

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

FOR OFFICE USE ONLY

1. Coral4Flagstaff
Full Name of Committee
518 South O'Leary Street
Address
Flagstaff 86001 Coconino 928-600-6104
City ZIP Code County Phone

2. Coral J. Evans, Flagstaff City Council
Sponsoring Organization or Candidate and office
Coral J. Evans, Flagstaff City Council
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 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)	0.00	0.00
5b Cash on Hand at the Beginning of this Reporting Period	100.00	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	2849.00	2949.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	2949.00	2949.00
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]		0.00
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	1173.22	1173.22
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	1775.78	1775.78

*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: Coral4Flagstaff
 3. Report covering period from 1/1/2012 Thru 2/22/2012

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)	2729.00	2829.00
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	120.00	120.00
(c) Political Committees (Total from Schedule B)	0.00	0.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	2849.00	2949.00
(e) Refund of contributions (Total from Schedule F-2)	0.00	0.00
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	2849.00	2949.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0.00	0.00
(b) All other loans (Total from Schedule C-1)	0.00	0.00
(c) Total Loans [add 5(a) and 5(b)]	0.00	0.00
6. In-kind contributions (Total from Schedule E)	0.00	0.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0.00	0.00
8. Total Receipts [add 4(f), 5(c), 6, and 7]	2849.00	2949.00
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2)	0.00	0.00
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	1173.22	1173.22
10. Independent Expenditures (Total from Schedule D-1)	0.00	0.00
11. Value of In-kind expenditures (Total from Schedule E)	0.00	0.00
12. Loans made by reporting committee (Total from Schedule D-2)	0.00	0.00
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0.00	0.00
(b) Repayment of all other loans (Total from Schedule D-5)	0.00	0.00
(c) Total Loan Repayments [add 13(a) and 13(b)]	0.00	0.00
14. Transfers to other political committees (Total from Schedule D-6)	0.00	0.00
15. Any other disbursement (Total from Schedule D-7)	0.00	0.00
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	1173.22	1173.22
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0.00	0.00
18. Total disbursements [subtract line 17 from line 16]	1173.22	1173.22
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0.00	0.00

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.

Coral J. Evans

Type or Print Name of Treasurer

Coral J. Evans

2/29/2012

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Coral4Flagstaff

3. Report covering period from 1/1/2012 thru 2/22/2012

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CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Coral4Flagstaff

3. Report covering period from 1/1/2012 thru 2/22/2012

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LAST	FIRST	MI																				
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LAST	FIRST	MI																				
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Flagstaff, AZ		86001																				
OCCUPATION Downtown Business Owner	EMPLOYER Mountain Sports																					
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Vanlandingham John</td> </tr> <tr> <td colspan="3">STREET ADDRESS 220 W Juniper</td> </tr> <tr> <td colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION Downtown Business Owner</td> <td colspan="2">EMPLOYER Sage Brush Traders</td> </tr> </table>	LAST	FIRST	MI	Vanlandingham John			STREET ADDRESS 220 W Juniper			CITY		STATE ZIP	Flagstaff, AZ		86001	OCCUPATION Downtown Business Owner	EMPLOYER Sage Brush Traders		2/7/12	100.00	100.00
LAST	FIRST	MI																				
Vanlandingham John																						
STREET ADDRESS 220 W Juniper																						
CITY		STATE ZIP																				
Flagstaff, AZ		86001																				
OCCUPATION Downtown Business Owner	EMPLOYER Sage Brush Traders																					
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Stilley Dave M</td> </tr> <tr> <td colspan="3">STREET ADDRESS 17 N Leroux, Ste 203</td> </tr> <tr> <td colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION Downtown Property Owner</td> <td colspan="2">EMPLOYER Self Employed</td> </tr> </table>	LAST	FIRST	MI	Stilley Dave M			STREET ADDRESS 17 N Leroux, Ste 203			CITY		STATE ZIP	Flagstaff, AZ		86001	OCCUPATION Downtown Property Owner	EMPLOYER Self Employed		2/7/12	200.00	200.00
LAST	FIRST	MI																				
Stilley Dave M																						
STREET ADDRESS 17 N Leroux, Ste 203																						
CITY		STATE ZIP																				
Flagstaff, AZ		86001																				
OCCUPATION Downtown Property Owner	EMPLOYER Self Employed																					
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Donaldson Joseph</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1325 East Linda Vista Drive</td> </tr> <tr> <td colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ</td> <td>86004</td> </tr> <tr> <td>OCCUPATION Retired</td> <td colspan="2">EMPLOYER Retired</td> </tr> </table>	LAST	FIRST	MI	Donaldson Joseph			STREET ADDRESS 1325 East Linda Vista Drive			CITY		STATE ZIP	Flagstaff, AZ		86004	OCCUPATION Retired	EMPLOYER Retired		2/7/12	100.00	100.00
LAST	FIRST	MI																				
Donaldson Joseph																						
STREET ADDRESS 1325 East Linda Vista Drive																						
CITY		STATE ZIP																				
Flagstaff, AZ		86004																				
OCCUPATION Retired	EMPLOYER Retired																					
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 Coral4Flagstaff

3. Report covering period from 1/1/2012 thru 2/22/2012

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																		
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																					
4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">D & G La Fonda Mexican Foods Inc</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1900 North Second Street</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ 86004</td> <td></td> </tr> <tr> <td>OCCUPATION Business</td> <td colspan="2">EMPLOYER La Fonda</td> </tr> </table>	LAST	FIRST	MI	D & G La Fonda Mexican Foods Inc			STREET ADDRESS 1900 North Second Street			CITY	STATE	ZIP	Flagstaff, AZ 86004			OCCUPATION Business	EMPLOYER La Fonda		2/10/12	200.00	200.00
LAST	FIRST	MI																				
D & G La Fonda Mexican Foods Inc																						
STREET ADDRESS 1900 North Second Street																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86004																						
OCCUPATION Business	EMPLOYER La Fonda																					
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Bruce Nordstrom</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1600 North Mariposa Road</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ 86004</td> <td></td> </tr> <tr> <td>OCCUPATION CPA</td> <td colspan="2">EMPLOYER Nordstrom & Assoc</td> </tr> </table>	LAST	FIRST	MI	Bruce Nordstrom			STREET ADDRESS 1600 North Mariposa Road			CITY	STATE	ZIP	Flagstaff, AZ 86004			OCCUPATION CPA	EMPLOYER Nordstrom & Assoc		2/12/12	100.00	100.00
LAST	FIRST	MI																				
Bruce Nordstrom																						
STREET ADDRESS 1600 North Mariposa Road																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86004																						
OCCUPATION CPA	EMPLOYER Nordstrom & Assoc																					
c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Ryan Matthew G</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1384 West Cox Avenue</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ 86001</td> <td></td> </tr> <tr> <td>OCCUPATION County Supervisor</td> <td colspan="2">EMPLOYER Coconino County</td> </tr> </table>	LAST	FIRST	MI	Ryan Matthew G			STREET ADDRESS 1384 West Cox Avenue			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION County Supervisor	EMPLOYER Coconino County		2/14/12	40.00	40.00
LAST	FIRST	MI																				
Ryan Matthew G																						
STREET ADDRESS 1384 West Cox Avenue																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86001																						
OCCUPATION County Supervisor	EMPLOYER Coconino County																					
d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Souris Mike</td> </tr> <tr> <td colspan="3">STREET ADDRESS 1602 North Wakonda Street</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ 86004</td> <td></td> </tr> <tr> <td>OCCUPATION Real Estate Investor</td> <td colspan="2">EMPLOYER Self Employed</td> </tr> </table>	LAST	FIRST	MI	Souris Mike			STREET ADDRESS 1602 North Wakonda Street			CITY	STATE	ZIP	Flagstaff, AZ 86004			OCCUPATION Real Estate Investor	EMPLOYER Self Employed		2/14/12	100.00	100.00
LAST	FIRST	MI																				
Souris Mike																						
STREET ADDRESS 1602 North Wakonda Street																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86004																						
OCCUPATION Real Estate Investor	EMPLOYER Self Employed																					
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Kinne-Herman Karen</td> </tr> <tr> <td colspan="3">STREET ADDRESS 2240 N. Fremont Blvd.</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ 86001</td> <td></td> </tr> <tr> <td>OCCUPATION Fundraiser</td> <td colspan="2">EMPLOYER Self Employed</td> </tr> </table>	LAST	FIRST	MI	Kinne-Herman Karen			STREET ADDRESS 2240 N. Fremont Blvd.			CITY	STATE	ZIP	Flagstaff, AZ 86001			OCCUPATION Fundraiser	EMPLOYER Self Employed		2/16/12	80.00	80.00
LAST	FIRST	MI																				
Kinne-Herman Karen																						
STREET ADDRESS 2240 N. Fremont Blvd.																						
CITY	STATE	ZIP																				
Flagstaff, AZ 86001																						
OCCUPATION Fundraiser	EMPLOYER Self Employed																					
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]																					

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name Coral4Flagstaff

3. Report covering period from 1/1/2012 thru 2/22/2012

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>Evans Coral</td> <td></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">518 South O'Leary Street</td> </tr> <tr> <td colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Executive Director</td> <td colspan="2">Sunnyside Neighborhood Association</td> </tr> </table>	LAST	FIRST	MI	Evans Coral			STREET ADDRESS			518 South O'Leary Street			CITY		STATE ZIP	Flagstaff, AZ		86001	OCCUPATION	EMPLOYER		Executive Director	Sunnyside Neighborhood Association		2/21/12	100.00	232.00
LAST	FIRST	MI																										
Evans Coral																												
STREET ADDRESS																												
518 South O'Leary Street																												
CITY		STATE ZIP																										
Flagstaff, AZ		86001																										
OCCUPATION	EMPLOYER																											
Executive Director	Sunnyside Neighborhood Association																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Grandon David P</td> <td></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">659 Walpi Ovi</td> </tr> <tr> <td colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2">Flagstaff, AZ</td> <td>86001</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Artist</td> <td colspan="2">Self Employed</td> </tr> </table>	LAST	FIRST	MI	Grandon David P			STREET ADDRESS			659 Walpi Ovi			CITY		STATE ZIP	Flagstaff, AZ		86001	OCCUPATION	EMPLOYER		Artist	Self Employed		2/21/12	100.00	100.00
LAST	FIRST	MI																										
Grandon David P																												
STREET ADDRESS																												
659 Walpi Ovi																												
CITY		STATE ZIP																										
Flagstaff, AZ		86001																										
OCCUPATION	EMPLOYER																											
Artist	Self Employed																											
c.	<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 colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2"></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																											
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 colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2"></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 colspan="2">CITY</td> <td>STATE ZIP</td> </tr> <tr> <td colspan="2"></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]		2729.00	2829.00																								

*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

Coral4Flagstaff

2. ID #

1. Committee Name _____

3. Report covering period from 1/1/2012 thru 2/22/2012

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
5 Contributions of \$25 or less thru 2/22/12	120.00	120.00	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	120.00	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	120.00

*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 Coral4Flagstaff

2. ID #

3. Report covering period from 1/1/2012 thru 2/22/2012

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	0.00	0.00
	DATE RECEIVED			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
i.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	0.00	0.00
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B <i>[If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]</i>		0.00	0.00

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Coral4Flagstaff	2. ID #		
3.	Report covering period from <u>1/1/2012</u> thru <u>2/22/2012</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		0.00	0.00
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00	0.00
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00	0.00
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00	0.00
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00	0.00
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00	0.00
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]		0.00	0.00

OTHER LOANS

SCHEDULE C1

1. Committee Name Coral4Flagstaff

2. ID #

3. Report covering period from 1/1/2012 thru 2/22/2012

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#		0.00	0.00
	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#		0.00	0.00
	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#		0.00	0.00
	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#		0.00	0.00
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A]		0.00	0.00

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID #

1. Committee Name Coral4Flagstaff

3. Report covering period from 1/1/2012

thru 2/22/2012

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 Office Max 4601 E Marketplace Flagstaff, AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Business Cards	1/11/12	100.00
b.	NAME, ADDRESS, CITY, STATE AND ZIP Office Max 4601 E Marketplace Flagstaff, AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing of Flyers	1/30/12	164.38
c.	NAME, ADDRESS, CITY, STATE AND ZIP Coconino County Democratic Party 201 E Birch Ave Suite A Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Tamale Sale Booth (3/3/12)	2/7/12	25.00
d.	NAME, ADDRESS, CITY, STATE AND ZIP Planned Parenthood 1304 South Plaza Way Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Ticket to Planned Parenthood Reception	2/8/12	40.00
e.	NAME, ADDRESS, CITY, STATE AND ZIP Flagstaff Cultural Partners 2300 North Fort Valley Road, Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Viola awards ticket	2/9/12	54.00
f.	NAME, ADDRESS, CITY, STATE AND ZIP Safeway 1201 South Plaza Way Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Food for campaign volunteers	2/13/12	44.96
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 Coral4Flagstaff

3. Report covering period from 1/1/2012 thru 2/22/2012

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 SpeedySigns USA 162 SW Spencer Court Lake City, FL 32024 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Signs	2/14/12	650.00
b.	NAME, ADDRESS, CITY, STATE AND ZIP Safeway 1201 South Plaza Way Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Food for campaign volunteers	2/21/12	10.90
c.	NAME, ADDRESS, CITY, STATE AND ZIP Flagstaff Chamber 101 West Route 66 Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Newsletter Ad	2/21/12	75.00
d.	NAME, ADDRESS, CITY, STATE AND ZIP PayPal 2211 North First Street San Jose, CA 95131 DESCRIPTION OF ITEMS OR SERVICES PURCHASED PayPal fees thru 2/22/12	2/22/12	8.98
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]		1173.22

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name Coral4Flagstaff

2. ID #

3. Report covering period from 1/1/2012

thru 2/22/2012

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		0.00
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		0.00
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		0.00
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]		0.00

*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.

Coral Ewins
Signature of Treasurer

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

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

2. ID #

1. Committee Name Coral4Flagstaff

3. Report covering period from 1/1/2012 thru 2/22/2012

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		0.00
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
	DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A]		0.00

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Coral4Flagstaff

2. ID #

3. Report covering period from 1/1/2012 thru 2/22/2012

	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		0.00
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		0.00
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		0.00

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

Coral4Flagstaff

2. ID# 0.00

1. Committee Name _____

3. Report covering period from 1/1/2012 thru 2/22/2012

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#		0.00
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		0.00

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID #

1. Committee Name Coral4Flagstaff

3. Report covering period from 1/1/2012 thru 2/22/2012

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#		0.00
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
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 Coral4Flagstaff

2. ID#

3. Report covering period from 1/1/2012 thru 2/22/2012

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#		0.00
	DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
	DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
	DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
	DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		0.00
	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 Coral4Flagstaff

2. ID #

3. Report covering period from 1/1/2012 thru 2/22/2012

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%; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 2px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 2px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 2px;">OCCUPATION</td> <td style="padding: 2px;">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		0.00
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%; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 2px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 2px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 2px;">OCCUPATION</td> <td style="padding: 2px;">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		0.00
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%; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 2px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 2px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 2px;">OCCUPATION</td> <td style="padding: 2px;">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		0.00
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%; padding: 2px;">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td style="padding: 2px;"> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2" style="padding: 2px;">DESCRIPTION</td> </tr> <tr> <td style="padding: 2px;">OCCUPATION</td> <td style="padding: 2px;">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>	DESCRIPTION		OCCUPATION	EMPLOYER		0.00
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]		0.00						
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]		0.00						

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Coral4Flagstaff

2. ID #

3. Report covering period from 1/1/2012 thru 2/22/2012

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		0.00
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		0.00
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		0.00
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		0.00
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		0.00
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		0.00
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 <i>(If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A)</i>		0.00

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name Coral4Flagstaff

2. ID #

3. Report covering period from 1/1/2012 thru 2/22/2012

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#					0.00
	DESCRIPTION OF DEBT					
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					0.00
	DESCRIPTION OF DEBT					
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					0.00
	DESCRIPTION OF DEBT					
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					0.00
	DESCRIPTION OF DEBT					
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#					0.00
	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 Aj					0.00