

POLITICAL COMMITTEE
CITY/TOWN OF FLAGSTAFF
CAMPAIGN FINANCE REPORT
2012 March/May Regular Election

FOR OFFICE USE ONLY

1. Nabours for Mayor Committee
Full Name of Committee
10 E. Dale Ave
Address
Flagstaff AZ 86001 Coconino (928) 779-5105
City ZIP Code County Phone

2. Jerry Nabours; Mayor, City of Flagstaff
Sponsoring Organization or Candidate and office

Name of Candidate and Office Sought (if applicable)
gnabours@gmail.com (928) 779-0447
E-Mail Address Fax #

3A. ID#
PC2011-07

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

January 31 Report - For Period of 11/22/2010 * thru December 31, 2011 January 1, 2012 and January 31, 2012

Pre-Primary Election Report - For Period of January 1, 2012 thru February 22, 2012 February 23, 2012 and March 1, 2012

Post-Primary Election Report - For Period of February 23, 2012 thru April 2, 2012 April 3, 2012 thru April 12, 2012

Pre-General Election Report - For Period of April 3, 2012 thru April 25, 2012 April 26, 2012 thru May 3, 2012

Post-General Election Report - For Period of April 26, 2012 thru June 4, 2012 June 5, 2012 and June 14, 2012

****January 31 Report** - For Period of June 5, 2012 thru December 31, 2013 January 1, 2014 and January 31, 2014

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)	00	
5b Cash on Hand at the Beginning of this Reporting Period		
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	3,955	3,955
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	3,955	3,955
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)	896	896
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	3,059	3,059

*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.

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from ~~Jan 1, 2011~~ 11/22/2010 thru Dec 31, 2011

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
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4a.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Aspey</td> <td>Frederick</td> <td>M.</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">5150 N Bandtail Rd</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Attorney</td> <td colspan="2">Aspey, Watkins, Diesel</td> </tr> </table>	LAST	FIRST	MI	Aspey	Frederick	M.	STREET ADDRESS			5150 N Bandtail Rd			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Attorney	Aspey, Watkins, Diesel		11/25/11	200	200
LAST	FIRST	MI																										
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LAST	FIRST	MI																										
Boggess	Jonette	D.																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

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1. Committee Name Nabours for Mayor Comm.

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LAST	FIRST	MI																										
Evans	Randy	J.																										
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LAST	FIRST	MI																										
Franklin	Lonnie	K.																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
Mangum	Sherry	G.																										
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LAST McClanahan	FIRST Sam	MI F.														
STREET ADDRESS 522 E. Charles Rd.																
CITY Flagstaff	STATE AZ	ZIP 86001														
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b.	<table border="1"> <tr> <td>LAST McCullough</td> <td>FIRST Mark</td> <td>MI E.</td> </tr> <tr> <td colspan="3">STREET ADDRESS 420 N. Humphreys</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION Insurance agent</td> <td colspan="2">EMPLOYER McCullough Insurance</td> </tr> </table>	LAST McCullough	FIRST Mark	MI E.	STREET ADDRESS 420 N. Humphreys			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION Insurance agent	EMPLOYER McCullough Insurance		12/8/11	75	75
LAST McCullough	FIRST Mark	MI E.														
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CITY Flagstaff	STATE AZ	ZIP 86001														
OCCUPATION Insurance agent	EMPLOYER McCullough Insurance															
c.	<table border="1"> <tr> <td>LAST McCullough</td> <td>FIRST Tim</td> <td>MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS 420 N. Humphreys</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION Insurance agent</td> <td colspan="2">EMPLOYER McCullough Insurance</td> </tr> </table>	LAST McCullough	FIRST Tim	MI	STREET ADDRESS 420 N. Humphreys			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION Insurance agent	EMPLOYER McCullough Insurance		12/8/11	75	75
LAST McCullough	FIRST Tim	MI														
STREET ADDRESS 420 N. Humphreys																
CITY Flagstaff	STATE AZ	ZIP 86001														
OCCUPATION Insurance agent	EMPLOYER McCullough Insurance															
d.	<table border="1"> <tr> <td>LAST Mongini</td> <td>FIRST Michael</td> <td>MI E.</td> </tr> <tr> <td colspan="3">STREET ADDRESS 120 N. Beaver</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION Attorney</td> <td colspan="2">EMPLOYER Hufford, Horstman</td> </tr> </table>	LAST Mongini	FIRST Michael	MI E.	STREET ADDRESS 120 N. Beaver			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION Attorney	EMPLOYER Hufford, Horstman		10/28/11	200	200
LAST Mongini	FIRST Michael	MI E.														
STREET ADDRESS 120 N. Beaver																
CITY Flagstaff	STATE AZ	ZIP 86001														
OCCUPATION Attorney	EMPLOYER Hufford, Horstman															
e.	<table border="1"> <tr> <td>LAST Nabours</td> <td>FIRST Gerald</td> <td>MI W.</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1015 W. Beal Rd.</td> </tr> <tr> <td>CITY Flagstaff</td> <td>STATE AZ</td> <td>ZIP 86001</td> </tr> <tr> <td>OCCUPATION Attorney</td> <td colspan="2">EMPLOYER Self</td> </tr> </table>	LAST Nabours	FIRST Gerald	MI W.	STREET ADDRESS 1015 W. Beal Rd.			CITY Flagstaff	STATE AZ	ZIP 86001	OCCUPATION Attorney	EMPLOYER Self		10/3/11	200	200
LAST Nabours	FIRST Gerald	MI W.														
STREET ADDRESS 1015 W. Beal Rd.																
CITY Flagstaff	STATE AZ	ZIP 86001														
OCCUPATION Attorney	EMPLOYER Self															
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(2), 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 Nabours for Mayor Comm.

3. Report covering period from ~~Jan. 1, 2011~~ 11/22/2010 thru Dec. 31, 2011

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																												
4a.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Niejadlik</td> <td>Carol</td> <td>A</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1914 Talkington St.</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Niejadlik	Carol	A	STREET ADDRESS			1914 Talkington St.			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Retired			10/3/11	50	50
LAST	FIRST	MI																										
Niejadlik	Carol	A																										
STREET ADDRESS																												
1914 Talkington St.																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Retired																												
b.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Perko</td> <td>Lawrence</td> <td>M.</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1607 N. Mariposa</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired professor</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Perko	Lawrence	M.	STREET ADDRESS			1607 N. Mariposa			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Retired professor			12/20/11	100	100
LAST	FIRST	MI																										
Perko	Lawrence	M.																										
STREET ADDRESS																												
1607 N. Mariposa																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Retired professor																												
c.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Reich</td> <td>Tevis</td> <td>S.</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">6 E. Dale Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Attorney</td> <td colspan="2">Self</td> </tr> </table>	LAST	FIRST	MI	Reich	Tevis	S.	STREET ADDRESS			6 E. Dale Ave			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Attorney	Self		12/14/11	200	200
LAST	FIRST	MI																										
Reich	Tevis	S.																										
STREET ADDRESS																												
6 E. Dale Ave																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Attorney	Self																											
d.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Robbins</td> <td>Gary</td> <td>E.</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">121 E. Birch #504</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Attorney</td> <td colspan="2">Self</td> </tr> </table>	LAST	FIRST	MI	Robbins	Gary	E.	STREET ADDRESS			121 E. Birch #504			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Attorney	Self		10/3/11	50	50
LAST	FIRST	MI																										
Robbins	Gary	E.																										
STREET ADDRESS																												
121 E. Birch #504																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Attorney	Self																											
e.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Smith</td> <td>Carol</td> <td>J.</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">516 W. Cherry #7</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Legal asst</td> <td colspan="2">Tevis Reich, attorney</td> </tr> </table>	LAST	FIRST	MI	Smith	Carol	J.	STREET ADDRESS			516 W. Cherry #7			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Legal asst	Tevis Reich, attorney		10/10/11	50	50
LAST	FIRST	MI																										
Smith	Carol	J.																										
STREET ADDRESS																												
516 W. Cherry #7																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
OCCUPATION	EMPLOYER																											
Legal asst	Tevis Reich, attorney																											
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 Nabours for Mayor Comm.

3. Report covering period from 11/22/2010 thru 12/31/2011

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>Souris</td> <td>Michael</td> <td>A.</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1602 N. Wakonda St.</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Real estate broker</td> <td colspan="2">Self</td> </tr> </table>	LAST	FIRST	MI	Souris	Michael	A.	STREET ADDRESS			1602 N. Wakonda St.			CITY	STATE	ZIP	Flagstaff	AZ	86004	OCCUPATION	EMPLOYER		Real estate broker	Self		11/17/11	200	200
LAST	FIRST	MI																										
Souris	Michael	A.																										
STREET ADDRESS																												
1602 N. Wakonda St.																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86004																										
OCCUPATION	EMPLOYER																											
Real estate broker	Self																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Tallman</td> <td>Gary</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1650 W. University</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Flagstaff</td> <td>AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired professor</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Tallman	Gary		STREET ADDRESS			1650 W. University			CITY	STATE	ZIP	Flagstaff	AZ	86001	OCCUPATION	EMPLOYER		Retired professor			12/15/11	50	50
LAST	FIRST	MI																										
Tallman	Gary																											
STREET ADDRESS																												
1650 W. University																												
CITY	STATE	ZIP																										
Flagstaff	AZ	86001																										
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Retired professor																												
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Wall</td> <td>Marilyn</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1831 N. Bluff Top Dr.</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Prescott Valley</td> <td>AZ</td> <td>86314</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Wall	Marilyn		STREET ADDRESS			1831 N. Bluff Top Dr.			CITY	STATE	ZIP	Prescott Valley	AZ	86314	OCCUPATION	EMPLOYER		Retired			12/2/11	100	100
LAST	FIRST	MI																										
Wall	Marilyn																											
STREET ADDRESS																												
1831 N. Bluff Top Dr.																												
CITY	STATE	ZIP																										
Prescott Valley	AZ	86314																										
OCCUPATION	EMPLOYER																											
Retired																												
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td></td> <td></td> <td></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></td> <td></td> <td></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																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td></td> <td></td> <td></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></td> <td></td> <td></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]	3955	3955																									

*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

Nabours for Mayor Comm.

2. ID #

1. Committee Name

3. Report covering period from 11/22/2010

thru Dec. 31, 2011

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] 00		6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	00

*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 Nabours for Mayor Comm.

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

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			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	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>			00	00
00				

CANDIDATE LOANS

SCHEDULE C

1. Committee Name Nabours for Mayor		2. ID #	
3. Report covering period from <u>11/22/2010</u> thru <u>12/31/2011</u>			
4. LOANS MADE OR GUARANTEED BY CANDIDATE		DATE RECEIVED	AMOUNT RECEIVED
NAME AND ADDRESS FROM WHOM RECEIVED			CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
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]	00	00

OTHER LOANS

SCHEDULE C1

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

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]	00	00	

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from Jan 1, 2011 thru Dec. 31, 2011

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 Daily Sun 1751 S. Thompson St. Flagstaff AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Newspaper ad on 10/31/11	10/27/11	264.88
b.	NAME, ADDRESS, CITY, STATE AND ZIP GoDaddy.com DESCRIPTION OF ITEMS OR SERVICES PURCHASED Web domain name purchase	11/2/11	97.36
c.	NAME, ADDRESS, CITY, STATE AND ZIP Mirror Images Printing 2218 E. Cedar Ave. Flagstaff AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing of envelopes	11/14/11	88.99
d.	NAME, ADDRESS, CITY, STATE AND ZIP United States Postal Service, Flagstaff DESCRIPTION OF ITEMS OR SERVICES PURCHASED roll of stamps	11/17/11	44.00
e.	NAME, ADDRESS, CITY, STATE AND ZIP Flag Stamp & Engraving 2534 E. 7th Ave. Flagstaff AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED check endorsement rubber stamp	11/21/11	18.39
f.	NAME, ADDRESS, CITY, STATE AND ZIP National Bank of Arizona 211 N. Leroux St. Flagstaff AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED check printing		21.75
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from Jan 1, 2011 thru Dec. 31, 2011

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>OneWebHosting.com</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Website template</u>	11/28/11	111.44
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Kristen Daulton 8530 Silver Spur Flagstaff AZ 86004</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Photography</u>	12/16/11	250.00
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]	896.81	

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name Nabours for Mayor Comm.

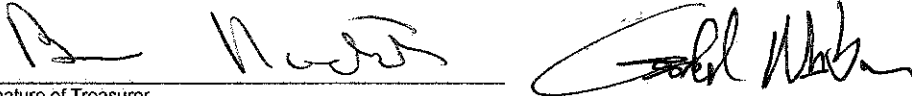
2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

4	INDEPENDENT EXPENDITURES IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/> 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]	00	

*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
(alphabetically) Frederick Aspey; attorney; Aspey, Watkins & Diesel	200
Jonette Boggess; business owner; Woodlands Self Storage	200
Joseph Donaldson; retired	200

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

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]		00

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

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]

00

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Nabours for Mayor Comm.

2. ID#

3. Report covering period from 11/22/2010 thru 12/31/2011

	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

2. ID#

1. Committee Name _____

3. Report covering period from 11/22/2010 thru 12/31/2011

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#		
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]		00

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from 11/22/2010 thru 12/31/2011

4	TRANSFERS MADE BY THE REPORTING COMMITTEE NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
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]

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ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

ANY OTHER DISBURSEMENTS		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]			00

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

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: 60%;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
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: 60%;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
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: 60%;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
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: 60%;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
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]		00						
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]		00						

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from 11/22/2010 thru 12/31/2011

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)*

00

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

1. Committee Name Nabours for Mayor Comm

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

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]			00

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 11/22/2010 thru 12/31/2011

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]				00