

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

FOR OFFICE USE ONLY



1. Haughhey 4 Mayor
Full Name of Committee

100 E Astro
Address

Flagstaff Az 86001 Cocconino
City ZIP Code County Phone

2. _____
Sponsoring Organization or Candidate and office

Name of Candidate and Office Sought (if applicable)

E-Mail Address Fax #

3A. ID#
0545000000

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

January 31 Report - For Period of July 22, 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)		0
5b Cash on Hand at the Beginning of this Reporting Period		0
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	4025 ²⁰	4025 ²⁰
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	4025 ²⁰	4025 ²⁰
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	3373 ⁹⁹	3373 ⁹⁹
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	651 ²¹	651 ²¹

*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: Haghey 4 Mayor
 3. Report covering period from 7/22/09 Thru 12/31/09

2. ID#
55459982

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)	3066 ⁰⁰	3066 ⁰⁰
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	75 ²²	75 ²²
(c) Political Committees (Total from Schedule B)	0	0
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	3141 ²²	3141 ²²
(e) Refund of contributions (Total from Schedule F-2)	0	0
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	3141 ²²	3141 ²²
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	883 ⁹⁸	883 ⁹⁸
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total Loans [add 5(a) and 5(b)]	883 ⁹⁸	883 ⁹⁸
6. In-kind contributions (Total from Schedule E)	0	0
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	0
8. Total Receipts [add 4(f), 5(c), 6, and 7]	4025 ²⁰	4025 ²⁰
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2)	0	0
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	3373 ⁹⁹	3373 ⁹⁹
10. Independent Expenditures (Total from Schedule D-1)	0	0
11. Value of In-kind expenditures (Total from Schedule E)	0	0
12. Loans made by reporting committee (Total from Schedule D-2)	0	0
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	0
(b) Repayment of all other loans (Total from Schedule D-5)	0	0
(c) Total Loan Repayments [add 13(a) and 13(b)]	0	0
14. Transfers to other political committees (Total from Schedule D-6)	0	0
15. Any other disbursement (Total from Schedule D-7)	0	0
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	0	0
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	0
18. Total disbursements [subtract line 17 from line 16]	3373 ⁹⁹	3373 ⁹⁹
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0	0

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Blake A Rolley

Type or Print Name of Treasurer

Blake A Rolley

Signature of Treasurer or Candidate or Designating Individual

1/29/10

Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1 Committee Name HAUGHEY 4 MAYOR
 3 Report covering period from 7/22/09 thru DEC. 31, 2009

2 ID# 55-57111

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			
	LAST FIRST MI <u>SCHATI CAROL</u> STREET ADDRESS <u>30600 N. PIMA RD UNIT 14</u> CITY STATE ZIP <u>SCOTTSDALE, AZ 85266</u> OCCUPATION EMPLOYER <u>RETIRED</u>	<u>9/14/09</u>	<u>100⁰⁰</u>	<u>100⁰⁰</u>
	LAST FIRST MI <u>RADOSEVICH LINDA</u> STREET ADDRESS <u>17 W. PINE AVE.</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86001</u> OCCUPATION EMPLOYER <u>DATA COLLECTOR CBSN</u>	<u>9/9/09</u>	<u>50⁰⁰</u>	<u>50⁰⁰</u>
	 LAST FIRST MI MUNGER EUGENE STREET ADDRESS 4674 E INWOOD WAY CITY STATE ZIP FLAGSTAFF, AZ 86004 OCCUPATION EMPLOYER RETIRED 	<u>9/28/09</u>	<u>100⁰⁰</u>	<u>100⁰⁰</u>
	 LAST FIRST MI MONIHAN DAVID JR. STREET ADDRESS 1625 N. KUTCH DR. CITY STATE ZIP FLAGSTAFF, AZ 86001 OCCUPATION EMPLOYER ENGINEER STEPHEN WESNTZER 	<u>8/28/09</u>	<u>25⁰⁰</u>	<u>25⁰⁰</u>
	LAST FIRST MI <u>CARO MARK</u> STREET ADDRESS <u>6955 E. OLD WALNUT CYN</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86001</u> OCCUPATION EMPLOYER <u>BUSINESS OWNER NACPMET</u>		<u>410⁰⁰</u>	<u>410⁰⁰</u>
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 HAUGHEY 4 MAYOR
 3 Report covering period from 7/22/09 thru DEC. 31, 2009

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 LEMBKE DAVID STREET ADDRESS 1409 W. LOUISE WAY. CITY STATE ZIP FLAGSTAFF, AZ 86001 OCCUPATION EMPLOYER REMOTOR CB NAARCS	8/27/09	50.00	50.00
b	LAST FIRST MI EVANS MATT STREET ADDRESS 2138 S. TOMBAUGH WAY CITY STATE ZIP FLAGSTAFF, AZ 86001 OCCUPATION EMPLOYER BANKER BNARIZONA		100.00	100.00
c	LAST FIRST MI WILSON ROB STREET ADDRESS P.O. Box 1811 CITY STATE ZIP FLAGSTAFF, AZ 86002 OCCUPATION EMPLOYER BUS OWNER SELF	9/10/09	100.00	100.00
d	LAST FIRST MI HENDERSON DICK STREET ADDRESS P.O. Box 30155 CITY STATE ZIP FLAGSTAFF, AZ 86003 OCCUPATION EMPLOYER BUS. OWNER SELF	8/22/09	100.00	100.00
e	LAST FIRST MI SHAFER ROBERT STREET ADDRESS 2121 N. CRESENT CITY STATE ZIP FLAGSTAFF, AZ 86001 OCCUPATION EMPLOYER BUS. OWNER ASPEN STORAGE	8/22/09	410.00	410.00
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 HAUGHTON 4 MAYOR

2 ID#

55458123

3 Report covering period from 7/22/09 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	LAST FIRST MI <u>TANTJATYANON, PREEDA</u> STREET ADDRESS <u>5655 E. FOREST DR</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86004</u> OCCUPATION EMPLOYER <u>BUS OWNER HORIZON INTL</u>	<u>9/1/09</u>	<u>410⁰⁰</u>	<u>410⁰⁰</u>
b	LAST FIRST MI <u>MUNGEN GENE</u> STREET ADDRESS <u>4674 E. INWOOD WAY</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86001</u> OCCUPATION EMPLOYER <u>RETIRED -</u>	<u>9/28/09</u>	<u>100⁰⁰</u>	<u>100⁰⁰</u>
c	LAST FIRST MI <u>ALLEN STEVE</u> STREET ADDRESS <u>27 E. JUNIPER AVE</u> CITY STATE ZIP <u>FLAGSTAFF AZ 86001</u> OCCUPATION EMPLOYER <u>SELF EMPLOYED.</u>	<u>10/5/09</u>	<u>300⁰⁰</u>	<u>300⁰⁰</u>
d	LAST FIRST MI <u>ABESHAUS MERRILL</u> STREET ADDRESS <u>1801 HEREFORD DR</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86001</u> OCCUPATION EMPLOYER <u>RETIRED</u>	<u>10/8/09</u>	<u>36⁰⁰</u>	<u>36⁰⁰</u>
e	LAST FIRST MI <u>NUTCHINS MIKE</u> STREET ADDRESS <u>2509 E. MILLER DR</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86004</u> OCCUPATION EMPLOYER <u>MANAGER/OWNER MCPM</u>	<u>10/8/09</u>	<u>100⁰⁰</u>	<u>100⁰⁰</u>
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 S5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1 Committee Name HAUGHEY & MAYOR

2 ID#

3 Report covering period from 7/22/09 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	LAST FIRST MI <u>CARVALO JOHN</u> STREET ADDRESS <u>3220 W. SHANNON</u> CITY STATE ZIP <u>FLAGSTAFF AZ 86001</u> OCCUPATION EMPLOYER <u>BUS OWNER CROWN AR CAFE</u>	10/9/09	100.00	100.00
b	LAST FIRST MI <u>FOX ANOREN</u> STREET ADDRESS <u>5136 E. BLUEJAY LN</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86004</u> OCCUPATION EMPLOYER <u>TITLE & ESCROW PIONEER TITLE</u>	10/16/09	50.00	50.00
c	LAST FIRST MI <u>DURAZO FELIX</u> STREET ADDRESS <u>3505 N. EIGEN MTN RD</u> CITY STATE ZIP <u>FLAGSTAFF AZ 86004</u> OCCUPATION EMPLOYER <u>BANKER NB, AZ</u>	10/29/09	100.00	100.00
d	LAST FIRST MI <u>RULON, PHILLIP</u> STREET ADDRESS <u>800 N. SKYVIEW ST.</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86004</u> OCCUPATION EMPLOYER <u>SELF-EMPLOYED</u>	10/30/09	100.00	100.00
e	LAST FIRST MI <u>WILDMURTH KURT</u> STREET ADDRESS <u>2209 N. TWISTED LIMB WAY</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86004</u> OCCUPATION EMPLOYER <u>REALTOR INACTIVE</u>	11/5/09	50.00	50.00
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 HANSEN Y MAYOR

2. ID# 

3. Report covering period from 7/22/09 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	LAST FIRST MI <u>BEAMBL, BILL FAY</u> STREET ADDRESS <u>700 N. BERTRAND</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86001</u> OCCUPATION EMPLOYER <u>RETIRED - -</u>	<u>11/6/09</u>	<u>50⁰⁰</u>	<u>50⁰⁰</u>
b	LAST FIRST MI <u>WAINWRIGHT PETER</u> STREET ADDRESS <u>4849 E. HIGHTIMBER LN</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86004</u> OCCUPATION EMPLOYER <u>RETIRED</u>	<u>11/7/09</u>	<u>50⁰⁰</u>	<u>50⁰⁰</u>
c	LAST FIRST MI <u>BRITT THOMAS</u> STREET ADDRESS <u>2126 N. TALKINGTON DR.</u> CITY STATE ZIP <u>FLAGSTAFF, AZ 86001</u> OCCUPATION EMPLOYER <u>RETIRED</u>	<u>11/19/09</u>	<u>25⁰⁰</u>	<u>25⁰⁰</u>
d	LAST FIRST MI <u>WILSON ROB</u> STREET ADDRESS <u>11920 CLODIA</u> CITY STATE ZIP <u>FLAGSTAFF AZ 86004</u> OCCUPATION EMPLOYER <u>BUS OWNER SELF</u>	<u>11/20/09</u>	<u>50⁰⁰</u>	<u>150⁰⁰</u>
e	LAST FIRST MI <u>PISARO GARY</u> STREET ADDRESS <u>2500 N. CAREFREE CIR.</u> CITY STATE ZIP <u>FLAGSTAFF AZ 86004</u> OCCUPATION EMPLOYER <u>RETIRED</u>	<u>11/23/09</u>	<u>50⁰⁰</u>	<u>50⁰⁰</u>
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 S5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name HAUGHEY 4 MAYOR

2. ID # 

3. Report covering period from 7/22/09 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	LAST FIRST MI <u>GALIGHTLY SUSAN</u> STREET ADDRESS <u>3900 E HUNTINGTON DR</u> CITY STATE ZIP <u>FLAGSTAFF AZ 86004</u> OCCUPATION EMPLOYER <u>BUS OWNER</u>	11/24	50 ⁰⁰	50 ⁰⁰
b	LAST FIRST MI <u>RICHARDS JOE</u> STREET ADDRESS <u>7000 OLD WALNUT CANYON</u> CITY STATE ZIP <u>FLAGSTAFF AZ 86004</u> OCCUPATION EMPLOYER <u>RETIRED</u>	12/11	50 ⁰⁰	50 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]		3,066 ⁰⁰	

*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 S5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

1 Committee Name HAUGHEY 4 MAYOR

2 ID# 

3 Report covering period from 7/22/09 thru DEC. 31, 2009

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
FRAN JACKSON - CASH	25.00		
DAVID MONIHAN JR.	25.00		
THOMAS BRITT	25.00		
JEFF ORUITS	.22		
5 TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	75. 00 ²²	6 CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	75. 00 ²²

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

CANDIDATE LOANS

SCHEDULE C

1	Committee Name <u>HAUGHNEY 4 MAYOR</u>	2 ID# <u>[REDACTED]</u>		
3	Report covering period from <u>7/22/09</u> thru <u>Dec. 31, 2009</u>			
4	LOANS MADE OR GUARANTEED BY CANDIDATE			
	NAME AND ADDRESS FROM WHOM RECEIVED			
4a	NAME, ADDRESS, CITY, STATE, AND ZIP <u>JOE HAUGHNEY</u> <u>100 E. ASTRO LN, FLAGSTAFF, AZ</u>	DATE RECEIVED <u>7/22/09</u> <u>7/23/09</u>	AMOUNT RECEIVED <u>500.00</u> <u>102.96</u>	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <u>500.00</u> <u>602.96</u>
	DESCRIPTION <u>WEB DOMAIN NAMES/SETUP</u> <u>SEED MONEY FOR CAMPAIGN</u>			
b	NAME, ADDRESS, CITY, STATE, AND ZIP <u>JOE HAUGHNEY</u> <u>100 E. ASTRO LN FLG 86001</u>	DATE RECEIVED <u>9/10/09</u>	AMOUNT RECEIVED <u>12.82</u>	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <u>615.78</u>
	DESCRIPTION <u>DRINKS/FOOD/VOLUNTEERS</u>			
c	NAME, ADDRESS, CITY, STATE, AND ZIP <u>JOE HAUGHNEY</u> <u>100 E. ASTRO LN FLG 86001</u>	DATE RECEIVED <u>9/10/09</u>	AMOUNT RECEIVED <u>119.50</u>	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <u>735.28</u>
	DESCRIPTION <u>Network Solutions - WEB SITE</u>			
d	NAME, ADDRESS, CITY, STATE, AND ZIP <u>JOE HAUGHNEY</u> <u>100 E. ASTRO LN FLG 86001</u>	DATE RECEIVED <u>10/8/09</u>	AMOUNT RECEIVED <u>14.26</u>	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <u>749.54</u>
	DESCRIPTION <u>CLIPBOARDS (OFFICE MAX)</u>			
e	NAME, ADDRESS, CITY, STATE, AND ZIP <u>JOE HAUGHNEY</u> <u>100 E. ASTRO LN FLG 86001</u>	DATE RECEIVED <u>10/11/09</u>	AMOUNT RECEIVED <u>9.49</u>	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <u>759.03</u>
	DESCRIPTION <u>CLIPBOARDS</u>			
f	NAME, ADDRESS, CITY, STATE, AND ZIP <u>JOE HAUGHNEY</u> <u>100 E. ASTRO LN. FLG 86001</u>	DATE RECEIVED <u>7/22/09</u>	AMOUNT RECEIVED <u>98.00</u>	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <u>857.03</u>
	DESCRIPTION <u>P.O. BOX RENTAL 1YR.</u>			
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)			

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CANDIDATE LOANS

SCHEDULE C

1.	Committee Name <u>HAUGHTEN & MAYOR</u>	2. ID# <u>[REDACTED]</u>
3.	Report covering period from <u>7-22-09</u> thru <u>DEC 31, 2009</u>	
4.	LOANS MADE OR GUARANTEED BY CANDIDATE	
	NAME AND ADDRESS FROM WHOM RECEIVED	
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP <u>BOB HAUGHTEN</u> <u>100 E. ASTRO LN FIG 86001</u>	DATE RECEIVED <u>12/30/09</u>
	DESCRIPTION <u>ROUND BUTTONS/ ZAZZLE</u>	AMOUNT RECEIVED <u>26.95</u>
		CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <u>883.98</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>883.98</u>

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1 Committee Name HAUGHNEY & MAYOR

2 ID #

3 Report covering period from 7/22/09 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>STAPLES</u> <u>2625 N. WOODLANDS BLVD, FLG 86001</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Office supplies.</u>	<u>7/28/09</u>	<u>114.97</u>
b	NAME, ADDRESS, CITY, STATE AND ZIP <u>CITY OF FLAGSTAFF,</u> <u>211 W. ASPEN, FLAGSTAFF, AZ 86001</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>FINANCIAL REPORTS.</u>	<u>8/24/09</u>	<u>48.50</u>
c	NAME, ADDRESS, CITY, STATE AND ZIP <u>FLAG STAMP + ENGRAVING</u> <u>4th ST + 7th AVE, FLAGSTAFF, AZ 86004</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>RUBBER STAMP</u>	<u>7/30/09</u>	<u>17.36</u>
d	NAME, ADDRESS, CITY, STATE AND ZIP <u>STAPLES</u> <u>2625 N. WOODLANDS BLVD, FLG 86001</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>CLIPBOARDS / PETITION Supplies</u>	<u>10/1/09</u>	<u>58.73</u>
e	NAME, ADDRESS, CITY, STATE AND ZIP <u>P.S. PRINTING</u> <u>P.O. Box 202, FLAGSTAFF, AZ 86002</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>RACK CARD SET UP / FIRST PRINTING</u>	<u>10/2/09</u>	<u>49.41</u>
f	NAME, ADDRESS, CITY, STATE AND ZIP <u>P.S. PRINTING</u> <u>P.O. Box 202 FLAGSTAFF, AZ 86002</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>RACK CARDS, 10K</u>	<u>10/13/09</u>	<u>786.22</u>
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1 Committee Name HAUGHTON 4 MAYOR

2 ID# 

3 Report covering period from _____ thru DEC 31, 2009

4	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a	NAME, ADDRESS, CITY, STATE AND ZIP Clarke American DESCRIPTION OF ITEMS OR SERVICES PURCHASED Checks Purchased	7/29/09	27. ²⁷
b	NAME, ADDRESS, CITY, STATE AND ZIP Clarke American DESCRIPTION OF ITEMS OR SERVICES PURCHASED check supplies	8/5/09	50 ⁰⁰
c	NAME, ADDRESS, CITY, STATE AND ZIP Mogallon Engineering DESCRIPTION OF ITEMS OR SERVICES PURCHASED Maps	9/18/09	16 ²⁷
d	NAME, ADDRESS, CITY, STATE AND ZIP Flagstaff Tees DESCRIPTION OF ITEMS OR SERVICES PURCHASED	10/23/09	315 ⁵⁸
e	NAME, ADDRESS, CITY, STATE AND ZIP Colby Poster DESCRIPTION OF ITEMS OR SERVICES PURCHASED Yard Signs Deposit	11/4/09	250 ⁰⁰
f	NAME, ADDRESS, CITY, STATE AND ZIP Colby Poster DESCRIPTION OF ITEMS, OR SERVICES PURCHASED Yard Signs	11/19/09	928 ⁰⁰
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1 Committee Name HAUGHTY & MAYOR

2 ID# 

3 Report covering period from _____ 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		
	Staples	11/25/09	161 ⁵⁰
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
	Envelopes & Cards		
b	NAME, ADDRESS, CITY, STATE AND ZIP		
	Chamber of Commerce	12/14/09	150 ⁰⁰
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
	Mailer - Insert		
c	NAME, ADDRESS, CITY, STATE AND ZIP		
	PS Printing	12/22/09	400 ¹⁸
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
	Bumper Stickers		
d	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		3393.99

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

POLITICAL COMMITTEE
CITY/TOWN OF _____
CAMPAIGN FINANCE REPORT
2008 March/May Regular Election

FOR OFFICE USE ONLY



1. The Committee To Elect Coral J. Evans
Full Name of Committee
2210 N. Izabel St.
Address
Flagstaff, AZ 86004
City ZIP Code County Phone

2. Coral J. Evans City Council
Sponsoring Organization or Candidate and office
Coral J. Evans
Name of Candidate and Office Sought (if applicable)
coral4council@aol.com
E-Mail Address Fax #

3A. ID#
PC 2007-06

4. **REPORTING PERIOD** (Please check appropriate box) **DUE BETWEEN**
- January 31 Report - For Period of _____ * thru December 31, 2007 January 1, 2008 and January 31, 2008
 - Pre-Primary Election Report - For Period of January 1, 2008 thru February 20, 2008 February 21, 2008 and February 28, 2008
 - Post-Primary Election Report - For Period of February 21, 2008 thru March 31, 2008 April 1, 2008 and April 10, 2008
 - Pre-General Election Report - For Period of April 1, 2008 thru April 30, 2008 May 1, 2008 and May 8, 2008
 - Post-General Election Report - For Period of May 1, 2008 thru June 9, 2008 June 10, 2008 and June 19, 2008
 - **January 31 Report - For Period of June 10, 2008 thru December 31, 2009 January 1, 2010 and January 31, 2010

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)		7098.18
5b Cash on Hand at the Beginning of this Reporting Period	462.22	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	—	6,065.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	462.22	13,163.18
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)	285.05	1,081.28
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	177.17	

8

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

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name The Comm. To Elect Carol J. Evans

2. ID #

PC 2007-06

3. Report covering period from 10-10-2008 thru 12-31-2009

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" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			5,6700.00
LAST	FIRST	MI													
STREET ADDRESS															
CITY	STATE	ZIP													
OCCUPATION	EMPLOYER														
b.	<table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
LAST	FIRST	MI													
STREET ADDRESS															
CITY	STATE	ZIP													
OCCUPATION	EMPLOYER														
c.	<table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
LAST	FIRST	MI													
STREET ADDRESS															
CITY	STATE	ZIP													
OCCUPATION	EMPLOYER														
d.	<table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
LAST	FIRST	MI													
STREET ADDRESS															
CITY	STATE	ZIP													
OCCUPATION	EMPLOYER														
e.	<table border="1" style="width:100%"> <tr> <td style="width:33%">LAST</td> <td style="width:33%">FIRST</td> <td style="width:33%">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
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]			5,6700.00											

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

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

1. Committee Name The Comm. To Elect Coral J. Evans

2. ID #

PC 2007-06

3. Report covering period from 10-10-2008

thru 12-31-2009

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
	—	5.00	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]		6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	5.00

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

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name The Comm. To Elect Coral J. Evans

2. ID #
PC-2007-06

3. Report covering period from 6-10-2008 thru 12-31-2009

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	—	390,00
	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>		—	390,00

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name <u>The Comm. To Elect Coral J. Evans</u>	2. ID # <u>PC-2007-06</u>		
3.	Report covering period from <u>6-10-2008</u> thru <u>12-31-2009</u>			
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			
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]			<u>00.00</u>

OTHER LOANS

SCHEDULE C1

1. Committee Name The Comm. To Elect Coral J. Evans
 3. Report covering period from 6-10-2008 thru 12-31-2009

2. ID# PC-2007-06

4 ALL OTHER LOANS				
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			.00
	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]		60.00	.00

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Committee to Elect Coral J. Evans

2. ID # PC 2007-06

3. Report covering period from 05-01-2008

thru 06-30-2009

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>LNR* Luner pages webhost</u> <u>Debit</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>comm to elect Coral J. Evans web page</u>	<u>9-30-08</u>	<u>29.85</u>
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Lunerpages webhost</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>web page</u>	<u>12-31-08</u>	<u>29.85</u>
c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Luner pages web host</u> <u>Debit</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>web page</u>	<u>3-31-09</u>	<u>39.80</u>
d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>First state Bank</u> <u>P.O. Box 3780</u> <u>Flagstaff, AZ. 86003</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service chg.</u>	<u>4-30-09</u>	<u>11.00</u>
e.	NAME, ADDRESS, CITY, STATE AND ZIP <u>First state Bank</u> <u>P.O. Box 3780</u> <u>Flagstaff, AZ 86003</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED	<u>5-31-09</u>	<u>10.00</u>
f.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Lunerpages webhost</u> <u>Debit</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>web page</u>	<u>6-30-09</u>	<u>32.85</u>
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID #

1. Committee Name _____

3. Report covering period from _____ thru _____

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 First state Bank P.O. Box 3780 Flagstaff, AZ 86003 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Service Chg.	6-30-09	10.00
b.	NAME, ADDRESS, CITY, STATE AND ZIP First State Bank P.O. Box 3780 Flagstaff AZ 86003 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Service Chg.	7-31-09	10.00
c.	NAME, ADDRESS, CITY, STATE AND ZIP Lunerpage web Host Debit DESCRIPTION OF ITEMS OR SERVICES PURCHASED web page	8-31-09	32.85
d.	NAME, ADDRESS, CITY, STATE AND ZIP First state Bank P.O. Box 3780 Flagstaff, AZ 86003 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Service Chg.	8-31-09	10.00
e.	NAME, ADDRESS, CITY, STATE AND ZIP First State Bank P.O. Box 3780 Flagstaff, AZ 86003 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	9-30-09	10.00
f.	NAME, ADDRESS, CITY, STATE AND ZIP First State Bank P.O. Box 3780 Flagstaff, AZ 86003 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Service Chg.	10-31-09	10.00
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A)		

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID #

1. Committee Name _____

3. Report covering period from _____ thru _____

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 Lunerpages webhost dbit DESCRIPTION OF ITEMS OR SERVICES PURCHASED web page	11-30-09	32.25
b.	NAME, ADDRESS, CITY, STATE AND ZIP First state Bank P.O. Box 3780 Flagstaff, AZ 86003 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	11-30-09	8.00
c.	NAME, ADDRESS, CITY, STATE AND ZIP First state Bank P.O. Box 3780 Flagstaff, AZ 86003 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Service chg.	12-31-08	8.00
d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		2.85.05

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name The Comm To Elect Coral J. Evans

2. ID # PC-2007-06

3. Report covering period from 06-10-2008 thru 12-31-2009

4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]		_____

*SEE A.R.S. § 16-901(14).

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

6

Signature of Treasurer _____

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT
7	

Schedule D-1 Page ___ of ___

Schedules D1 to F3 NOT Applicable @ this time

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]		

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		_____
	DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 (If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A)		_____
*	Includes return of contributions made by reporting committee		

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]		_____

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]		_____

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]

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]		_____

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%; padding: 5px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 5px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 5px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 5px;">OCCUPATION</td> <td style="padding: 5px;">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								
4b.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; padding: 5px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 5px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 5px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 5px;">OCCUPATION</td> <td style="padding: 5px;">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								
4c.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; padding: 5px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 5px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 5px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 5px;">OCCUPATION</td> <td style="padding: 5px;">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								
4d.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; padding: 5px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 5px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 5px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 5px;">OCCUPATION</td> <td style="padding: 5px;">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 CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]		_____						

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID #

1. Committee Name _____

3. Report covering period from _____ thru _____

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]				