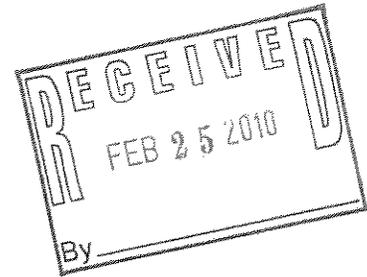


POLITICAL COMMITTEE
CITY/TOWN OF Flagstaff
CAMPAIGN FINANCE REPORT
2010 March/May Regular Election

FOR OFFICE USE ONLY



1. Kara Kelty For Flagstaff
Full Name of Committee
1175 N Hemlock Way
Address
Flagstaff, 86001 Coconino
City ZIP Code County Phone

2. Kara Kelty/ Mayor
Sponsoring Organization or Candidate and office
Kara Kelty/ Mayor
Name of Candidate and Office Sought (if applicable)
kara.kelty@keltyformayor.com
E-Mail Address Fax #

3A. ID#

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

January 31 Report - For Period of _____ * 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)	\$5,498.10	\$0
5b Cash on Hand at the Beginning of this Reporting Period	\$4,074	\$10,364
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$9,572.10	\$10,364
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	\$5,931.01	\$6,722.91
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]	\$3,641.09	\$3,641.09
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)		
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]		

*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: Kara Kelly For Flagstaff
 3. Report covering period from 1/1/2010 Thru 2/17/2010

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)	\$3,440	\$9,025
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	\$169	\$499
(c) Political Committees (Total from Schedule B)	\$0	\$0
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	\$3,609	\$9,524
(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)]	\$3,609	\$9,524
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	\$0	\$0
(b) All other loans (Total from Schedule C-1)	\$0	\$0
(c) Total Loans [add 5(a) and 5(b)]	\$0	\$0
6. In-kind contributions (Total from Schedule E)	\$465	\$840
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]	\$4,074	\$10,364
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).	n/a	n/a
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	\$5,466.01	\$5,882.91
10. Independent Expenditures (Total from Schedule D-1)	\$0	\$0
11. Value of In-kind expenditures (Total from Schedule E)	\$465	\$840
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]	\$5,931.01	\$6,722.91
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]	\$5,931.01	\$6,722.91
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.

Eva Putzová

Type or Print Name of Treasurer

Eva Putzová 2/25/2010

Signature of Treasurer or Candidate or Designating Individual Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Kara Kelty For Flagstaff

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

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 colspan="3">Walka Sherry</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">975 N. Manzanita Way</td> </tr> <tr> <td colspan="2">CITY</td> <td>STATE</td> </tr> <tr> <td colspan="2">Flagstaff, AZ</td> <td>86001</td> </tr> <tr> <td colspan="2">OCCUPATION</td> <td>EMPLOYER</td> </tr> <tr> <td colspan="2">Nurse</td> <td>FMC</td> </tr> </table>	LAST	FIRST	MI	Walka Sherry			STREET ADDRESS			975 N. Manzanita Way			CITY		STATE	Flagstaff, AZ		86001	OCCUPATION		EMPLOYER	Nurse		FMC	1/4/2010	\$50	\$50
LAST	FIRST	MI																										
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b	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Fulé Marietta</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1517 N. Navajo Dr.</td> </tr> <tr> <td colspan="2">CITY</td> <td>STATE</td> </tr> <tr> <td colspan="2">Flagstaff, AZ</td> <td>86001</td> </tr> <tr> <td colspan="2">OCCUPATION</td> <td>EMPLOYER</td> </tr> <tr> <td colspan="2">Homemaker</td> <td>N/A</td> </tr> </table>	LAST	FIRST	MI	Fulé Marietta			STREET ADDRESS			1517 N. Navajo Dr.			CITY		STATE	Flagstaff, AZ		86001	OCCUPATION		EMPLOYER	Homemaker		N/A	1/4/2010	\$50	\$50
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
Smith Zachary																												
STREET ADDRESS																												
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CITY		STATE																										
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LAST	FIRST	MI																										
Howard Eric																												
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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 Kara Kelty For Flagstaff

2. ID #

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

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR				
4a	LAST Pugliesi Karen	FIRST MI	2/12/2010	\$300	\$300
	STREET ADDRESS 119 W. Pine Ave				
	CITY Flagstaff, AZ 86001				
	OCCUPATION Administrator/Professor	EMPLOYER NAU			
b	LAST Saal Andrew	FIRST MI	1/24/2010	\$50	\$50
	STREET ADDRESS 621 West Beal St				
	CITY Flagstaff, AZ 86001				
	OCCUPATION Family Doctor	EMPLOYER North Country Community Health			
c	LAST Weller Collin	FIRST MI	1/28/2010	\$50	\$50
	STREET ADDRESS 629 Darren Way				
	CITY Grand Junction, CO 81504				
	OCCUPATION Student	EMPLOYER Student			
d	LAST Craven James	FIRST MI	1/30/2010	\$150	\$150
	STREET ADDRESS 521 N. Bertrand				
	CITY Flagstaff, AZ 86001				
	OCCUPATION Self-employed	EMPLOYER Self-employed			
e	LAST Barnell Todd	FIRST MI	1/31/2010	\$40	\$40
	STREET ADDRESS 1420 North Beaver				
	CITY Flagstaff, AZ 86001				
	OCCUPATION Program Coordinator	EMPLOYER 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

2. ID #

1. Committee Name Kara Kelty For Flagstaff

3. Report covering period from 1/1/2010 thru 2/17/210

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR				
4a.	LAST Castleberry Debbie	FIRST MI	1/28/2010	\$200	\$300
	STREET ADDRESS 2233 N. Hemberg Dr				
	CITY Flagstaff, AZ 86004	STATE ZIP			
	OCCUPATION Photographer	EMPLOYER Self-employed			
b	LAST McKell David	FIRST MI	1/30/2010	\$50	\$150
	STREET ADDRESS 111 E. Oak Ave No. 4				
	CITY Flagstaff, AZ 86001	STATE ZIP			
	OCCUPATION Professor	EMPLOYER NAU			
c	LAST McKell Mary	FIRST MI	1/31/2010	\$50	\$100
	STREET ADDRESS 112 E. Oak Ave No. 4				
	CITY Flagstaff, AZ 86001	STATE ZIP			
	OCCUPATION Retired	EMPLOYER Retired			
d	LAST Koch George	FIRST MI	1/31/2010	\$50	\$50
	STREET ADDRESS 621 W. Aspen Ave				
	CITY Flagstaff, AZ 86001	STATE ZIP			
	OCCUPATION Professor	EMPLOYER NAU			
e	LAST Acker Thomas	FIRST MI	1/31/2010	\$50	\$50
	STREET ADDRESS 4195 N. St. Moritz Way				
	CITY Flagstaff, AZ 86004	STATE ZIP			
	OCCUPATION Professor	EMPLOYER 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)				

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CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Kara Kelty For Flagstaff

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

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE												
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LAST Kozak A.	FIRST	MI														
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CITY Flagstaff, AZ 86001		STATE ZIP														
OCCUPATION Professor	EMPLOYER CCC															
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LAST Drumright Steve	FIRST	MI														
STREET ADDRESS PO Box 1774																
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LAST Spotskey Abby	FIRST	MI														
STREET ADDRESS PO Box 30637																
CITY Flagstaff, AZ 86003		STATE ZIP														
OCCUPATION Business owner	EMPLOYER Image Trader															
d	<table border="0" style="width: 100%;"> <tr> <td style="width: 33%;">LAST Wheeler Jim</td> <td style="width: 33%;">FIRST</td> <td style="width: 33%;">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS 4955 S. Pyrite Rd.</td> </tr> <tr> <td colspan="2">CITY Flagstaff, AZ 86001</td> <td>STATE ZIP</td> </tr> <tr> <td>OCCUPATION Fire Marshall</td> <td colspan="2">EMPLOYER City of Flagstaff</td> </tr> </table>	LAST Wheeler Jim	FIRST	MI	STREET ADDRESS 4955 S. Pyrite Rd.			CITY Flagstaff, AZ 86001		STATE ZIP	OCCUPATION Fire Marshall	EMPLOYER City of Flagstaff		2/5/2010	\$50	\$50
LAST Wheeler Jim	FIRST	MI														
STREET ADDRESS 4955 S. Pyrite Rd.																
CITY Flagstaff, AZ 86001		STATE ZIP														
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LAST Mareck Katherine	FIRST	MI														
STREET ADDRESS 4509 N Mountain Meadow Dr.																
CITY Flagstaff, AZ 86004		STATE ZIP														
OCCUPATION Teacher	EMPLOYER Pine Forest Charter School															
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)															

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CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Kara Kelly For Flagstaff

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

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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STREET ADDRESS																												
1414 N. Rim Dr																												
CITY	STATE	ZIP																										
Flagstaff, AZ 86001																												
OCCUPATION	EMPLOYER																											
Business owner	Self-employed																											
e	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Huber Mary Ann</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">3243 W. Walter Way</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, AZ 85027</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>School Psych Assistant</td> <td colspan="2">Cave Creek Unified School Distr</td> </tr> </table>	LAST	FIRST	MI	Huber Mary Ann			STREET ADDRESS			3243 W. Walter Way			CITY	STATE	ZIP	Phoenix, AZ 85027			OCCUPATION	EMPLOYER		School Psych Assistant	Cave Creek Unified School Distr		2/7/2010	\$100	\$200
LAST	FIRST	MI																										
Huber Mary Ann																												
STREET ADDRESS																												
3243 W. Walter Way																												
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Phoenix, AZ 85027																												
OCCUPATION	EMPLOYER																											
School Psych Assistant	Cave Creek Unified School Distr																											
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A. <i>If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A.</i>																											

*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

2. ID #

1. Committee Name Kara Kelly For Flagstaff

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

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 colspan="3">Steger Mary Ann</td> </tr> <tr> <td colspan="3">STREET ADDRESS 111 E Oak Ave # 28</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Flagstaff, AZ 86001</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	Steger Mary Ann			STREET ADDRESS 111 E Oak Ave # 28			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION	EMPLOYER		Professor	NAU		2/11/2010	\$50	\$50
LAST	FIRST	MI																							
Steger Mary Ann																									
STREET ADDRESS 111 E Oak Ave # 28																									
CITY	STATE	ZIP																							
Flagstaff, AZ 86001																									
OCCUPATION	EMPLOYER																								
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b	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Lubin Barbara</td> </tr> <tr> <td colspan="3">STREET ADDRESS 7520 N. 9th Pl</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, AZ 85020</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Unemployed</td> <td colspan="2">Unemployed</td> </tr> </table>	LAST	FIRST	MI	Lubin Barbara			STREET ADDRESS 7520 N. 9th Pl			CITY	STATE	ZIP	Phoenix, AZ 85020			OCCUPATION	EMPLOYER		Unemployed	Unemployed		2/11/2010	\$100	\$100
LAST	FIRST	MI																							
Lubin Barbara																									
STREET ADDRESS 7520 N. 9th Pl																									
CITY	STATE	ZIP																							
Phoenix, AZ 85020																									
OCCUPATION	EMPLOYER																								
Unemployed	Unemployed																								
c	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Scarnati Blase</td> </tr> <tr> <td colspan="3">STREET ADDRESS 2267 N. Cypress Point Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Flagstaff, AZ 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	Scarnati Blase			STREET ADDRESS 2267 N. Cypress Point Dr			CITY	STATE	ZIP	Flagstaff, AZ 86004			OCCUPATION	EMPLOYER		Professor	NAU		2/12/2010	\$50	\$50
LAST	FIRST	MI																							
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d	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Coles Romand</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1805 N. Beaver St</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Flagstaff, AZ 86001</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	Coles Romand			STREET ADDRESS 1805 N. Beaver St			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION	EMPLOYER		Professor	NAU		2/12/2010	\$50	\$50
LAST	FIRST	MI																							
Coles Romand																									
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LAST	FIRST	MI																							
Riek Mary																									
STREET ADDRESS 307 S. Verde St																									
CITY	STATE	ZIP																							
Flagstaff, AZ 86001																									
OCCUPATION	EMPLOYER																								
Associate	W.L. Gore																								
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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

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Kara Kelty For Flagstaff

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

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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LAST	FIRST	MI																				
Perelstein Jenean																						
STREET ADDRESS 1401 North Aztec Street																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86001																						
OCCUPATION Executive Director	EMPLOYER Big Brothers-Big Sisters																					
b	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Kelty John</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1175 N. Hemlock Way</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Flagstaff, AZ 86001</td> </tr> <tr> <td>OCCUPATION Associate</td> <td colspan="2">EMPLOYER W.L. Gore</td> </tr> </table>	LAST	FIRST	MI	Kelty John			STREET ADDRESS 1175 N. Hemlock Way			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION Associate	EMPLOYER W.L. Gore		2/13/2010	\$200	\$200
LAST	FIRST	MI																				
Kelty John																						
STREET ADDRESS 1175 N. Hemlock Way																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86001																						
OCCUPATION Associate	EMPLOYER W.L. Gore																					
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LAST	FIRST	MI																				
Gorsegner Eric																						
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LAST	FIRST	MI																				
Widland Katharine																						
STREET ADDRESS 101 N. 7th St. #103																						
CITY	STATE	ZIP																				
Phoenix, AZ 85034																						
OCCUPATION Analyst	EMPLOYER SRP																					
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LAST	FIRST	MI																				
Friedmann Sarah																						
STREET ADDRESS 5205 E. Cortland Blvd. #171																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86004																						
OCCUPATION Instructional Specialist	EMPLOYER NAU																					
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CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Kara Kelly For Flagstaff

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

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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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
STREET ADDRESS																												
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LAST	FIRST	MI																										
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CITY	STATE	ZIP																										
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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]		\$3,440	\$3,790																								

*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 Kara Kelly For Flagstaff

2. ID #

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

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
Contributions of \$25 or less	\$169	\$449	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	\$169	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	\$449

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

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name Kara Kelty For Flagstaff

2. ID #

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

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>		\$0	\$0

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Kara Kelty For Flagstaff	2. ID #		
3.	Report covering period from <u>1/1/2010</u> thru <u>2/17/2010</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)		\$0	\$0

OTHER LOANS

SCHEDULE C1

1. Committee Name Kara Kelty For Flagstaff

2. ID #

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

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]	\$0	\$0	

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID #

1. Committee Name Kara Kelty For Flagstaff

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 Constant Contact 1601 Trapelo Road, Suite 329 Waltham, MA 2451 DESCRIPTION OF ITEMS OR SERVICES PURCHASED e-Newsletter	1/4/2010	\$15.84
b	NAME, ADDRESS, CITY, STATE AND ZIP Paypal 2211 North First Street San Jose, CA 95131 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Finance charges	1/12-2/17/10	\$39.36
c	NAME, ADDRESS, CITY, STATE AND ZIP Democratic Party 324 W Birch Ave Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Voter list subscription	2/8/2010	\$50
d	NAME, ADDRESS, CITY, STATE AND ZIP Ethos7 1145 Shullenbarger Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Website	1/22/2010	\$550
e	NAME, ADDRESS, CITY, STATE AND ZIP Graphics and Printing, LLC 638 W. Indian School Rd Phoenix, AZ 85013 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Doorhangers, yard signs, street signs	1/19/2010	\$1,748.37
f	NAME, ADDRESS, CITY, STATE AND ZIP Ni Marco's Pizza 1010 S. Beaver St Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Food for volunteers	1/19/2010	\$43.35
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 Kara Kelty For Flagstaff

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 Dr. Don's Buttons, Badges and Magnets 3906 W. Morrow Drive Glendale, AZ 85308 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Bumper stickers, lapel stickers	1/22/2010	\$324.79
b.	NAME, ADDRESS, CITY, STATE AND ZIP Five Star Printing 2708 N. Fourth St., Suite F3 &4 Flagstaff, AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Note cards	1/25/2010	\$282.76
c	NAME, ADDRESS, CITY, STATE AND ZIP Alejandro Chavez 328 N. 20th Avenue Phoenix, AZ 85009 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Campaign manager fee	1/19; 1/29/10	\$2,300
d	NAME, ADDRESS, CITY, STATE AND ZIP Staples 2625 South Woodlands Village Boulevard Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Office supplies	1/26/2010	\$37.78
e	NAME, ADDRESS, CITY, STATE AND ZIP USPS 104 North Agassiz St Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Postage	1/26/2010	\$23.76
f	NAME, ADDRESS, CITY, STATE AND ZIP Alejandro Chavez 328 N. 20th Avenue Phoenix, AZ 85009 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Campaign manager fee/gas expense	1/29/2010	\$50
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]		\$5,466.01

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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name Kara Kelty For Flagstaff

2. ID #

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

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 <i>(Transfer total to Detail Summary Page Line 12, Column A)</i>		\$0

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

1. Committee Name Kara Kelly For Flagstaff

2. ID #

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

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]

\$0

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Kara Kelty For Flagstaff

2. ID #

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

	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

Kara Kelty For Flagstaff

2. ID #

1. Committee Name _____

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

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# Kara Kelty For Flagstaff		
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]		\$0

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID #

1. Committee Name Kara Kelty For Flagstaff

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

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]	\$0	

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name Kara Kelly For Flagstaff

2. ID #

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

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]			\$0

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Kara Kelly For Flagstaff

2. ID #

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

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	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Ruben Gallego 101 N. 7th Street, Unit 103 Phoenix, AZ 85034	CONTRIBUTION ✕ EXPENDITURE ✕	2/11/2010	\$65
	DESCRIPTION Fundraising Party/Refreshments			
	OCCUPATION	EMPLOYER		
b	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Eva Putzová 700 N. Magma Way Flagstaff, AZ 86001	CONTRIBUTION ✕ EXPENDITURE ✕	2/12/2010	\$50
	DESCRIPTION Fundraising Party/Refreshments			
	OCCUPATION Planning and Policy Analyst	EMPLOYER NAU		
c	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Steve Scully 6 E Route 66 Flagstaff, AZ 86001	CONTRIBUTION ✕ EXPENDITURE ✕	1/31/2010	\$350
	DESCRIPTION Fundraising Party/Refreshments			
	OCCUPATION Owner	EMPLOYER Karma		
d	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	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]			\$465
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]			\$465

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID #

1. Committee Name Kara Kelty For Flagstaff

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

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 *!!! last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A* \$0

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

1. Committee Name Kara Kelty For Flagstaff

2. ID #

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

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]			\$0

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name Kara Kelty For Flagstaff

2. ID #

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

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]				\$0