



**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Art Babbott for City Council  
 3. Report covering period from 1/1/2010 Thru 2/17/2010

2. ID#
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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)	880	5320
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	55	55
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	935	5375
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		500
(c) Total Loans [add 5(a) and 5(b)]		
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]	935	6175
<b>QUALIFYING CONTRIBUTION RECEIPTS</b>		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).		
<b>DISBURSEMENTS</b>		
9. Expenditures for operating expenses (Total from Schedule D)	944.46	2100.58
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)		2100.58
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]		
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]		
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		

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

2/18/10  
 Date

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

**SCHEDULE A**

2. ID #

1. Committee Name Art Bobbott for City Council

3. Report covering period from 1/1/2010 thru 2/17/10

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																							
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																											
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\*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.

\$ 290

**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.	LAST FIRST MI Jobm Suzanne STREET ADDRESS 121 E Terrace CITY STATE ZIP Flagstaff AZ 86001 OCCUPATION EMPLOYER Retired	1/28/10	\$50.00	
b.	LAST FIRST MI Nemeth Lynne + STREET ADDRESS 8783 E Neptune Dr CITY STATE ZIP Flagstaff AZ 86004 OCCUPATION EMPLOYER President Nemeth Morrison Corp	1/28/10	200.00	
c.	LAST FIRST MI Saul Karen Andrew D STREET ADDRESS 421 W Beal St CITY STATE ZIP Flagstaff AZ 86001 OCCUPATION EMPLOYER MD North Country Com. Health	1/24/10	\$100.00	
d.	LAST FIRST MI Grueva Andrew STREET ADDRESS 3010 N Joy Lane CITY STATE ZIP Flagstaff AZ 86001 OCCUPATION EMPLOYER Manager/owner San Felipe Center	1/31/10	20.00	
e.	LAST FIRST MI Kozak Kathryn STREET ADDRESS 2220 N Talkington CITY STATE ZIP Flagstaff AZ 86001 OCCUPATION EMPLOYER Instructor Soc. Comm College	1/31/10	20	
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.

A 390

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

**SCHEDULE A**

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from 1/1/10 thru 2/17/10

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200

**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.	LAST <span style="margin-left: 150px;">FIRST</span> <span style="margin-left: 150px;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 150px;">STATE</span> <span style="margin-left: 150px;">ZIP</span>			
	OCCUPATION	EMPLOYER		
b.	LAST <span style="margin-left: 150px;">FIRST</span> <span style="margin-left: 150px;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 150px;">STATE</span> <span style="margin-left: 150px;">ZIP</span>			
	OCCUPATION	EMPLOYER		
c.	LAST <span style="margin-left: 150px;">FIRST</span> <span style="margin-left: 150px;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 150px;">STATE</span> <span style="margin-left: 150px;">ZIP</span>			
	OCCUPATION	EMPLOYER		
d.	LAST <span style="margin-left: 150px;">FIRST</span> <span style="margin-left: 150px;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 150px;">STATE</span> <span style="margin-left: 150px;">ZIP</span>			
	OCCUPATION	EMPLOYER		
e.	LAST <span style="margin-left: 150px;">FIRST</span> <span style="margin-left: 150px;">MI</span>			
	STREET ADDRESS			
	CITY <span style="margin-left: 150px;">STATE</span> <span style="margin-left: 150px;">ZIP</span>			
	OCCUPATION	EMPLOYER		
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**CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL\***

**SCHEDULE A-1**

1. Committee Name ART BABBOTA

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

3. Report covering period from 1/1/10 thru 2/17/10

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
<p>under \$25 campaign donation</p> <p>20 - 2/5/10</p> <p>10    2/5/10</p> <p>25    2/5/10</p>	<p>\$55</p>		
<p>5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]</p> <p style="text-align: center;">\$ 55</p>		<p>6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]</p>	<p>55</p>

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

**SCHEDULE A**

2. ID #

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

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

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**EXPENDITURES FOR OPERATING EXPENSES\***

**SCHEDULE D**

2. ID #

1. Committee Name Art Babbott for City Council

3. Report covering period from 1/1/2010 thru 2/17/2010

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 Print Raven 1300 S Milton #125 Flagstaff, AZ 86001 30 signs for campaign DESCRIPTION OF ITEMS OR SERVICES PURCHASED	1/15/10	418.71
b.	NAME, ADDRESS, CITY, STATE AND ZIP The Inn @ 410 410 Leroux Flagstaff AZ 86001 FUNDRAISING PARTY DESCRIPTION OF ITEMS OR SERVICES PURCHASED	1/20/10	183.75
c.	NAME, ADDRESS, CITY, STATE AND ZIP Premium Graphics 5512 Northside Dale Houston TX 77032 100 Campaign signs DESCRIPTION OF ITEMS OR SERVICES PURCHASED	2/3/10	295.00
d.	NAME, ADDRESS, CITY, STATE AND ZIP Flagstaff Shelter Services P.O. Box 1806 Flagstaff, AZ 86002 Fundraiser DESCRIPTION OF ITEMS OR SERVICES PURCHASED	2/3/10	44.00
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)		944.46

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