POLITICAL COMMITTEE
CITY OF COTTONWOOD
CAMPAIGN FINANCE REPORT
2016 August/November Regular Election

FOR OFFICE USE ONLY

CITY OF COTTONWOOD RECEIVED AUG 26 2016

1. Henry for City Council
Full Name of Committee

PO Box 3192
Address

Cottonwood 86326 Yavapai 928-649-8777
City ZIP Code County Phone

2.
Sponsoring Organization or Candidate and office

Name of Candidate and Office Sought (if applicable)

E-Mail Address Fax #

3A. ID#

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

- [ ] January 31 Report - For Period of _____* thru December 31, 2015 ..... January 1, 2016 and February 1, 2016
- [ ] June 30 Report - For Period of January 1, 2016 thru May 31, 2016 ..... June 1, 2016 and June 30, 2016
- [x] Pre-Primary Election Report - For Period of June 1, 2016 thru August 18, 2016 ..... August 19, 2016 and August 26, 2016
- [ ] Post-Primary Election Report - For Period of August 19, 2016 thru September 19, 2016 ..... September 20, 2016 and September 29, 2016
- [ ] Pre-General Election Report - For Period of September 20, 2016 thru October 27, 2016 ..... October 28, 2016 and November 4, 2016
- [ ] Post-General Election Report - For Period of October 28, 2016 thru November 28, 2016 ..... November 29, 2016 and December 8, 2016
- [ ] **January 31, Report - For Period of November 29, 2016 thru December 31, 2017 ..... January 1, 2018 and January 31, 2018

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	450.00	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	1500.00	1500.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	1950	1950
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)	1330.62	1330.62
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	619.38	619.38

*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.

CITY OF COTTONWOOD
RECEIVED
AUG 21 2015

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

1. Committee Name: Henry for City Council

2. ID#

3. Report covering period from 7/21/16 Thru 8/18/16

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)	1000.00	1000.00
(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)]		
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	500.00	500.00
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]	1500.00	1500.00
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	1330.62	1330.62
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	1330.62	1330.62
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	1330.62	1330.62
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		

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

Coleen K. Gilboy

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

8/26/16

Date

CONTRIBUTIONS more than $50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

1. Committee Name Henry for City Council

3. Report covering period from 7/21/16 - 8/13/16 thru

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST: Henry FIRST: Grazie MI: STREET ADDRESS: 4901 Cameron Ranch Dr CITY: Carmichael STATE: CA ZIP: 95608 OCCUPATION: mother EMPLOYER:	7/25/16	500.00	500.00
b.	LAST: Henry FIRST: Weiland MI: STREET ADDRESS: 4901 Cameron Ranch Rd CITY: Carmichael STATE: CA ZIP: 95608 OCCUPATION: Father EMPLOYER:	7/25/16	500.00	500.00
c.	LAST: FIRST: MI: STREET ADDRESS: CITY: STATE: ZIP: OCCUPATION: EMPLOYER:			
d.	LAST: FIRST: MI: STREET ADDRESS: CITY: STATE: ZIP: OCCUPATION: EMPLOYER:			
e.	LAST: FIRST: MI: STREET ADDRESS: CITY: STATE: ZIP: OCCUPATION: EMPLOYER:			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		1000.00	1000.00

*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#

1. Committee Name Henry for City Council

3. Report covering period from 7/21/16 - 8/18/16 thru

4	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Signs on The Cheap.com 11500 Stonehollow Dr Austin, TX 78758 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Election Signs	7/21/16	343.76
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Ragtime 375 S. 6th Street Cottonwood, AZ 86326 DESCRIPTION OF ITEMS OR SERVICES PURCHASED T-Shirts	7/21/16	164.03
4c.	NAME, ADDRESS, CITY, STATE AND ZIP Trophies Unlimited 525 S. main St Cottonwood AZ 86326 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Buttons	7/27/16	173.34
4d.	NAME, ADDRESS, CITY, STATE AND ZIP Bozeman Printing 702 W. main St. Bozeman, MT 59715 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Posters	7/27/16	333.07
4e.	NAME, ADDRESS, CITY, STATE AND ZIP Signs on The Cheap.com 11500 Stonehollow D Austin, TX 78758 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Election Signs	8/12/16	306.52
4f.	NAME, ADDRESS, CITY, STATE AND ZIP Wells Fargo PO Box 6995 Portland, OR 97228-6995 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	8/15/16	10.00
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]		1,330.62

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

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 ☐ Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE ☐ Benefitted ☐ Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE ☐ Benefitted ☐ Opposed 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]		

*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

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name: Henry for City Council		2. ID #	
3.	Report covering period from 7/21/16 thru 8/18/16			
4.	LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS FROM WHOM RECEIVED	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP TOSCA Henry, PO Box 3192, Cottonwood AZ 86326	7/19/16	500.00	500.00
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]		500.00	500.00

OTHER LOANS

SCHEDULE C1

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

4	ALL OTHER LOANS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
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]			