report covering period from June 2009 thru Dec 31, 2009

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>Bear Jaw LLC</u> <u>2 Beaver St Flagstaff AZ 86001</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Stripes / Printing</u>	8/19	360.64
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>5 Star Printing</u> <u>2708 N 4th St. Flagstaff AZ 86001</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Rack cards - printing</u>	10/6	437.09
c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Constant Contact</u> <u>Reserve Place</u> <u>1601 Trapelo Rd. Waltham MA 02451</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Email service</u>	12-1	157.10
d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>First State Bank</u> <u>822 N Humphrey Flagstaff AZ 86001</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Monthly bank fee - June - Dec</u>	monthly	42.00
e.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Sivers Flagstaff</u> <u>5060 W 89 Flagstaff AZ 86004</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>shirts for print</u>	8-10	159.29
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)		1156.12

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

OTHER LOANS

SCHEDULE C1

1. Committee Name _____

2. ID #

3. Report covering period from _____ thru _____

4	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	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]			

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]		

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]		

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]		

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 <i>[If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A]</i>		
*	Includes return of contributions made by reporting committee		

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]		

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# <i>Eva Putzosa 700 N. Laguna Way 86001</i></td> <td style="width: 20%;">CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/></td> </tr> <tr> <td colspan="2">DESCRIPTION <i>web page</i></td> </tr> <tr> <td>OCCUPATION <i>Policy Analyst</i></td> <td>EMPLOYER <i>N.A.U</i></td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID# <i>Eva Putzosa 700 N. Laguna Way 86001</i>	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION <i>web page</i>		OCCUPATION <i>Policy Analyst</i>	EMPLOYER <i>N.A.U</i>	<i>October 2009</i>	<i>\$ 300</i>
NAME, ADDRESS, CITY, STATE, ZIP AND ID# <i>Eva Putzosa 700 N. Laguna Way 86001</i>	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
DESCRIPTION <i>web page</i>									
OCCUPATION <i>Policy Analyst</i>	EMPLOYER <i>N.A.U</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 style="width: 20%;">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 style="width: 20%;">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 style="width: 20%;">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]								

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]			

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]*

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		

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 _____

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#				
	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]				