

POLITICAL COMMITTEE
CITY/TOWN OF
CAMPAIGN FINANCE REPORT
2014 August/November Regular Election

FOR OFFICE USE ONLY

DEC 04 2014
 Meg Roeders
 @ 11:05 a.m.

1. Charlie 4 Council
 Full Name of Committee
2109 N. Fourth St. #3
 Address
Flagstaff 86004 Coconino 928-853-
 City ZIP Code County Phone
 2. Charlie 4 Council for Flag City Council 12762
 Sponsoring Organization or Candidate and office
Charlie 4 Council
 Name of Candidate and Office Sought (if applicable)
Charlie 4 Council
 E-Mail Address Fax #

3A. ID#
 Primary
 General

4.	REPORTING PERIOD (Please check appropriate box)	DUE BETWEEN
<input type="checkbox"/>	JANUARY 31 thru 12/31/13.....	01/01/14 and 01/31/14
<input type="checkbox"/>	PRE-SPECIAL 01/01/14 thru 05/08/14.....	05/09/14 and 05/16/14
<input type="checkbox"/>	POST-SPECIAL 05/09/14 thru 06/09/14.....	06/10/14 and 06/19/14
<input type="checkbox"/>	PRE-PRIMARY 06/10/14 thru 08/14/14.....	08/15/14 and 08/22/14
<input type="checkbox"/>	POST-PRIMARY 08/15/14 thru 09/15/14.....	09/16/14 and 09/25/14
<input type="checkbox"/>	PRE-GENERAL 09/16/14 thru 10/23/14.....	10/24/14 and 10/31/14
<input checked="" type="checkbox"/>	POST-GENERAL 10/24/14 thru 11/24/14.....	11/25/14 and 12/04/14

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	14.82	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	474.63	11,550.58
5d	Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	489.45	11,550.58
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)	419.72	11,480.89
7.	Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	69.73	69.73

*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: Charlie's 4 Council
 3. Report covering period from 10/29/14 Thru 11/24/14

2. ID#	
<input type="checkbox"/>	Primary
<input checked="" type="checkbox"/>	General

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	100.00	4,435.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	90.00	1,335.00
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	190.00	5,770.00
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	190.00	5,770.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	284.60	5,780.50
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]	284.60	5,780.50
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	.03	.08
8. Total Receipts [add 4(f), 5(c), 6, and 7]	474.63	11,580.58

DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	419.72	11,480.85
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of in-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	419.72	11,480.85
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	419.72	11,480.85
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.

Charlie Odegard
 Type or Print Name of Treasurer

Charlie Odegard 11/4/14
 Signature of Treasurer or Candidate or Designating Individual Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#	
<input type="checkbox"/>	Primary
<input checked="" type="checkbox"/>	General

1. Committee Name Charlie's 4 (owner)

3. Report covering period from 10/24/14 thru 11/24/14

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><u>Barber</u></td> <td><u>Laney</u></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"><u>3322 N. Coast St.</u></td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td><u>Flagstaff</u></td> <td><u>AZ</u></td> <td><u>86001</u></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td><u>Retired</u></td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	<u>Barber</u>	<u>Laney</u>		STREET ADDRESS			<u>3322 N. Coast St.</u>			CITY	STATE	ZIP	<u>Flagstaff</u>	<u>AZ</u>	<u>86001</u>	OCCUPATION	EMPLOYER		<u>Retired</u>			<u>11/6/14</u>	<u>100.00</u>	<u>100.00</u>
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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]		<u>100.00</u>	<u>100.00</u>																								

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

CONTRIBUTIONS of \$50 or less - AGGREGATE TOTAL*

SCHEDULE A-1

2. ID#	
<input type="checkbox"/>	Primary
<input checked="" type="checkbox"/>	General

1. Committee Name Charlie's Corner

3. Report covering period from 10/29/14 thru 11/24/14

4. Aggregate Total of Contributions of \$50 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
CASH \$90	690	\$1,335.00
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	\$90	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B] \$1,335.00

*If contributions of \$50 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name <i>Charlie 4 Council</i>	2. ID #			
		<input type="checkbox"/>	Primary		
		<input checked="" type="checkbox"/>	General		
3.	Report covering period from <i>10/24/14</i> thru <i>11/24/14</i>				
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 <i>Van (Charlie) Odegersal</i>		<i>11/1/14</i>	<i>284.60</i>	<i>5,750.50</i>
	<i>1639 W. G. Fawcett Hwy Flagstaff, AZ 86001</i>				
	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]			<i>284.60</i>	<i>5,750.50</i>

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#	
<input type="checkbox"/>	Primary
<input checked="" type="checkbox"/>	General

1. Committee Name Charles H (owner)

3. Report covering period from 10/24/14 thru 11/24/14

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>Comparison Partner</u> <u>16 Dudley St.</u> <u>Fitchburg, MA 01420</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Website</u>	<u>10/28/14</u>	<u>29.00</u>
4b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Country Host Restaurant</u> <u>2285 E. Butler Rd.</u> <u>Flagstaff, AZ 86004</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Election Night Dinner</u>	<u>10/30/14</u>	<u>250.00</u>
4c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Flagstaff Publishing Co</u> <u>1751 Thompson St.</u> <u>Flagstaff, AZ 86001</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Newspaper Ad</u>	<u>11/18/14</u>	<u>140.72</u>
4d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	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>419.72</u>

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

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID#	
<input type="checkbox"/>	Primary
<input checked="" type="checkbox"/>	General

1. Committee Name Charlie Glenn

3. Report covering period from 10/24/14 thru 11/24/14

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.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID# <i>National Bank of Arizona</i> <i>PO Box 30709</i> <i>Salt Lake City, UT 84130-0709</i></p> <p>DESCRIPTION OF RECEIPT <i>Interest</i></p>	<i>10/30/14</i>	<i>.03</i>
4b.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF RECEIPT</p>		
4c.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF RECEIPT</p>		
4d.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF RECEIPT</p>		
4e.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF RECEIPT</p>		
4f.	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF RECEIPT</p>		
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]		