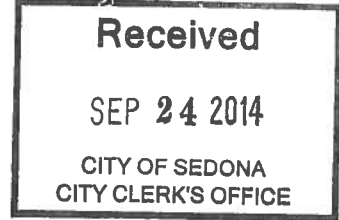


POLITICAL COMMITTEE
CITY/TOWN OF SEDONA
CAMPAIGN FINANCE REPORT
2014 August/November Regular Election

FOR OFFICE USE ONLY



1. Jon Thompson for City Council
Full Name of Committee
15 ORAL CT.
Address
SEDONA, AZ 86336 YAVAPAI 928-284-3942
City ZIP Code County Phone

2. Jon Thompson
Sponsoring Organization or Candidate and office
Jon Thompson Sedona City Council
Name of Candidate and Office Sought (if applicable)
SedonaJov@me.com 928-284-3942
E-Mail Address Fax #

3A. ID# C2014-02

Primary

General

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

January 31 Report - For Period of _____ * thru December 31, 2013 January 1, 2014 and January 31, 2014

June 30 Report - For Period of January 1, 2014 thru May 31, 2014 June 1, 2014 and June 30, 2014

Pre-Primary Election Report - For Period of June 1, 2014 thru August 14, 2014 August 15, 2014 and August 22, 2014

Post-Primary Election Report - For Period of August 15, 2014 thru September 15, 2014 September 16, 2014 and September 25, 2014

Pre-General Election Report - For Period of September 16, 2014 thru October 23, 2014 October 24, 2014 and October 31, 2014

Post-General Election Report - For Period of October 24, 2014 thru November 24, 2014 November 25, 2014 and December 4, 2014

**January 31, Report - For Period of November 25, 2014 thru December 31, 2015 January 1, 2016 and January 31, 2016

| 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 |
| 5b Cash on Hand at the Beginning of this Reporting Period | \$ 2911.74 | |
| 5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8) | \$ 540.00 | \$ 10,206.07 |
| 5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B] | \$ 3451.74 | \$ 10,206.07 |
| 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) | \$ 3451.74 | \$ 10,206.07 |
| 7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d] | \$ 0 | \$ 0 |

*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: Jon Thompson For City Council
 3. Report covering period from 8/15/14 Thru 9/15/14

| | |
|-------------------------------------|---------|
| 2. ID# <u>C2014-02</u> | |
| <input checked="" type="checkbox"/> | Primary |
| <input 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) | \$ 540.00 | \$ 8250.00 |
| (b) Individuals - aggregate \$50 or less (Total from Schedule A-1) | - | - |
| (c) Political Committees (Total from Schedule B) | - | - |
| (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)] | \$ 540.00 | \$ 8250.00 |
| (e) Refund of contributions (Total from Schedule F-2) <u>1)</u> | - | - |
| (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)] | \$ 540.00 | \$ 8250.00 |
| 5. (a) Loans made or guaranteed by candidate (Total from Schedule C) | - | \$ 1450.00 |
| (b) All other loans (Total from Schedule C-1) | - | - |
| (c) Total Loans [add 5(a) and 5(b)] | - | \$ 1450.00 |
| 6. In-kind contributions (Total from Schedule E) | - | 506.97 |
| 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1) | - | - |
| 8. Total Receipts [add 4(f), 5(c), 6, and 7] | \$ 540.00 | \$ 10,206.97 |
| | | |
| DISBURSEMENTS | | |
| 9. Expenditures for operating expenses (Total from Schedule D) | \$ 2874.51 | \$ 9122.77 |
| 10. Independent Expenditures (Total from Schedule D-1) | - | - |
| 11. Value of In-kind expenditures (Total from Schedule E) | - | \$ 506.67 |
| 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) | \$ 597.32 | \$ 597.32 |
| (b) Repayment of all other loans (Total from Schedule D-5) | - | - |
| (c) Total Loan Repayments [add 13(a) and 13(b)] | \$ 597.32 | \$ 597.32 |
| 14. Transfers to other political committees (Total from Schedule D-6) | - | 0 |
| 15. Any other disbursement (Total from Schedule D-7) | - | - |
| 16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15] | \$ 3471.83 | \$ 10,227.06 |
| 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) | \$ 20.09 | \$ 20.09 |
| 18. Total disbursements [subtract line 17 from line 16] | \$ 3451.74 | \$ 10,206.97 |
| 19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3) | 0 | 0 |

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.

Kenneth J ZRAIK
 Type or Print Name of Treasurer

[Signature]
 Signature of Treasurer or Candidate or Designating Individual

9/22/14
 Date

1) EXCLUDES LOAN FORGIVEN OF \$ 852.68 - See Schedule F-2

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

| | |
|-------------------------------------|---------|
| 2. ID# C2014-02 | |
| <input checked="" type="checkbox"/> | Primary |
| <input type="checkbox"/> | General |

1. Committee Name Jon Thompson For City Council

3. Report covering period from 8/15/14 thru 9/15/14

| 4 | CONTRIBUTIONS | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------------|-----------------------------|--|----------------|----------------|--|----------------|--|--|---------------------------|--|--|------|-------|-----|---------------|-----------|--------------|------------|----------|--|---------------------------|----------------|--|----------------|---------------|---------------|
| NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4a. | <table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td><u>King</u></td> <td><u>Emilove</u></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"><u>700 MORNING SUN DR</u></td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td><u>Sedona</u></td> <td><u>AZ</u></td> <td><u>86336</u></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td><u>Retired</u></td> <td colspan="2"><u>NA</u></td> </tr> </table> | LAST | FIRST | MI | <u>King</u> | <u>Emilove</u> | | STREET ADDRESS | | | <u>700 MORNING SUN DR</u> | | | CITY | STATE | ZIP | <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | OCCUPATION | EMPLOYER | | <u>Retired</u> | <u>NA</u> | | <u>8/15/14</u> | <u>25.00</u> | <u>25.00</u> |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>King</u> | <u>Emilove</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>700 MORNING SUN DR</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Retired</u> | <u>NA</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. | <table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td><u>Johnson</u></td> <td><u>Ford</u></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"><u>360 ANTELOPE DR</u></td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td><u>Sedona</u></td> <td><u>AZ</u></td> <td><u>86336</u></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td><u>Retired</u></td> <td colspan="2"><u>NA</u></td> </tr> </table> | LAST | FIRST | MI | <u>Johnson</u> | <u>Ford</u> | | STREET ADDRESS | | | <u>360 ANTELOPE DR</u> | | | CITY | STATE | ZIP | <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | OCCUPATION | EMPLOYER | | <u>Retired</u> | <u>NA</u> | | <u>8/15/14</u> | <u>7.50</u> | <u>7.50</u> |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Johnson</u> | <u>Ford</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>360 ANTELOPE DR</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Retired</u> | <u>NA</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. | <table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td><u>Johnson</u></td> <td><u>Annette</u></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"><u>360 ANTELOPE DR</u></td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td><u>Sedona</u></td> <td><u>AZ</u></td> <td><u>86336</u></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td><u>Retired</u></td> <td colspan="2"><u>NA</u></td> </tr> </table> | LAST | FIRST | MI | <u>Johnson</u> | <u>Annette</u> | | STREET ADDRESS | | | <u>360 ANTELOPE DR</u> | | | CITY | STATE | ZIP | <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | OCCUPATION | EMPLOYER | | <u>Retired</u> | <u>NA</u> | | <u>8/15/14</u> | <u>7.50</u> | <u>7.50</u> |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Johnson</u> | <u>Annette</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>360 ANTELOPE DR</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Retired</u> | <u>NA</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. | <table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td><u>Gilomen</u></td> <td><u>Tom</u></td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3"><u>267 View Denen Rd</u></td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td><u>Sedona</u></td> <td><u>AZ</u></td> <td><u>86336</u></td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td><u>Investor / Retired</u></td> <td colspan="2"><u>BM SELF</u></td> </tr> </table> | LAST | FIRST | MI | <u>Gilomen</u> | <u>Tom</u> | | STREET ADDRESS | | | <u>267 View Denen Rd</u> | | | CITY | STATE | ZIP | <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | OCCUPATION | EMPLOYER | | <u>Investor / Retired</u> | <u>BM SELF</u> | | <u>8/15/14</u> | <u>500.00</u> | <u>500.00</u> |
| LAST | FIRST | MI | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Gilomen</u> | <u>Tom</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>267 View Denen Rd</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | STATE | ZIP | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Sedona</u> | <u>AZ</u> | <u>86336</u> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCCUPATION | EMPLOYER | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>Investor / Retired</u> | <u>BM SELF</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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) | | <u>540.00</u> | <u>540.00</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.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

| | |
|-------------------------------------|----------|
| 2. ID# | C2014-02 |
| <input checked="" type="checkbox"/> | Primary |
| <input type="checkbox"/> | General |

1. Committee Name Jon Thompson For City Council

3. Report covering period from 8/15/14 thru 9/15/14

| 4 | EXPENDITURES | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|-----|--|-----------------------|---------------------------|
| 4a. | <p>NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE</p> <p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>HANGULISH NETWORKS PO BOX 359 Sedona, AZ 86339-0359</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p> <p>PRINTING + MAILING POSTCARDS</p> | 8/22/14 | 2539.51 |
| 4b. | <p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>ART LINE GRAPHICS 2756 W 512 S 9A Sedona, AZ 86336</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p> <p>DESIGN POSTCARD</p> | 8/25/14 | 320.00 |
| 4c. | <p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>BANK OF AMERICA 1776 W 512 89 A Sedona, AZ 86336</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p> <p>MONTHLY SERVICE CHARGE</p> | 9/2/14 | 15.00 |
| 4d. | <p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p> | | |
| 4e. | <p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p> | | |
| 4f. | <p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p> | | |
| 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] | | 2874.51 |

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

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

| | |
|-------------------------------------|---------|
| 2. ID# C2014-02 | |
| <input checked="" type="checkbox"/> | Primary |
| <input type="checkbox"/> | General |

1. Committee Name JON THOMPSON FOR CITY COUNCIL

3. Report covering period from 8/15/14 thru 9/15/14

| REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES | | DATE REFUND RECEIVED | AMOUNT OF THE REFUND |
|--|--|----------------------|----------------------|
| NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED | | | |
| 4a. | NAME, ADDRESS, CITY, STATE, AND ZIP <u>JON THOMPSON</u> <u>15 ORAL CT</u> <u>SUMMIT, AL 36386</u> | <u>9/12/14</u> | <u>20.09</u> |
| | DESCRIPTION OF REFUND <u>PURCHASED 41 UNUSED BUSINESS STAMPS FROM COMMITTEE</u> | | |
| 4b. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| 4c. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| 4d. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| 4e. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| 4f. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 (If last page of Schedule D-3, [transfer total to Detailed Summary Page Line 17 Column A])

* Includes return of contributions made by reporting committee

20.09

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

| | |
|-------------------------------------|---------|
| 2. ID# C 2014-02 | |
| <input checked="" type="checkbox"/> | Primary |
| <input type="checkbox"/> | General |

1. Committee Name JUN THOMPSON FOR CITY COUNCIL

3. Report covering period from 8/15/14 thru 9/15/14

| 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 JUN THOMPSON 15 OPAL ET SIDMOR, AZ 86336 | 9/12/14 | 597.32 |
| 4b. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| 4c. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| 4d. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| 4e. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| 4f. | 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] | | | 597.32 |

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

| | |
|-------------------------------------|----------|
| 2. ID# | C2014-02 |
| <input checked="" type="checkbox"/> | Primary |
| <input type="checkbox"/> | General |

1. Committee Name JON THOMPSON FOR CITY COUNCIL

3. Report covering period from 8/15/14 thru 9/15/14

| 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 | | |
| 4a. | <p>NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>JON THOMPSON</u> <u>15 OPAL CT</u> <u>SEDONA, AZ 86336</u></p> <p>DESCRIPTION OF REFUND <u>FORGIVE BALANCE OF CAMDIONE LOAN</u> <u>\$1450</u> <u>\$547.32 interest PAID</u> <u>\$852.68 FORGIVEN</u></p> | <u>9/12/14</u> | <u>\$852.68</u> <u>LOAN</u> <u>FORGIVEN</u> <u>NOT</u> <u>PAID</u> |
| 4b. | <p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF REFUND</p> | | |
| 4c. | <p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF REFUND</p> | | |
| 4d. | <p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF REFUND</p> | | |
| 4e. | <p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF REFUND</p> | | |
| 4f. | <p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION OF REFUND</p> | | |

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

\$852.68 FORGIVEN