

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

FOR OFFICE USE ONLY

08-23-16P04:35 RCVD

1. Write In Ginny Dickey for Mayor
 Full Name of Committee
13227 N. Mimosa Dr., #112
 Address
Fountain Hills, Az 85268 Maricopa 480 837 2805
 City ZIP Code County Phone
 2. Ginny Dickey, Mayor
 Sponsoring Organization or Candidate and office
Ginny Dickey, Mayor
 Name of Candidate and Office Sought (if applicable)
jim51050@outlook.com 480 837 2805
 E-Mail Address Fax #

3A. ID#
 PC2016-04

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
- 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)	\$0.00	\$0.00
5b Cash on Hand at the Beginning of this Reporting Period	\$0.00	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$13526.75	\$13526.75
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	\$13526.75	\$13526.75
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)	\$10102.73	\$10102.73
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	\$3424.02	\$3424.02

*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: Write in Gny Dickey for Mayor
 3. Report covering period from 6/1/2016 Thru 8/18/16

2. ID# PC2016-04

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)	\$10,705.75	\$10705.75
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	\$2001.00	\$2001.00
(c) Political Committees (Total from Schedule B)	\$0.00	\$0.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	\$0.00	\$0.00
(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)]	\$0.00	\$0.00
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)	\$820.00	\$820.00
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]	\$13526.75	\$13526.75
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	\$9282.73	\$9282.73
10. Independent Expenditures (Total from Schedule D-1)	\$0.00	\$0.00
11. Value of In-kind expenditures (Total from Schedule E)	\$820.00	\$820.00
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]	\$10102.73	\$10102.73
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]	\$10102.73	\$10102.73
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.

Jim Dickey Type or Print Name of Treasurer	8/23/16 Date
Signature of Treasurer or Candidate or Designating Individual	

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor
3. Report covering period from 6/1/16 thru 8/18/16

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			
4a.	LAST FIRST MI Dickey, Virginia G.	7/11/16	\$4.00	\$214.38
	STREET ADDRESS 13227 N. Mimosa Drive, #112	7/11/16	\$49.86	
	CITY STATE ZIP Fountain Hills, Az 85268	7/14/16	\$19.00	
	OCCUPATION EMPLOYER Retired Retired	7/15/16	\$49.86	
		7/20/16	\$9.50	
		7/24/16	\$70.76	
		7/25/16	\$11.40	
b.	LAST FIRST MI Dickey, Virginia	7/18/16	\$84.22	\$509.37
	STREET ADDRESS 13227 N. Mimosa Drive #112	7/27/16	\$300.00	
	CITY STATE ZIP Fountain Hills, Az 85268	7/28/16	\$50.67	
	OCCUPATION EMPLOYER Retired Retired	8/2/16	\$31.03	
		8/11/16	\$3.80	
		8/17/16	\$39.65	
c.	LAST FIRST MI Zinn, Sandra	7/11/16	\$100.	\$100
	STREET ADDRESS P.O. Box 19925			
	CITY STATE ZIP Fountain Hills, Az 85268			
	OCCUPATION EMPLOYER Retired -			
d.	LAST FIRST MI Archambault, Mike	7/11/16	\$300	\$300
	STREET ADDRESS 15033 El Sobrante Ave			
	CITY STATE ZIP Fountain Hills, Az 85268			
	OCCUPATION EMPLOYER Self Employed Handyman Now LLC			
e.	LAST FIRST MI Mousseux, Renate	7/12/16	\$100	\$100
	STREET ADDRESS 15611 N. Boulder Dr			
	CITY STATE ZIP Fountain Hills, Az. 85268			
	OCCUPATION EMPLOYER Body Language Expert 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 \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

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d.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Caputi, Tammy</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">8522 E. Tether Trail</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Scottsdale, Az 85255</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Owner</td> <td colspan="2">Yale Electric Company</td> </tr> </table>	LAST	FIRST	MI	Caputi, Tammy			STREET ADDRESS			8522 E. Tether Trail			CITY	STATE	ZIP	Scottsdale, Az 85255			OCCUPATION	EMPLOYER		Owner	Yale Electric Company		7/16	\$250.00	\$250.00
LAST	FIRST	MI																										
Caputi, Tammy																												
STREET ADDRESS																												
8522 E. Tether Trail																												
CITY	STATE	ZIP																										
Scottsdale, Az 85255																												
OCCUPATION	EMPLOYER																											
Owner	Yale Electric Company																											
e.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Riske, Carolyn</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">14921 E Zapata Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</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	Riske, Carolyn			STREET ADDRESS			14921 E Zapata Dr			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	-		7/16/16	\$100.00	\$100.00
LAST	FIRST	MI																										
Riske, Carolyn																												
STREET ADDRESS																												
14921 E Zapata Dr																												
CITY	STATE	ZIP																										
Fountain Hills, Az 85268																												
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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]																											

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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor
3. Report covering period from 6/1/16 thru 8/18/16

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR					
4a.	LAST	FIRST	MI	7/16/16	\$75.00	\$75.00
	Daniels, Bob					
	STREET ADDRESS 17438 E. Brantley Dr					
	CITY	STATE	ZIP			
Fountain Hills, Az 85268						
OCCUPATION		EMPLOYER				
Retired		-				
b.	LAST	FIRST	MI	7/16/16	\$100.00	\$100.00
	Stasik, Valerie					
	STREET ADDRESS 11015 N. Inca Ave					
	CITY	STATE	ZIP			
Fountain Hills, Az 85268						
OCCUPATION		EMPLOYER				
Executive Director		Fountain Hills Theater				
c.	LAST	FIRST	MI	7/16/16	\$150.00	\$150.00
	Segal, Elizabeth					
	STREET ADDRESS 13771 Fountain Hills Blvd #357					
	CITY	STATE	ZIP			
Fountain Hills, Az 85268						
OCCUPATION		EMPLOYER				
Retired		-				
d.	LAST	FIRST	MI	7/16/16	\$100.00	\$100.00
	Creta, Rina					
	STREET ADDRESS 10835 N.Indian Wells Dr					
	CITY	STATE	ZIP			
Fountain Hills, Az 85268						
OCCUPATION		EMPLOYER				
Self Employed		Accountant				
e.	LAST	FIRST	MI	7/14/16 7/18/16 8/10/16	\$50.00 \$100.00 \$50.00	\$200.00
	Schweers, Ann					
	STREET ADDRESS 15026 N. Tamarack Ln					
	CITY	STATE	ZIP			
Fountain Hills, Az 85268						
OCCUPATION		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]					

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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
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4a.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Tam, Dennis</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">12617 N. Mimosa Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</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	Tam, Dennis			STREET ADDRESS			12617 N. Mimosa Dr			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	-		7/19/16	\$500.00	\$500.00
LAST	FIRST	MI																										
Tam, Dennis																												
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Fountain Hills, Az 85268																												
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Retired	-																											
b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Molle, Lisa</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">14649 N. Fairlynn Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</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	Molle, Lisa			STREET ADDRESS			14649 N. Fairlynn Dr			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	-		7/19/16	\$100.00	\$100.00
LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Post, Dianne Lynn</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1826 E. Willetta St.,</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, Az</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Lawyer</td> <td colspan="2">Self-Employed</td> </tr> </table>	LAST	FIRST	MI	Post, Dianne Lynn			STREET ADDRESS			1826 E. Willetta St.,			CITY	STATE	ZIP	Phoenix, Az			OCCUPATION	EMPLOYER		Lawyer	Self-Employed		7/20/16	100.00	\$100.00
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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR					
4a.	LAST Glink, Margaret	FIRST Margaret	MI 	7/20/16	\$150.00	\$150.00
	STREET ADDRESS 19050 E. Tonto Trail					
	CITY Fountain Hills, Az		STATE 85268	ZIP 		
	OCCUPATION Retired	EMPLOYER -				
b.	LAST Colleran, Eileen	FIRST Eileen	MI 	7/20/16	\$100.00	\$100.00
	STREET ADDRESS 605 W. Santa Cruz Dr					
	CITY Tempe, Az		STATE 85282	ZIP 		
	OCCUPATION Staff	EMPLOYER ADOT				
c.	LAST Michaels, Mary Anne	FIRST Mary Anne	MI 	7/20/16	\$200.00	\$200.00
	STREET ADDRESS 9617 N. Saguaro Blvd					
	CITY Fountain Hills, Az		STATE 85268	ZIP 		
	OCCUPATION Realtor	EMPLOYER MCO				
d.	LAST Cox, Lezlie	FIRST Lezlie	MI 	7/23/16 8/1/16	\$200.00 \$27.00	\$227.00
	STREET ADDRESS 17506 San Paulo Pl					
	CITY Fountain Hills, Az		STATE 85268	ZIP 		
	OCCUPATION Retired	EMPLOYER -				
e.	LAST Blackwell, Darlene	FIRST Darlene	MI 	7/23/16	\$100.00	\$100.00
	STREET ADDRESS 14653 N Armijo Drive					
	CITY Fountain Hills, Az		STATE 85268	ZIP 		
	OCCUPATION Retired	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(2), Column A]					

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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-4

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
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Retired	-																											
b.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Mitchell, Harry</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1222 E. Verlea Drive</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Tempe, Az. 85282</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	Mitchell, Harry			STREET ADDRESS			1222 E. Verlea Drive			CITY	STATE	ZIP	Tempe, Az. 85282			OCCUPATION	EMPLOYER		Retired	-		7/23/16	\$100.00	\$100.00
LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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Retired	-																											
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LAST	FIRST	MI																										
Russo, Vincent																												
STREET ADDRESS																												
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SCHEDULE A

2. ID#
PC2016-4

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3. Report covering period from 6/1/16 thru 8/18/16

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LAST	FIRST	MI																										
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15648 E. Grassland Drive																												
CITY	STATE	ZIP																										
Fountain Hills, Az 85268																												
OCCUPATION	EMPLOYER																											
Retired	-																											
e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Brown, Marty</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">15615 E. Jamaica Lane</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</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	Brown, Marty			STREET ADDRESS			15615 E. Jamaica Lane			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	-		7/23	\$200.00	\$200.00
LAST	FIRST	MI																										
Brown, Marty																												
STREET ADDRESS																												
15615 E. Jamaica Lane																												
CITY	STATE	ZIP																										
Fountain Hills, Az 85268																												
OCCUPATION	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]																											

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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR				
4a.	LAST	FIRST MI	7/23/16	\$100.00	\$100.00
	Miller, Becky				
	STREET ADDRESS 6150 N.28th Street				
	CITY STATE ZIP Phoenix, Az 85016				
OCCUPATION Director		EMPLOYER AzTA			
b.	LAST	FIRST MI	7/25/16	\$150.00	\$150.00
	Male, Donna				
	STREET ADDRESS 15241 E. Aspen Dr				
	CITY STATE ZIP Fountain Hills, Az 85268				
OCCUPATION Teacher		EMPLOYER FHUSD			
c.	LAST	FIRST MI	7/25/16	\$100.00	\$100.00
	Robinson, Mary Lou				
	STREET ADDRESS 103 E. College Ave				
	CITY STATE ZIP Appleton, Wi 54911				
OCCUPATION Retired		EMPLOYER -			
d.	LAST	FIRST MI	7/28/16	\$1000.00	\$1000.00
	Steinmetz, Mark				
	STREET ADDRESS 8143 E. Quarterhorse Trail				
	CITY STATE ZIP Scottsdale, Az 85258				
OCCUPATION Self Employed		EMPLOYER Sixth Sense Enterprises			
e.	LAST	FIRST MI	7/30/16	\$100.00	\$100.00
	Pany, Darlene				
	STREET ADDRESS 7445 S. Rita Lane				
	CITY STATE ZIP Tempe, Az. 85283				
OCCUPATION Retired		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(2), Column A]				

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

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-4

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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 colspan="3">Getty, Paul</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">15055 N. Santiago</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Engineer</td> <td colspan="2">Self-Employed</td> </tr> </table>	LAST	FIRST	MI	Getty, Paul			STREET ADDRESS			15055 N. Santiago			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Engineer	Self-Employed		7/31/16	\$100.00	\$100.00
LAST	FIRST	MI																										
Getty, Paul																												
STREET ADDRESS																												
15055 N. Santiago																												
CITY	STATE	ZIP																										
Fountain Hills, Az 85268																												
OCCUPATION	EMPLOYER																											
Engineer	Self-Employed																											
b.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Ahlberg, Kathleen</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">13013 N. Panorama Dr #129</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</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	Ahlberg, Kathleen			STREET ADDRESS			13013 N. Panorama Dr #129			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	-		8/3/16	\$75.00	\$75.00
LAST	FIRST	MI																										
Ahlberg, Kathleen																												
STREET ADDRESS																												
13013 N. Panorama Dr #129																												
CITY	STATE	ZIP																										
Fountain Hills, Az 85268																												
OCCUPATION	EMPLOYER																											
Retired	-																											
c.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Montalbano, Patricia</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">10457 N. Nicklaus Drive</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Arizona 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2">Retired</td> </tr> </table>	LAST	FIRST	MI	Montalbano, Patricia			STREET ADDRESS			10457 N. Nicklaus Drive			CITY	STATE	ZIP	Fountain Hills, Arizona 85268			OCCUPATION	EMPLOYER		Retired	Retired		8/3/16	\$100.00	\$100.00
LAST	FIRST	MI																										
Montalbano, Patricia																												
STREET ADDRESS																												
10457 N. Nicklaus Drive																												
CITY	STATE	ZIP																										
Fountain Hills, Arizona 85268																												
OCCUPATION	EMPLOYER																											
Retired	Retired																											
d.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Coppersmith, Sam</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">4808 N. 24th Street Unite 1125</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, Az 85016</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Attorney</td> <td colspan="2">Coppersmith/Brockelman</td> </tr> </table>	LAST	FIRST	MI	Coppersmith, Sam			STREET ADDRESS			4808 N. 24th Street Unite 1125			CITY	STATE	ZIP	Phoenix, Az 85016			OCCUPATION	EMPLOYER		Attorney	Coppersmith/Brockelman		8/3/16	\$100.00	\$100.00
LAST	FIRST	MI																										
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e.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Manoil, Mark</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">24 W. Camelback Rd #A592</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Phoenix, Az 85013</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Attorney</td> <td colspan="2">Manoil/Klime PLC</td> </tr> </table>	LAST	FIRST	MI	Manoil, Mark			STREET ADDRESS			24 W. Camelback Rd #A592			CITY	STATE	ZIP	Phoenix, Az 85013			OCCUPATION	EMPLOYER		Attorney	Manoil/Klime PLC		8/6/16	\$100.00	\$100.00
LAST	FIRST	MI																										
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STREET ADDRESS																												
24 W. Camelback Rd #A592																												
CITY	STATE	ZIP																										
Phoenix, Az 85013																												
OCCUPATION	EMPLOYER																											
Attorney	Manoil/Klime PLC																											
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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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 colspan="3">Mikolajczyk, Sharalyn</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">9933 N. Copper Ridge Trail</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Dental Hygeinist</td> <td colspan="2">Unknown</td> </tr> </table>	LAST	FIRST	MI	Mikolajczyk, Sharalyn			STREET ADDRESS			9933 N. Copper Ridge Trail			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Dental Hygeinist	Unknown		8/8/16 8/10/16	\$100.00 \$100.00	\$200.00
LAST	FIRST	MI																										
Mikolajczyk, Sharalyn																												
STREET ADDRESS																												
9933 N. Copper Ridge Trail																												
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b.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Harris, Jerry</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">16008 E. Ocotillo Drive</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2">ASU</td> </tr> </table>	LAST	FIRST	MI	Harris, Jerry			STREET ADDRESS			16008 E. Ocotillo Drive			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	ASU		8/8/16	\$100.00	\$100.00
LAST	FIRST	MI																										
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OCCUPATION	EMPLOYER																											
Retired	ASU																											
c.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Wilson, Robert</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">16800 E. El Lago Blvd #2084</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2">Retired</td> </tr> </table>	LAST	FIRST	MI	Wilson, Robert			STREET ADDRESS			16800 E. El Lago Blvd #2084			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	Retired		7/13/16 8/10/16	\$50.00 \$30.00	\$80.00
LAST	FIRST	MI																										
Wilson, Robert																												
STREET ADDRESS																												
16800 E. El Lago Blvd #2084																												
CITY	STATE	ZIP																										
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OCCUPATION	EMPLOYER																											
Retired	Retired																											
d.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Travis, Bob</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">14218 N. Chinook Plaza</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Plumber</td> <td colspan="2">Self-Employed</td> </tr> </table>	LAST	FIRST	MI	Travis, Bob			STREET ADDRESS			14218 N. Chinook Plaza			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Plumber	Self-Employed		8/10/16	\$100.00	\$100.00
LAST	FIRST	MI																										
Travis, Bob																												
STREET ADDRESS																												
14218 N. Chinook Plaza																												
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e.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Stiles, Larry Resmer</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">14214 N. Galatea Unit A</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2">Retired</td> </tr> </table>	LAST	FIRST	MI	Stiles, Larry Resmer			STREET ADDRESS			14214 N. Galatea Unit A			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	Retired		8/18/16	\$100.00	\$100.00
LAST	FIRST	MI																										
Stiles, Larry Resmer																												
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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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 colspan="3">Buster, Jim</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">103346 W Piccadilly Rd</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Avondale, Az 85323</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Lobbyist</td> <td colspan="2">SW Resource Strategies</td> </tr> </table>	LAST	FIRST	MI	Buster, Jim			STREET ADDRESS			103346 W Piccadilly Rd			CITY	STATE	ZIP	Avondale, Az 85323			OCCUPATION	EMPLOYER		Lobbyist	SW Resource Strategies		8/18/16	\$100.00	\$100.00
LAST	FIRST	MI																										
Buster, Jim																												
STREET ADDRESS																												
103346 W Piccadilly Rd																												
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b.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3">Bisceglia, Gerard</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">12028 N. Chama Dr., Unit B</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td colspan="3">Fountain Hills, Az 85268</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2">Retired</td> </tr> </table>	LAST	FIRST	MI	Bisceglia, Gerard			STREET ADDRESS			12028 N. Chama Dr., Unit B			CITY	STATE	ZIP	Fountain Hills, Az 85268			OCCUPATION	EMPLOYER		Retired	Retired		8/18/16	\$100.00	\$100.00
LAST	FIRST	MI																										
Bisceglia, Gerard																												
STREET ADDRESS																												
12028 N. Chama Dr., Unit B																												
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OCCUPATION	EMPLOYER																											
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c.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td colspan="3"> </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 colspan="3"> </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																												
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LAST	FIRST	MI																										
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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]		10705.75	10705.75																								

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CONTRIBUTIONS of \$50 or less - AGGREGATE TOTAL *

SCHEDULE A-1

2. ID# PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
Date Donors			
7/12/16 1	\$50.00	\$50.00	
7/13/16 4	\$125.00	\$125.00	
7/14/16 1	\$50.00	\$50.00	
7/15/16 7	\$300.00	\$300.00	
7/18/16 3	\$125.00	\$125.00	
7/19/16 1	\$50.00	\$50.00	
7/20/16 3	\$85.00	\$85.00	
7/23/16 15	\$613.00	\$613.00	
7/25/16 1	\$50.00	\$50.00	
7/28/16 1	\$25.00	\$25.00	
7/31/16 1	\$25.00	\$25.00	
8/1/16 2	\$65.00	\$65.00	
8/3/16 6	\$68.00	\$68.00	
8/8/16 1	\$50.00	\$50.00	
8/10/16 5	\$190.00	\$190.00	
8/17/16 2	\$80.00	\$80.00	
8/18/16 1	\$50.00	\$50.00	
55 Total Donors			
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	\$2001.00	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	\$2001.00

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CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6-1-16 thru 8/18/16

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 None		
	DATE RECEIVED			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.		ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]		

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Write in Ginny Dickey for Mayor	2. ID # PC2016-04		
3.	Report covering period from <u>6/1/18</u> thru <u>8/18/16</u>			
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 None			
	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]			

OTHER LOANS

SCHEDULE C1

2. ID#

PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor
3. Report covering period from 6/1/16 thru 8/18/16

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# None			
	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]			

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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 Town of Fountain Hills 16705 E Avenue of the Fountains Fountain Hills, Az 85268	6/28/16 8/2/16	\$4.00 \$70.11
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Notary Services; Community center charges		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Post Office 16605 E. Avenue of the Fountains Fountain Hills, Az 85268	7/14/16 7/20/16 7/25/16 8/11/16	\$19.00 \$9.50 \$11.40 \$3.80
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Post Card thank you notes		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP FH Times P.O. Box 17869 Fountain Hills, Az 85269	7/14/16 7/15/16 7/20/16 7/28/16 8/8/16	\$49.86 \$49.86 \$249.31 \$138.51 \$90.36
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Advertising		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP Vista Print On-Line	7/18/16	\$84.22
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Business cards for handout		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP Primary Consultants 5320 N. 16th Street, Suite 111 Phoenix, Az 85016	7/22/16 8/16/16	\$1010.69 \$7,000.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Consultant services including Polling, signage, mailing and fee for services		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP Target Shea Blvd Fountain Hills, Az 85268	7/24/16 8/2/16	\$70.76 \$31.03
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Office and printer supplies for campaign		
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#
PC2016-04

1. Committee Name _____

3. Report covering period from _____ thru _____

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 PayPal Facebook on line DESCRIPTION OF ITEMS OR SERVICES PURCHASED Facebook Push-Advertising	7/27/16 7/28/16 7/29/16	\$300.00 \$25.05 \$25.62
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Safeway 16001 Fountain Hills Blvd Fountain Hills, Az 85268 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Refreshments for Meet/Greet on 8/17	8/17/16	39.65
4c.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		\$9282.73

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

2. ID#

PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP NONE		
	PURPOSE AND DESCRIPTION OF PURCHASE <input type="checkbox"/> Benefitted <input type="checkbox"/> Opposed		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE <input type="checkbox"/> Benefitted <input type="checkbox"/> Opposed		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE <input type="checkbox"/> Benefitted <input type="checkbox"/> 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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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# NONE		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4i.	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]		

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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 None		
	DESCRIPTION OF REFUND		
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		

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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 None		
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]		

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

4	REPAYMENT OF ALL OTHER LOANS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4f.	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]		

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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# None		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4f.	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]		

ANY OTHER DISBURSEMENT

SCHEDULE D-7

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

4.	ANY OTHER DISBURSEMENTS NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# NONE DESCRIPTION		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
4e.	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]		

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Mike O'Connor 16137 E. Glendora Drive Fountain Hills, Az 85268	CONTRIBUTION Website EXPENDITURE	7/18/16	\$94.00
	DESCRIPTION Purchase website license and construction			
	OCCUPATION Retired	EMPLOYER -		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Sharon Dennis 9750 N. Monterey Dr #46 Fountain Hills, Az	CONTRIBUTION Fund Raiser Event EXPENDITURE	7/23/16	\$50.00
	DESCRIPTION Fundraiser			
	OCCUPATION Retired	EMPLOYER -		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Todd and Betsy Carrie 17204 E. Kensington Place Fountain Hills, Az 85268	CONTRIBUTION Website advertisement EXPENDITURE	7/27/16	300.00
	DESCRIPTION Contribution of one week of website advertising			
	OCCUPATION Owner	EMPLOYER Carrie Creations		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Vanessa Davisson 17303 Calavares Fountain Hills, Az 85268	CONTRIBUTION Fund Raiser Event EXPENDITURE	8/1/17	180.00
	DESCRIPTION Fundraiser			
	OCCUPATION Artist	EMPLOYER Self-Employed		
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]			
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]			

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID#
PC2016-4

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Sherri James 11021 N. Pinto Dr Fountain Hills, Az 85268	CONTRIBUTION Bumper Stickers EXPENDITURE	7/15/16 7/29/16	\$57.60 \$38.40
	DESCRIPTION Bumper Stickers			
	OCCUPATION Retired	EMPLOYER -		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Mike Chin 39 Stonewall Drive Edison, NU			
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Mike Chin 39 Stonewall Drive Edison, NU	CONTRIBUTION Campaign Buttons EXPENDITURE 2 runs	7/15/16 7/27/16	\$50.00 \$50.00
	DESCRIPTION Home made campaign Buttons			
	OCCUPATION Professor	EMPLOYER Rutgers University		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
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]			\$820.00
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]			\$820.00

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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# None		
	DESCRIPTION OF RECEIPT		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4f.	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		

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		
	DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4f.	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]			

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

2. ID#
PC2016-04

1. Committee Name Write in Ginny Dickey for Mayor

3. Report covering period from 6/1/16 thru 8/18/16

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				
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None				
	DESCRIPTION OF DEBT				
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
4e.	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]				