

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 #

AMENDED
4/18/2010

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)	\$0	\$0
5b Cash on Hand at the Beginning of this Reporting Period	\$3,641.09	\$0
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$2,643	\$13,007
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	\$6,284.09	\$13,007
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	\$0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$5,884.76	\$12,607.67
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	\$399.33	\$399.33

*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 Kelty For Flagstaff
 3. Report covering period from 2/18/2010 Thru 3/29/2010

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)		\$2,415	\$11,440
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)		\$228	\$727
(c) Political Committees (Total from Schedule B)		\$0	\$0
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]		\$2,643	\$12,167
(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)]		\$2,643	\$12,167
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)		\$0	\$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]		\$2,643	\$13,007
QUALIFYING CONTRIBUTION RECEIPTS			
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).			
DISBURSEMENTS			
9. Expenditures for operating expenses (Total from Schedule D)		\$5,884.76	\$11,767.67
10. Independent Expenditures (Total from Schedule D-1)		\$0	\$0
11. Value of In-kind expenditures (Total from Schedule E)		\$0	\$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]		\$5,884.76	\$12,607.67
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]		\$5,884.76	\$12,607.67
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		4/5/2009	
Signature of Treasurer or Candidate or Designating Individual		Date	

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Kara Kelly For Flagstaff

3. Report covering period from 2/18/2010 thru 3/29/2010

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																				
Castleberry Debbie																						
STREET ADDRESS 2233 N. Hemberg Dr																						
CITY	STATE	ZIP																				
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OCCUPATION Photographer	EMPLOYER Self-employed																					
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LAST	FIRST	MI																				
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STREET ADDRESS 4509 N Mountain Meadow Dr.																						
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LAST	FIRST	MI																				
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LAST	FIRST	MI																				
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LAST	FIRST	MI																				
Howard Eric																						
STREET ADDRESS 800 W. University Heights Dr. S.																						
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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

2. ID #

1. Committee Name Kara Kelly For Flagstaff

3. Report covering period from 2/18/2010 thru 3/29/2010

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LAST	FIRST	MI																				
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CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																				
Kruse Andrew																						
STREET ADDRESS 3124 N. Kyle Loop																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86004																						
OCCUPATION VP Sales and Marketing	EMPLOYER Southwest Widnpower																					
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Linda Thomas</td> </tr> <tr> <td colspan="3">STREET ADDRESS 5700 N. Villa Circle, Unit 466</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 Financial Officer</td> <td colspan="2">EMPLOYER FMC</td> </tr> </table>	LAST	FIRST	MI	Linda Thomas			STREET ADDRESS 5700 N. Villa Circle, Unit 466			CITY	STATE	ZIP	Flagstaff, AZ 86004			OCCUPATION Financial Officer	EMPLOYER FMC		2/27/2010	\$200	\$200
LAST	FIRST	MI																				
Linda Thomas																						
STREET ADDRESS 5700 N. Villa Circle, Unit 466																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86004																						
OCCUPATION Financial Officer	EMPLOYER FMC																					
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Leary Michael</td> </tr> <tr> <td colspan="3">STREET ADDRESS PO Box 684</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Flagstaff, AZ 86002</td> </tr> <tr> <td>OCCUPATION Landscape Architect</td> <td colspan="2">EMPLOYER National Park Service</td> </tr> </table>	LAST	FIRST	MI	Leary Michael			STREET ADDRESS PO Box 684			CITY	STATE	ZIP	Flagstaff, AZ 86002			OCCUPATION Landscape Architect	EMPLOYER National Park Service		2/27/2010	\$100	\$100
LAST	FIRST	MI																				
Leary Michael																						
STREET ADDRESS PO Box 684																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86002																						
OCCUPATION Landscape Architect	EMPLOYER National Park Service																					
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Motter Roberta</td> </tr> <tr> <td colspan="3">STREET ADDRESS 909 Grand Canyon Ave</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 Accountant</td> <td colspan="2">EMPLOYER Self-employed</td> </tr> </table>	LAST	FIRST	MI	Motter Roberta			STREET ADDRESS 909 Grand Canyon Ave			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION Accountant	EMPLOYER Self-employed		2/21/2010	\$50	\$50
LAST	FIRST	MI																				
Motter Roberta																						
STREET ADDRESS 909 Grand Canyon Ave																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86001																						
OCCUPATION Accountant	EMPLOYER Self-employed																					
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 Kelly For Flagstaff

3. Report covering period from 2/18/2010 thru 3/29/2010

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">Strobel-Hendricks Lisa</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">6730 E. Vail 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>Teaching assistant</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Strobel-Hendricks Lisa			STREET ADDRESS			6730 E. Vail Dr			CITY	STATE	ZIP	Flagstaff, AZ 86004			OCCUPATION	EMPLOYER		Teaching assistant	NAU		2/21/2010	\$75	\$75
LAST	FIRST	MI																										
Strobel-Hendricks Lisa																												
STREET ADDRESS																												
6730 E. Vail Dr																												
CITY	STATE	ZIP																										
Flagstaff, AZ 86004																												
OCCUPATION	EMPLOYER																											
Teaching assistant	NAU																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Montfort Lela</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">331 E. David</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>Program Coordinator</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Montfort Lela			STREET ADDRESS			331 E. David			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION	EMPLOYER		Program Coordinator	NAU		2/15/2010	\$100	\$100
LAST	FIRST	MI																										
Montfort Lela																												
STREET ADDRESS																												
331 E. David																												
CITY	STATE	ZIP																										
Flagstaff, AZ 86001																												
OCCUPATION	EMPLOYER																											
Program Coordinator	NAU																											
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Cohen Melissa</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1065 Lava Ln</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>Program Coordinator</td> <td colspan="2">NAU</td> </tr> </table>	LAST	FIRST	MI	Cohen Melissa			STREET ADDRESS			1065 Lava Ln			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION	EMPLOYER		Program Coordinator	NAU		2/20/2010	\$50	\$50
LAST	FIRST	MI																										
Cohen Melissa																												
STREET ADDRESS																												
1065 Lava Ln																												
CITY	STATE	ZIP																										
Flagstaff, AZ 86001																												
OCCUPATION	EMPLOYER																											
Program Coordinator	NAU																											
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Rudolph Debbie</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1451 N. San Francisco</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>Director</td> <td colspan="2">Coconino County School Regio</td> </tr> </table>	LAST	FIRST	MI	Rudolph Debbie			STREET ADDRESS			1451 N. San Francisco			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION	EMPLOYER		Director	Coconino County School Regio		2/21/2010	\$50	\$50
LAST	FIRST	MI																										
Rudolph Debbie																												
STREET ADDRESS																												
1451 N. San Francisco																												
CITY	STATE	ZIP																										
Flagstaff, AZ 86001																												
OCCUPATION	EMPLOYER																											
Director	Coconino County School Regio																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td> </td> <td colspan="2"> </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]		\$2,415																									

*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 Kelty For Flagstaff

2. ID #

3. Report covering period from 2/18/2010 thru 3/29/2010

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	\$228	\$727	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	\$228	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	\$727

*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 Kara Kelly For Flagstaff

2. ID #

3. Report covering period from 2/18/2010 thru 3/29/2010

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>2/18/2010</u> thru <u>3/29/2010</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 Kelly For Flagstaff

2. ID #

3. Report covering period from 2/18/2010 thru 3/29/2010

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 Kelly For Flagstaff

3. Report covering period from 2/18/2010 thru 3/29/2010

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	3/2/2010	\$12.24
b.	NAME, ADDRESS, CITY, STATE AND ZIP Paypal 2211 North First Street San Jose, CA 95131 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Finance charges	2/18-3/29/10	\$19.06
c.	NAME, ADDRESS, CITY, STATE AND ZIP Starbucks Highway 66 Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Refreshments; Volunteers	2/20/2010	\$13.25
d.	NAME, ADDRESS, CITY, STATE AND ZIP Susan Bischoff 3347 S Andrea Dr Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Promotional materials	2/24/2010	\$70.00
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	3/4/2010	\$1,748.37
f.	NAME, ADDRESS, CITY, STATE AND ZIP Cox Media 405 North Beaver Street Flagstaff Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Air time for commercial	3/1/2010	\$969.00
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D <i>if last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A</i>		

*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 Kelly For Flagstaff

3. Report covering period from 2/18/2010 thru 3/29/2010

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 Kinko's 1423 S Plaza Way Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Office supplies	2/26/2010	\$0.79
b.	NAME, ADDRESS, CITY, STATE AND ZIP Albertson 416 E Route 66 Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Refreshments, Volunteers	3/8/2010	\$5.41
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	2/22; 3/9/10	\$2,190
d.	NAME, ADDRESS, CITY, STATE AND ZIP Staples 2625 South Woodlands Village Boulevard Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printer	3/1/2010	\$86.75
e.	NAME, ADDRESS, CITY, STATE AND ZIP USPS 104 North Agassiz St Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Postage	2/19/2010	\$23.76
f.	NAME, ADDRESS, CITY, STATE AND ZIP The Weatherford Hotel 23 N. Leroux Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Election party	3/9/2010	\$280.46
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D <i>ff</i> last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A <i>j</i>		

*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 2/18/2010

thru 3/29/2010

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 Arizona Music Pro 122 East Route 66 Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	3/10/2010	\$8.57
b.	NAME, ADDRESS, CITY, STATE AND ZIP Qwest Communication 4650 U.S. 89 Flagstaff, AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Volunteer's phone	3/26/2010	\$57.10
c.	NAME, ADDRESS, CITY, STATE AND ZIP Ben Cornelius Videography 324 N. San Francisco Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Video	3/4/2010	\$400
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 <i>[If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]</i>		\$5,884.76

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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

2. ID #

1. Committee Name Kara Kelly For Flagstaff

3. Report covering period from 2/18/2010 thru 3/29/2010

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 [Transfer total to Detail Summary Page Line 12, Column A]		\$0

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

1. Committee Name Kara Kelty For Flagstaff

2. ID #

3. Report covering period from 2/18/2010 thru 3/29/2010

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 2/18/2010 thru 3/29/2010

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 2/18/2010 thru 3/29/2010

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

1. Committee Name Kara Kelty For Flagstaff

2. ID #

3. Report covering period from 2/18/2010 thru 3/29/2010

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 2/18/2010 thru 3/29/2010

ANY OTHER DISBURSEMENTS		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			
a.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px;">DESCRIPTION</div>		
b.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px;">DESCRIPTION</div>		
c.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px;">DESCRIPTION</div>		
d.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px;">DESCRIPTION</div>		
e.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px;">DESCRIPTION</div>		
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 Kelty For Flagstaff

2. ID #

3. Report covering period from 2/18/2010 thru 3/29/2010

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.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="width: 20%;">CONTRIBUTION • •</td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE • •</td> <td></td> </tr> <tr> <td colspan="3">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •			EXPENDITURE • •		DESCRIPTION			OCCUPATION	EMPLOYER			
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •														
	EXPENDITURE • •														
DESCRIPTION															
OCCUPATION	EMPLOYER														
b.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="width: 20%;">CONTRIBUTION • •</td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE • •</td> <td></td> </tr> <tr> <td colspan="3">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •			EXPENDITURE • •		DESCRIPTION			OCCUPATION	EMPLOYER			
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •														
	EXPENDITURE • •														
DESCRIPTION															
OCCUPATION	EMPLOYER														
c.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="width: 20%;">CONTRIBUTION • •</td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE • •</td> <td></td> </tr> <tr> <td colspan="3">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •			EXPENDITURE • •		DESCRIPTION			OCCUPATION	EMPLOYER			
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •														
	EXPENDITURE • •														
DESCRIPTION															
OCCUPATION	EMPLOYER														
d.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="width: 20%;">CONTRIBUTION • •</td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE • •</td> <td></td> </tr> <tr> <td colspan="3">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • •			EXPENDITURE • •		DESCRIPTION			OCCUPATION	EMPLOYER			
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 <i>[If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]</i>		\$0												
6.	ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E <i>[If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]</i>		\$0												

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Kara Kelty For Flagstaff

2. ID #

3. Report covering period from 2/18/2010 thru 3/29/2010

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 (If 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 2/18/2010 thru 3/29/2010

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 2/18/2010 thru 3/29/2010

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