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STATE OF ARIZONA YAVAPAI COUNTY POLITICAL COMMITTEE **CAMPAIGN FINANCE REPORT**

RECEIVED

NOV -4 2016

R OFFICE USE ONLY

Yavaj	oai	County
Supt.	of	Schools

1.	Heather Hermen Campaigh		- 10R OF OR OF	Yavapai County Supt. of Schools	
	Full Name of Committee 30 Row Top Road Address				
-			5CH11	0-000	
7	Sedura 80351 928. City Zip Code	202 · 23	14		
2					
	Sponsoring Organization (if applicable)	0 1		Election: August 30, 2016	
	Heather Hernen Socust School Name of Candidate and Office Sought (if applicable)	Bracd	- General E	lection: November 8, 2016	
	heather & Frontburnenedia. wm				
	Email Address Fax#		_		
4.	REPORTING PERIOD (Please check appropriate box)		DUE	BETWEEN	
a.	JANUARY 31 REPORT		January 1 and Jan	uary 31, 2016	
	For Period of November 25, 2014 thru December 31, 2015 JUNE 30 REPORT		-		
b.	For Period of January 1 thru May 31, 2016		June 1 and June 3	0, 2016	
c.	PRE-PRIMARY ELECTION REPORT For Period of June 1 thru August 18, 2016		August 19 and Aug	gust 26, 2016	
d.	POST-PRIMARY ELECTION REPORT For Period of August 19 thru September 19, 2016		September 20 and September 29, 2016		
e.	PRE-GENERAL ELECTION REPORT For Period of September 20 thru October 27, 2016		October 28 and November 4, 2016		
f.	POST-GENERAL ELECTION REPORT				
_	For Period of October 28 thru November 28, 2016		November 29 and	December 8, 2016	
5	Summary		Column A s Reporting Period	Column B Election Period Total to Date	
5a	Total 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 (ending balance from the previous reporting period)	E REEN	800 - 0-		
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$157	5,06	-	
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	\$157	5.00	∞ M = 53	

FOR OFFICE USE ONLY		Entered in Database	Bested to conserve to the street of	1
FOR OFFICE USE ONLY	- 1	Entered in Database	Posted to yavapai.us/electionsvr/	ŀ

\$1475.53

\$ 99.47

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]

Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)

Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2 Heather Hermen Campaign Committee Name 2. ID# thru October 27, 2016 September 20, 2016 Report covering period from Column A Column B this period Campaign to Date RECEIPTS 4. Contributions other than loans and in-kind: (a) Individuals - more than \$50 (Total from Schedule A) 81475.0 \$ 1475.00 (b) Individuals - aggregate \$50 or less (Total from Schedule A-1) \$100.00 \$100 @ (c) Political Committees (Total from Schedule B) - 0 -0 -(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)] \$1575.00 \$1575.00 (e) Refund of contributions (Total from Schedule F-2) -0-- 0 -(f) Total Contributions Other than Loans and In-kind (subtract 4(e) from 4(d)) \$ 1575 #1575 (5, (a) Loans made or guaranteed by candidate (Total from Schedule C) -0-- 0 -(b) All other toans (Total from Schedule C-1) - 0 --0-(c) Total Loans [add 5(a) and 5(b)] -0--0-In-kind contributions (Total from Schedule E) - 0 --0 5 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1) -0--0-Total Receipts [add 4(f), 5(c), 6, and 7] \$ 1575 °° \$1575 ° DISBURSEMENTS 9. Expenditures for operating expenses (Total from Schedule D) \$1475 53 \$ 1475 53 10. Independent Expenditures (Total from Schedule D-1) 0 --0-Value of In-kind expenditures (Total from Schedule E) - 0 -~0 ~ 12. Loans made by reporting committee (Total from Schedule D-2) - 0--0-13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) - 0--0-(b) Repayment of all other loans (Total from Schedule D-5) ~ 0 -~0-(c) Total Loan Repayments [add 13(a) and 13(b)] -6--0-14. Transfers to other political committees (Total from Schedule D-6) -0--0-Any other disbursement (Total from Schedule D-7) ~ 0 --0-16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15] \$ 1475.53 \$1475,53 Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) 17... -0-- 0 -Total disbursements (subtract line 17 from line 16) \$1475.53 \$ 1475.53 Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3) -6-20. 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. father Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

	SCHEDUL	_E A
2.1D#		

1. Committee Name	Heather Hermen Campaign		**
3. Report covering pe	September 20, 2016	October 27, 2016	.5

4.	CONTRIBUTIONS	DATE	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN TO
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	RECEIVED	PERIOD	DATE
а	Name Jake Weber Street Address Po Box 21057 City State 87341 Occupation Employer Owner Weber's 16A Self employed	10/3/2016	\$400.00	# 400 co
b	Name Mike ? Heather Hurmen Street Address 36 Rock Tip Rd. City State 84351	10/3/2016	\$75,00	\$75.°°
	Occupation Employer Pink Jeep V.P. and Self employed		40	
C	Street Address 195 meny for Round Rock Rd. City Sedone AZ Su351 Occupation Employer 561 Femplohed - Cheers Inc.	- 10/6/2016 -	\$200.00	FZ00.00
d	Name R.C. Mc Guinness Street Address 325 Calle Linda City State Zip Sedone AZ Su33U Occupation Employer Refered	- - 10/12/2016 -	\$100.00	\$ 166.00
е	Name Russ Snider Street Address 350 Redrock Road City State Zip Sedona AZ Su35) Occupation Employer Retried	10/12/2016	\$100,00	\$100.00
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page Line 4(a), Column A]	ÿ,	13	

^{*}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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Schedule	м	rage	of

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

_	SCHEDULE	A
2. ID#		

1, Committee Name	Heather Hermen Campaign	3 Y	2. 1D#
3. Report covering p	September 20, 2016	October 27, 2016	

	CONTRIBUTIONS		AMOUNT	CUMULATIVE TOTAL THIS
4.	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	RECEIVED THIS PERIOD	CAMPAIGN TO DATE
а	Name Front Burner media - Heather Human			
	Street Address 30 Rock Top Road	10/21/2016	\$200.00	\$200.00
	City State Zip Schona AZ Sw351 Occupation Employer	10/21/2010	φ200.00	H COO.
	Occupation Employer media			
b	Name Weber Corporation - Jake Weber	21		30
	Street Address Ps Box Z1051	10/21/2016	\$400,00	\$400.00
	City State Zip Sedone AZ Su341	10/21/2010	\$400,00	N
156	Occupation Employer owner- webs (GA	<i>\$2</i>		
С	Name			
	Street Address			6 3
	City State Zip			
	Occupation Employer			
d	Name			
	Street Address	X		
	City State Zip			
	Occupation Employer	3		
е	Name		((
V	Street Address	П		8 2
	City State Zip			€
	Occupation Employer			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A)	· · · · · · · · · · · · · · · · · · ·	\$1475.00	\$1475.00
	,		2	- 55

[°]lf 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 of \$50 or less - AGGREGATE TOTAL*

SC	HEC	ULE	A-1

1. Committee Name	eather Hermen Campaign		2. ID#	
3. Report covering perio	September 20, 2016	thru October 27, 2016	3	

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
Donation from Richard Thomas, LEO E. Lindson Way. Donation from Charles Marr Sedona AZ 81351 45 E. Big Horn (AVT Refired Sedona AZ 81351	10	
Retired	\$50.00 and \$50.00	\$100, <u>∞</u>
A.S.		
5	: S	
55		2
2 1 2	,	
Α	*** (*)	1
9	e e	2
27 E		
	į.	y "
Detailed Summary Page, Line 4(b) Column A]	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	¥160.00

^{*}If contributions of \$50 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.

CONTRIBUTIONS FROM POLITICAL COMMITTEES **SCHEDULE B** Heather Hermen Campaign thru Odiber 27,2016 3. Report covering period from AMOUNT CUMULATIVE **CONTRIBUTIONS** RECEIVED TOTAL THIS THIS CAMPAIGN IDENTITY OF CONTRIBUTOR AND DATE RECEIVED **PERIOD** TO DATE a ID# NAME, ADDRESS, CITY, STATE AND ZIP 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 NAME, ADDRESS, CITY, STATE AND ZIP DATE RECEIVED f ID# NAME, ADDRESS, CITY, STATE AND ZIP DATE RECEIVED NAME, ADDRESS, CITY, STATE AND ZIP g ID#

NAME, ADDRESS, CITY, STATE AND ZIP

NAME, ADDRESS, CITY, STATE AND ZIP

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 Al

DATE RECEIVED

DATE RECEIVED

DATE RECEIVED

h ID#

i ID#

Schedule	В	Page	of
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CANDIDATE LOANS

SCHEDULE C

Schedule C Page ____ of _

1	Committee Name	Heather	Hurme	n Campaign	<u> </u>		2. ID#	
3	Report covering period	from Se	ptember	20	thru	ochbur	27, 2016	л с
	LOANS	MADE OR GU	ARANTEED	BY CANDIDATE		DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
4	-	AME, ADDRESS	FROM WHOM I	RECEIVED	×		THIS PERIOD	CAMPAIGN TO DATE
4	a Last	First		Initial	1	12.		
	Street Address	-			11			
	City		State	Zip	$\overline{}$			= 3
	Description			- 1		1		
Ь	Last	First	<u> </u>	Initial				400
	Street Address	(18.0)	·					
	City		State	Zip		2	ig	¥i
ं	Description		5 V			l	= -	
С	Last	First		Initial				
	Street Address					I		
	City		State	Zip				
	Description		*					
đ	Last	First	W	Initial				_
	Street Address							
	City	<u> </u>	State	Žip	-			
	Description			ž.				
0	Last	First	3 15	Initial	7			
	Street Address		<u></u>	- 4		2		£.
	City		State	Zip				
	Description	7						
5.	ENTER TOTAL OF LO	ANS MADE OR G	UARANTEED B	Y CANDIDATE ONLY I	F LAST P	AGE OF SCHED	ULE C (If last page	-0-
	of Schedule C, transfer	total to Detailed S	summary Page, I	Line 5(a), Column A)		2		

EXPENDITURES FOR OPERATING EXPENSES*

	ENSESSCHEDULE D	
1. Committee Name	eather Hermen Campair	2. ID#
3. Report covering period fro	n September 20	thru October 27,2016

Г		DATE	
ij.	EXPENDITURES	DATE EXPENDITURE	OF THE
4	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
а	Name Larson Newspapers		
	Street Address Van Deren	rolelde	\$ 289.50
l	City Sedona AZ State Zip Su33U	10/3/16	Ψ 20-1.
L	Description of Items or Services Purchased		
ь	Name Heather Hernen		
	Street Address 30 Rock Top Rd.	, ,	45 -50
	City Sedone Az State Zig 80351	10/17/14	\$214.03
	Description of Items or Services Purchased roduced from Vista Print	Four magnets	\$ 214 =
c	Name Larson Newspapers		
	Street Address 298 Van Deren		ш м
	City Sedona AZ State Zip 84336	10/24/16	\$ 900.00
L	Description of Items or Services Purchased 10/28/14 and 11/2/14 ads in Red Rock News		
d	Name Am Trust Bank		
	Street Address 7000 SR 179 # A 116		\$ 36.00
	City Science State State Zip 84351 Description of Items or Services Purchased	11/24/16	₽ 5 Ø.°
	Funds charge for bank account		
e	Name Am Trust Bank		
	Street Address 7000 SC 179 AIIV	, ,	\$34.00
	City Sidona AZ State Zip 31351 Description of Items or Services Purchased	10/27/10	₽ Ju
	funds charge for bank account		
	Name		
	Street Address	-	*
	City State Zip		
	Description of Items or Services Purchased		
5.	NENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer t Summary Page Line 9, Column A)	otal to Detailed	V ==== ===
			53

Schedule D Page _____ of ___

INDEPENDENT EXPENDITURES* **SCHEDULE D-1** 2. ID# Herman Campaign 1. Committee Name thru October 27, 2016 3. Report covering period from DATE **AMOUNT** INDEPENDENT EXPENDITURES **EXPENDITURE** OF THE MADE EXPENDITURE IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED Street Address City State Purpose and Description of Purchase Benefited Opposed Candidate Office Sought Year of Election Name Street Address Citv State Zip Purpose and Description of Purchase Benefited Opposed Candidate Office Sought Year of Election Name Street Address City State Purpose and Description of Purchase Benefited 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** Jake Weber, owner- webers IGA \$800.00 John and Nicole Davis, owner- cheers Inc.

Heather Hermen, owner- Front Burner media

\$ 200 00

Z00 F

OTHER LOANS

Heather Hermen Campaign

	<u> 501</u>	<u>1EU</u>	ULE	C-
D#				

3. Report covering period from

September 20

thru

October 27. 2016

	ALL OTHER LOANS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN
a	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			TO DATE
ľ	S1 5s			
l	Street Address		2.0	
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
b	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
			20	
	Street Address			
	City, State, Zip		}	}
	NAME OF ENDORSER OR GUARANTOR OF LOAN		20	
	Street Address			
	City, State, Zip			
	Description		6	
С	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address		0 5	
	City, State, Zip	727		**
	NAME OF ENDORSER OR GUARANTOR OF LOAN		0	
	Street Address			
	City, State, Zip			.g
	Description	=		_
d	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#	<u> </u>		
	Street Address			
	City, State, Zip	88		
	NAME OF ENDORSER OR GUARANTOR OF LOAN			1.
	Street Address			
	City, State, Zip	0	w .	
	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(b), Column AJ	- 1, 112113101 (0131		18

LOANS MADE BY REPORTING COMMITTEE

Hermen campagn

Heather

SCHEDULE D-2

Schedule D-2 Page _____ of ____

	3. Report covering period from	September 20	thru Octob	our 27,2814		
4.		IS MADE BY THE REPOR			DATE LOAN	AMOUNT OF
a	Committee Name	ID# OF COMMITTEE TO WHO	IM LOAN (DISBURSE	ID#	MADE	LOAN
	Address				-	J.
	City	State	Zip		1	
b	Committee Name		× 1	ID#		
	Address					
	City	State	Zip			
C	Committee Name			ID#	W	
٧	Address		· · · · · · · · · · · · · · · · · · ·	•		
	City	State	Zip			
d	Committee Name	×		ID#		
	Address		.*			
	City	State	Zip			
	Committee Name		2 1	ID#		
	City	State	Zip			
	Committee Name			ID#	1	
	Address			-(A)		
╝	City Committee Name	State	Zip	· · · · · · · · · · · · · · · · · · ·		
	Address			ID#		
	City	State	N Inc.	s ¹	10	
	Committee Name	State	Zìp	lina.		-3
	Address			ID#	5	
	City	State	Zip			:
\dashv						
5	ENTER TOTAL ONLY IF LAST PAG	E OF SCHEDULE D-2 (if last page of s	Schedule D-2 transfer to	tal to Detailed Summary Page, L	ine 12, Column A]	10'

OFFSETS TO OPERATING EXPENSES

SCHEDULE D-3 2. ID# Heather Hermen Campusn 3. Report covering period from September 20 thru October 27. 2016

4.	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES	DATE REFUND	AMOUNT OF THE
٩.	NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	RECEIVED	REFUND
a	Name	112421122	
	Street Address	1	>
		ĺ	61
	City State Zip		
	Descrption of Refund		
b	Name		11
			5
	Street Address	ľ	
	City State Zip		
	Descrption of Refund		
	Description of Retund		
С	Name		
	rane		
	Street Address		
	City State Zip		
	Description of Refund	1	
			C-
d	Name		
	<u> </u>	ļ	
	Street Address	0	
	City State Zip		
	Descrption of Refund		
	Name		
е	Name	J	24
	Street Address		
	Gueet Audiess		N 2
	City State Zip		
			1
	Descrption of Refund	1	
		10	
f	Name		
		ĺ	
	Street Address		
	City State Zip		
	Descrption of Refund		179
	Description of Refund		
5		one Line 17 Column Al	6.
5	Description of Refund ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [if last page of Schedule D-3, transfer total to Detailed Summary P	age Line 17, Column A)	-6'

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

	1. Committee Name Heat	ther Herman	Carapaign	2. ID#	
	Committee Name Heat Report covering period from See	ptemour 30	thru Octob	our 27,2011	ę
4. a	REPAYMENT OF LOANS NAME AND ADDRESS TO WH			DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
d	Street Address		## = = = = = = = = = = = = = = = = = =		
	City	State	Zip		
b	Name	2 × 0			<u></u>
	Street Address City	0111			
c	Name	State	Zip		
	Street Address	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>		
	City	State	Zip		î
d	Name	>			
	Street Address City	Chah	- 8	111	(4.1)
9	Name	State	Zíp		
	Street Address		1.0		
	City	State	Zip		
	Name Street Address	0		, ,	
	City	State	Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHED	ULE D-4 [if last page of Schedule (0-4, transfer total to Detailed Summary P	age, Line 13(a), Column A	160
					111

Schedule D-4 Page ____ of ____

REPAYMENT OF OTHER LOANS

SCHEDULE D-5 2. ID# Heather Hermen Campaign Suptember 20 thru October 27. 2016

4				
4.	REPAYMENT OF ALL OTHER LOANS	DATE		
5	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	REPAYMENT MADE	AMOUNT OF THE REPAYMENT	
а	Name and ID Number			
	Street Address		0.2	
	City State Zip		25	
Ь	Name and ID Number			
	Street Address			
	City State Zip	15		
С	Name and tD Number	<u> </u>		
	Street Address		0.	
	City State Zip			
d	Name and ID Number	1(52		
	Street Address			
	City State Zip			
B	Name and ID Number			
	Street Address	*1		
	City State Zip			
,	Name and ID Number			
i	Street Address		:	
	City State Zip			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [if last page of scheduTransfer total to Detailed Summary Page	Line 13(b), Column A]	16-	

Sch	edule	D-5	Page	0	「 <u> </u>
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TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6 Heather Hermen Campaign 2. ID# 3. Report covering period from September 2 October 27. 2016 thru

4.			X
4.	TRANSFERS MADE BY THE REPORTING COMMITTEE	」	
	NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE	WAS MADE	AMOUNT OF THE TRANSFER
а	Name and ID Number		
	Street Address	1	
	City State Zip		-
b	Name and ID Number		
	Street Address	η ,	α
	City State Zip	1	
С	Name and ID Number	,	
	Street Address	1	ig.
	City State Zip	=	
d	Name and ID Number		
	Street Address	1	
	City State Zip		
e	Name and ID Number	7.	
	Street Address	1	
	City State Zip		
f	Name and ID Number		
	Street Address	1	
	City State Zip	1	
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line	14, Column A]	10'

Schedule D-6 Page of	
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ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name	ather	Hermin	Cam	pagn	2. ID#	
3. Report covering period from	Septen	uber 70	thru	actober	27. 2016	

4.	ANY OTHER DISBURSEMENT	DATE DISBURSEMENT	AMOUNT OF THE
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	MADE	DISBURSEMENT
а	Name and tD Number		···-
	Street Address		
	City State Zip		
	Description	. 2	
b	Name and ID Number		
	Street Address	N	III
	City State Zip		
	Description	(4	
С	Name and ID Number		N
133	Street Address		~
	City State Zip		
	Description		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description	П	
0	Name and ID Number		
	Street Address		
	City State Zip	,	
	Description		VA -
f	Name and ID Number		
	Street Address	=	9
	City State Zip	~	
-	Description		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 (if last page of Schedule D-7, transfer total to Detailed Summary Pa	ge, Line 15, Column A]	10

IN-KIND CONTRIBUTIONS and EXPENDITURES SCHEDULE E 1. Committee Name Heather Hermen Compaign 3. Report covering period from September 30 thru October 21, 2016 2. ID# IN-KIND CONTRIBUTIONS and EXPENDITURES FAIR MARKET DATE NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL VALUE COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer b Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer 5 ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E (if lest page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A) 6 ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E (if lest page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A)

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1 Heather Hermen Campuign 2, ID# October 21. 2016 3. Report covering period from Suptember thru

4.	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE	AMOUNT OF THE			
3.72	NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED	RECEIVED	RECEIPT			
а	Name and ID Number					
	Street Address	131				
	City State Zip		(2)			
	Description of Receipt	**				
b	Name and ID Number					
	Street Address					
	City State Zip		5.			
	Description of Receipt	¥	-3-			
С	Name and ID Number		<u> </u>			
	Street Address					
	City State Zip	(6)	C			
	Description of Receipt		¥.,.			
d	Name and ID Number		7,			
	Street Address	8				
	City State Zip					
	Description of Receipt		28 28 18 T			
0	Name and ID Number					
	Street Address					
	City State Zip		i			
	Description of Receipt					
f	Name and ID Number	\	\$#.			
	Street Address					
	City State Zip					
	Description of Receipt	0				
5	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

	1. Committee Name	ather Hermen	Campaign thru October	2. ID#	L
	3. Report covering period from	September 30	thru October	27. 201U	
4.	NAME AND ADDRESS OF INDI		THE POLITICAL COMMITTEE) TO	DATE REFUND WAS MADE	AMOUNT OF THE
а	Name and ID Number	THE REFUND WAS MADE; DESC	CRIPTION	*2	%
	Street Address			[
	City Description of Refund	State	Zip	<u> </u>	K
b	Name and ID Number				
	Street Address	o 2		e e	
	City	State	Zip		
	Description of Refund	1000		-	
c	Name and ID Number Street Address				
	City	State	Zip		
	Description of Refund	2			
d	Name and ID Number				
	Street Address	Chab			
	City Description of Refund	State	Zip		
e	Name and ID Number	11			
	Street Address				8
	City	State	Zip		
f	Description of Refund Name and ID Number				
ľ	Street Address		3.0		5
	City	State	Zip		2
	Description of Refund				
5	ENTER TOTAL ONLY IF LAST PAGE C	OF SCHEDULE F-2 (if last page of Scheduk	e F-2, transfer total to Detailed Summary Pa	ge, Line 4(e), Column A)	10'

^{*}Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

	**		•	•	*		
	1. Committee Name	Heather	Hermi	n Camp	agn	2, ID#	
	3. Report covering period from _	September	مو ا	thru	octo	Der 2-7.	20/10
	<u> </u>			OUTSTANDING	AMOUNT	PAYMENT THIS	OUTSTANDING
	DERTS AND (DBLIGATIONS		BALANCE	INCURRED THIS	PERIOD	BALANCE AT
4.	DEBIG AND	BEIGHTIONS			1	FERIOD	
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	NAME AND ADDRESS OF INDIVIDUA			PERIOD	1	5	PERIOD
	THE POLITICAL COMMITTEE		MED	1	i		
3	Name, Address, City, State, Zip, a	and ID#					
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	Description of Debt						
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	Description of Debt				ļ !		
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	Description of Debt						
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	Description of Debt	8			!		
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ł	Name, Address, City, State, Zip, a	ind ID#			V) =		
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ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [if last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]

Description of Debt

Schedule F-3 Page _____ of ____