

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

FOR OFFICE USE ONLY

1. Art Babbott for City Council
Full Name of Committee
1414 N Rim Drive
Address
Flagstaff 86001 Coconino 774-7781
City ZIP Code County Phone

2. Art Babbott Flagstaff City Council
Sponsoring Organization or Candidate and office
artforflag@gmail.com
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 | 5231.63 | |
| 5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8) | 0 | 8465 |
| 5d Subtotal (add Lines b and c for Column A and add lines a and c for Column B) | 5231.63 | 8465 |
| 6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines] | | 0 |
| 6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18) | 1406.62 | 4590.29 |
| 7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d] | | 3874.71 |

*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: Art Babbott for City Council
 3. Report covering period from 4/24/10 Thru 6/7/10

| |
|--------|
| 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) | 0 | 7220 |
| (b) Individuals - aggregate \$25 or less (Total from Schedule A-1) | 4 | 145 |
| (c) Political Committees (Total from Schedule B) | | |
| (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)] | 0 | 7365 |
| (e) Refund of contributions (Total from Schedule F-2) | | |
| (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)] | | |
| 5. (a) Loans made or guaranteed by candidate (Total from Schedule C) | 0 | 500 |
| (b) All other loans (Total from Schedule C-1) | | |
| (c) Total Loans [add 5(a) and 5(b)] | 0 | 500 |
| 6. In-kind contributions (Total from Schedule E) | 0 | 600 |
| 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1) | | |
| 8. Total Receipts [add 4(f), 5(c), 6, and 7] | 0 | 8465 |
| QUALIFYING CONTRIBUTION RECEIPTS | | |
| Qualifying Contributions of \$5 from Individuals (Total from Schedule A2) | | |
| DISBURSEMENTS | | |
| 9. Expenditures for operating expenses (Total from Schedule D) | 906.92 | 4090.29 |
| 10. Independent Expenditures (Total from Schedule D-1) | | |
| 11. Value of In-kind expenditures (Total from Schedule E) | | |
| 12. Loans made by reporting committee (Total from Schedule D-2) | | |
| 13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) | 500 | 500 |
| (b) Repayment of all other loans (Total from Schedule D-5) | | |
| (c) Total Loan Repayments [add 13(a) and 13(b)] | 500 | 500 |
| 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] | | 4570.29 |
| 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) | | |
| 18. Total disbursements [subtract line 17 from line 16] | 1406.02 | 4590.29 |
| 19. Total Outstanding Debts Owed by Reporting Candidate or Political Committee (Schedule F-3) | | |

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

Heather Babbott
 Signature of Treasurer or Candidate or Designating Individual

hbabott 5/28/10
 Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Art Babbitt for City Council
 3. Report covering period from 4/29-6/7/10 thru _____

2. ID # _____

| 4 | CONTRIBUTIONS | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|---|---|---------------|-----------------------------|--|
| NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR | | | | |
| 4a. | LAST FIRST MI | | | |
| | STREET ADDRESS | | | |
| | CITY STATE ZIP | | | |
| | OCCUPATION EMPLOYER | | | |
| b. | LAST FIRST MI | | | |
| | STREET ADDRESS | | | |
| | CITY STATE ZIP | | | |
| | OCCUPATION EMPLOYER | | | |
| c. | LAST FIRST MI | | | |
| | STREET ADDRESS | | | |
| | CITY STATE ZIP | | | |
| | OCCUPATION EMPLOYER | | | |
| d. | LAST FIRST MI | | | |
| | STREET ADDRESS | | | |
| | CITY STATE ZIP | | | |
| | OCCUPATION EMPLOYER | | | |
| e. | LAST FIRST MI | | | |
| | STREET ADDRESS | | | |
| | CITY STATE ZIP | | | |
| | OCCUPATION EMPLOYER | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A] | | | |

*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 Art Bobbitt for City Council
 3. Report covering period from 4/29-6/7/10 thru _____

2. ID # _____

| 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="203 426 500 457">LAST</td> <td data-bbox="500 426 824 457">FIRST</td> <td data-bbox="824 426 987 457">MI</td> </tr> <tr> <td colspan="3" data-bbox="203 489 987 520">STREET ADDRESS</td> </tr> <tr> <td data-bbox="203 552 500 583">CITY</td> <td data-bbox="500 552 776 583">STATE</td> <td data-bbox="776 552 987 583">ZIP</td> </tr> <tr> <td data-bbox="203 615 662 646">OCCUPATION</td> <td colspan="2" data-bbox="662 615 987 646">EMPLOYER</td> </tr> </table> | LAST | FIRST | MI | STREET ADDRESS | | | CITY | STATE | ZIP | OCCUPATION | EMPLOYER | | | |
| LAST | FIRST | MI | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | |
| b. | <table border="1"> <tr> <td data-bbox="203 682 500 714">LAST</td> <td data-bbox="500 682 824 714">FIRST</td> <td data-bbox="824 682 987 714">MI</td> </tr> <tr> <td colspan="3" data-bbox="203 745 987 777">STREET ADDRESS</td> </tr> <tr> <td data-bbox="203 808 500 840">CITY</td> <td data-bbox="500 808 776 840">STATE</td> <td data-bbox="776 808 987 840">ZIP</td> </tr> <tr> <td data-bbox="203 871 662 903">OCCUPATION</td> <td colspan="2" data-bbox="662 871 987 903">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="203 938 500 970">LAST</td> <td data-bbox="500 938 824 970">FIRST</td> <td data-bbox="824 938 987 970">MI</td> </tr> <tr> <td colspan="3" data-bbox="203 1001 987 1033">STREET ADDRESS</td> </tr> <tr> <td data-bbox="203 1064 500 1096">CITY</td> <td data-bbox="500 1064 776 1096">STATE</td> <td data-bbox="776 1064 987 1096">ZIP</td> </tr> <tr> <td data-bbox="203 1127 662 1159">OCCUPATION</td> <td colspan="2" data-bbox="662 1127 987 1159">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="203 1194 500 1226">LAST</td> <td data-bbox="500 1194 824 1226">FIRST</td> <td data-bbox="824 1194 987 1226">MI</td> </tr> <tr> <td colspan="3" data-bbox="203 1260 987 1291">STREET ADDRESS</td> </tr> <tr> <td data-bbox="203 1323 500 1354">CITY</td> <td data-bbox="500 1323 776 1354">STATE</td> <td data-bbox="776 1323 987 1354">ZIP</td> </tr> <tr> <td data-bbox="203 1386 662 1417">OCCUPATION</td> <td colspan="2" data-bbox="662 1386 987 1417">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="203 1451 500 1482">LAST</td> <td data-bbox="500 1451 824 1482">FIRST</td> <td data-bbox="824 1451 987 1482">MI</td> </tr> <tr> <td colspan="3" data-bbox="203 1516 987 1547">STREET ADDRESS</td> </tr> <tr> <td data-bbox="203 1579 500 1610">CITY</td> <td data-bbox="500 1579 776 1610">STATE</td> <td data-bbox="776 1579 987 1610">ZIP</td> </tr> <tr> <td data-bbox="203 1642 662 1673">OCCUPATION</td> <td colspan="2" data-bbox="662 1642 987 1673">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 Art Babbott for City Council

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

3. Report covering period from 4/29/10 thru 6/7/10

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

| DESCRIPTION | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|---|-----------------------------|---|
| | | |
| 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 Art Babbott for City Council

2. ID #

3. Report covering period from 4/29/10 thru 6/7/10

| 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 | | | |
| 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 Art Babbott for City Council | 2. ID # | | |
| 3. | Report covering period from <u>4/29/10</u> thru <u>10/7/10</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 | | | 500- |
| | 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] | | | 500- |

OTHER LOANS

SCHEDULE C1

1. Committee Name Art Babbott for City Council

2. ID #

3. Report covering period from 4/29/10 thru 6/7/10

| 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# | | | |
| | 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

2. ID #

1. Committee Name Art Babbott for City Council

3. Report covering period from 4/29/10 thru 6/7/10

| 4 | EXPENDITURES | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|-----|---|-----------------------|---------------------------|
| | NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE | | |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP <u>Arizona Daily Sun POB 1849 Flagstaff AZ 86002</u> <u>Media buy</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED | <u>4/29/10</u> | <u>276.68</u> |
| b. | NAME, ADDRESS, CITY, STATE AND ZIP <u>Staples 2625 N Woodlands Blvd Flagstaff AZ 86001</u> <u>Stamps, ink</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED | <u>5/1/10</u> | <u>85.07</u> |
| c. | NAME, ADDRESS, CITY, STATE AND ZIP <u>Arizona Daily Sun POB 1849 Flagstaff, AZ 86002</u> <u>Media Buy</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED | <u>5/10/10</u> | <u>276.68</u> |
| d. | NAME, ADDRESS, CITY, STATE AND ZIP <u>Charlys 23 N Leroux St Flagstaff AZ 86001</u> <u>Election party</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED | <u>5/18/10</u> | <u>143.49</u> |
| e. | NAME, ADDRESS, CITY, STATE AND ZIP <u>Charlys 23 N Leroux St Flagstaff AZ 86001</u> <u>election party</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED | <u>5/18/10</u> | <u>125.00</u> |
| 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] | | <u>906.92</u> |

*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 Art Babbott for City Council

3. Report covering period from 4/29/10 thru 6/7/10

| 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# | | |
| 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 Art Babbott for City Council

2. ID #

3. Report covering period from 4/29/10 thru 6/7/10

| 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 | | |
| | 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 AJ] | | |
| * | Includes return of contributions made by reporting committee | | |

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID #

1. Committee Name Art Babbott for City Council

3. Report covering period from 4/29/10 thru 6/7/10

| 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# | | |
| 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 Art Babbott for City Council

2. ID #

3. Report covering period from 4/29/10 thru 6/7/10

| 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;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">DESCRIPTION</div> | | |
| b. | <div style="border: 1px solid black; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">DESCRIPTION</div> | | |
| c. | <div style="border: 1px solid black; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">DESCRIPTION</div> | | |
| d. | <div style="border: 1px solid black; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">DESCRIPTION</div> | | |
| e. | <div style="border: 1px solid black; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">DESCRIPTION</div> | | |
| 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 Art Babbott for City Council

2. ID #

3. Report covering period from 4/29/10 thru 6/7/10

| 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#</td> <td style="width: 20%;">CONTRIBUTION • •</td> <td style="width: 20%;">EXPENDITURE • •</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: 20%;">EXPENDITURE • •</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: 20%;">EXPENDITURE • •</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: 20%;">EXPENDITURE • •</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 [If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A] | | | | | | | | | | | |
| 6. | ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A] | | | | | | | | | | | |

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID #

1. Committee Name Art Babbott for City Council

3. Report covering period from 4/29/10 thru 6/7/10

| 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# | | |
| | DESCRIPTION OF RECEIPT | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A]

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

2. ID #

1. Committee Name Art Babbott for City Council

3. Report covering period from 9/29/10 thru 6/7/10

| 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# 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 Art Babbott for City Council

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

3. Report covering period from 4/29/10 thru 6/7/10

| 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# | | | | |
| | 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] | | | | |