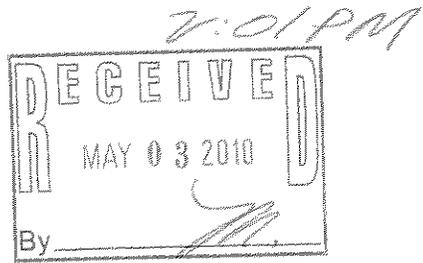


POLITICAL COMMITTEE
CITY/TOWN OF _____
CAMPAIGN FINANCE REPORT
2010 March/May Regular Election

FOR OFFICE USE ONLY



1. David Evans for Council
Full Name of Committee

P.O. Box 3233
Address

Flagstaff AZ 86003 Coconino
City ZIP Code County Phone

2. _____
Sponsoring Organization or Candidate and office

_____ (928) 526-7971
Name of Candidate and Office Sought (if applicable)

_____ _____
E-Mail Address Fax #

3A. ID# _____

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

January 31 Report - For Period of _____ * thru December 31, 2009 January 1, 2010 and January 31, 2010

Pre-Primary Election Report - For Period of January 1, 2010 thru February 17, 2010 February 18, 2010 and February 25, 2010

Post-Primary Election Report - For Period of February 18, 2010 thru March 29, 2010 March 30, 2010 thru April 8, 2010

Pre-General Election Report - For Period of March 30, 2010 thru April 28, 2010 April 29, 2010 thru May 6, 2010

Post-General Election Report - For Period of April 29, 2010 thru June 7, 2010 June 8, 2010 and June 17, 2010

**January 31 Report - For Period of June 8, 2010 thru December 31, 2011 January 1, 2012 and January 31, 2012

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		
5b Cash on Hand at the Beginning of this Reporting Period	2,332.84	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	7,160 -	12,498.50
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	9,492.84	12,498.50
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)	9,174.15	12,179.81
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	318.69	318.69

*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: David Evans for Council
 3. Report covering period from 3/30 Thru 4/28/10

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)		4,760	8,330
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)			
(c) Political Committees (Total from Schedule B)			
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]			
(e) Refund of contributions (Total from Schedule F-2)			
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		4,760	8,330
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		2,000	3,768.50
(b) All other loans (Total from Schedule C-1)			
(c) Total Loans [add 5(a) and 5(b)]			
6. In-kind contributions (Total from Schedule E)		400	400
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)			
8. Total Receipts [add 4(f), 5(c), 6, and 7]			
QUALIFYING CONTRIBUTION RECEIPTS			
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2)			
DISBURSEMENTS			
9. Expenditures for operating expenses (Total from Schedule D)		8,774.15	11,779.81
10. Independent Expenditures (Total from Schedule D-1)			
11. Value of In-kind expenditures (Total from Schedule E)		400	400
12. Loans made by reporting committee (Total from Schedule D-2)			
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)			
(b) Repayment of all other loans (Total from Schedule D-5)			
(c) Total Loan Repayments [add 13(a) and 13(b)]			
14. Transfers to other political committees (Total from Schedule D-6)			
15. Any other disbursement (Total from Schedule D-7)			
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]			
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)			
18. Total disbursements [subtract line 17 from line 16]		9,174.15	12,179.81
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.			
Type or Print Name of Treasurer		David Evans	
Signature of Treasurer or Candidate or Designating Individual		5/3/10	
		Date	

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name David Evans for Council

3. Report covering period from 3/30 thru 4/28/10

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 data-bbox="196 443 487 478">LAST</td> <td data-bbox="487 443 779 478">FIRST</td> <td data-bbox="779 443 954 478">MI</td> </tr> <tr> <td colspan="3" data-bbox="196 478 954 569">STREET ADDRESS <u>SEE ATTACHED</u></td> </tr> <tr> <td data-bbox="196 569 487 604">CITY</td> <td data-bbox="487 569 779 604">STATE</td> <td data-bbox="779 569 954 604">ZIP</td> </tr> <tr> <td data-bbox="196 604 634 695">OCCUPATION</td> <td colspan="2" data-bbox="634 604 954 695">EMPLOYER <u>LIST</u></td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS <u>SEE ATTACHED</u>			CITY	STATE	ZIP	OCCUPATION	EMPLOYER <u>LIST</u>			
LAST	FIRST	MI													
STREET ADDRESS <u>SEE ATTACHED</u>															
CITY	STATE	ZIP													
OCCUPATION	EMPLOYER <u>LIST</u>														
b.	<table border="1"> <tr> <td data-bbox="196 695 487 730">LAST</td> <td data-bbox="487 695 779 730">FIRST</td> <td data-bbox="779 695 954 730">MI</td> </tr> <tr> <td colspan="3" data-bbox="196 730 954 821">STREET ADDRESS</td> </tr> <tr> <td data-bbox="196 821 487 856">CITY</td> <td data-bbox="487 821 779 856">STATE</td> <td data-bbox="779 821 954 856">ZIP</td> </tr> <tr> <td data-bbox="196 856 634 947">OCCUPATION</td> <td colspan="2" data-bbox="634 856 954 947">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"> <tr> <td data-bbox="196 947 487 982">LAST</td> <td data-bbox="487 947 779 982">FIRST</td> <td data-bbox="779 947 954 982">MI</td> </tr> <tr> <td colspan="3" data-bbox="196 982 954 1073">STREET ADDRESS</td> </tr> <tr> <td data-bbox="196 1073 487 1108">CITY</td> <td data-bbox="487 1073 779 1108">STATE</td> <td data-bbox="779 1073 954 1108">ZIP</td> </tr> <tr> <td data-bbox="196 1108 634 1199">OCCUPATION</td> <td colspan="2" data-bbox="634 1108 954 1199">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"> <tr> <td data-bbox="196 1199 487 1234">LAST</td> <td data-bbox="487 1199 779 1234">FIRST</td> <td data-bbox="779 1199 954 1234">MI</td> </tr> <tr> <td colspan="3" data-bbox="196 1234 954 1325">STREET ADDRESS</td> </tr> <tr> <td data-bbox="196 1325 487 1360">CITY</td> <td data-bbox="487 1325 779 1360">STATE</td> <td data-bbox="779 1325 954 1360">ZIP</td> </tr> <tr> <td data-bbox="196 1360 634 1451">OCCUPATION</td> <td colspan="2" data-bbox="634 1360 954 1451">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"> <tr> <td data-bbox="196 1451 487 1486">LAST</td> <td data-bbox="487 1451 779 1486">FIRST</td> <td data-bbox="779 1451 954 1486">MI</td> </tr> <tr> <td colspan="3" data-bbox="196 1486 954 1577">STREET ADDRESS</td> </tr> <tr> <td data-bbox="196 1577 487 1612">CITY</td> <td data-bbox="487 1577 779 1612">STATE</td> <td data-bbox="779 1577 954 1612">ZIP</td> </tr> <tr> <td data-bbox="196 1612 634 1703">OCCUPATION</td> <td colspan="2" data-bbox="634 1612 954 1703">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]														

*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 David Evans for Council

2. ID #

3. Report covering period from 3/30/10 thru 4/28/10

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
None			
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]	

*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 David Evans for Council

2. ID #

3. Report covering period from 3/30/10 thru 4/28/10

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	<u>None</u>		
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>			

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name <u>David Evans for Council</u>	2. ID #		
3.	Report covering period from <u>3/30/10</u> thru <u>4/28/10</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 <u>David Evans</u> <u>1550 N. FOX HILL</u> <u>Flagstaff, AZ 86004</u>		<u>2000</u>	<u>3,768.50</u>
	DESCRIPTION <u>Personal loan to campaign</u>			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]			

OTHER LOANS

SCHEDULE C1

1. Committee Name David Evans for Council

2. ID#

3. Report covering period from 3/30 thru 4/28/10

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# <p align="center" style="font-size: 2em;">None</p>			
	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)			

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name David Evans for Council

2. ID#

3. Report covering period from 3/30/10 thru 4/28/10

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE NAME, ADDRESS, CITY, STATE AND ZIP <u>SEE ATTACHED SHEET</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
b.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
c.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
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]		

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name David Evans for Council

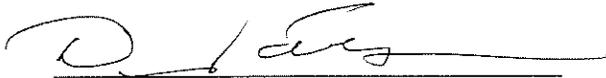
2. ID #

3. Report covering period from 3/30/10 thru 4/28/10

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 <u>None</u> PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • 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.



Signature of Treasurer

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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name David Evans for Council

2. ID#

3. Report covering period from 3/30/10 thru 4/28/10

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# <p style="text-align: center; font-size: 1.5em;">None</p>		
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

1. Committee Name David Evans Soc Council

2. ID#

3. Report covering period from 3/30 thru 4/28/10

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 <u>None</u>		
	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

1. Committee Name David Evans for Council

2. ID#

3. Report covering period from 3/30 thru 4/28/10

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 <u>None</u>		
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

1. Committee Name David Evans for Council

2. ID #

3. Report covering period from 3/20/10 thru 4/28/10

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# <p style="text-align: center; font-size: 2em;">None</p>		
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

1. Committee Name David Evans for Council

2. ID#

3. Report covering period from 3/30 thru 4/28/10

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# <i>None</i>		
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 David Evans Sor Council

2. ID #

3. Report covering period from 3/30 thru 4/28/10

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# <p style="text-align: center; font-size: 2em;">None</p>		
	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 David Evans for Council

2. ID#

3. Report covering period from 3/30 thru 4/28/10

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# <u>Rob Wilson</u> <u>P.O. Box 1811</u> <u>Flagstaff, AZ 86002</u> </td> <td style="width: 60%;"> CONTRIBUTION •• <u>400</u> EXPENDITURE •• <u>400</u> </td> </tr> <tr> <td colspan="2">DESCRIPTION <u>Produce (Commercial)</u></td> </tr> <tr> <td>OCCUPATION <u>Self-employed</u></td> <td>EMPLOYER <u>Aspen Pro Medicine</u></td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Rob Wilson</u> <u>P.O. Box 1811</u> <u>Flagstaff, AZ 86002</u>	CONTRIBUTION •• <u>400</u> EXPENDITURE •• <u>400</u>	DESCRIPTION <u>Produce (Commercial)</u>		OCCUPATION <u>Self-employed</u>	EMPLOYER <u>Aspen Pro Medicine</u>	<u>4/13/10</u>	<u>400</u>
NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Rob Wilson</u> <u>P.O. Box 1811</u> <u>Flagstaff, AZ 86002</u>	CONTRIBUTION •• <u>400</u> EXPENDITURE •• <u>400</u>								
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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]								
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

1. Committee Name David Evans

2. ID #

3. Report covering period from 3/30/10 thru 4/28/10

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# <u>NONE</u>		
	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

1. Committee Name David Evans Sec Council

2. ID #

3. Report covering period from 3/30/10 thru 4/28/10

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# <p style="text-align: center; font-size: 2em;">None</p>		
	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 David Evans for Council

2. ID#

3. Report covering period from 3/30/10 thru 4/28/10

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#					
	None					
	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)					