



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

FOR
OFFICE
USE
ONLY

RECEIVED

JAN 28 2015

Yavapai County
Supt. of Schools

1. Partners in Education

Full Name of Committee

Treasurer: Patricia Winters; 508 E. Cottonwood Drive
Address

Cottonwood, AZ 86326 (928) 593-0196
City Zip Code Phone

3. ID#
09-06-0V-001

2. _____
Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)

Email Address Fax #

4. REPORTING PERIOD (Please check appropriate box)		DUE BETWEEN
a.	<input checked="" type="checkbox"/> JANUARY 31 REPORT For Period of January 1, 2014 thru December 31, 2014	January 1 and February 2, 2015
b.	<input type="checkbox"/> MARCH PRE-ELECTION REPORT For Period of January 1 thru February 26, 2015	February 27 and March 6, 2015
c.	<input type="checkbox"/> MARCH POST-ELECTION REPORT For Period of February 27 thru March 30, 2015	March 31 and April 9, 2015
d.	<input type="checkbox"/> MAY PRE-ELECTION REPORT For Period of March 31 thru May 7, 2015	May 8 and May 15, 2015
e.	<input type="checkbox"/> MAY POST-ELECTION REPORT For Period of May 8 thru June 8, 2015	June 9 and June 18, 2015
f.	<input type="checkbox"/> AUGUST PRE-ELECTION REPORT For Period of June 9 thru August 13, 2015	August 14 and August 21, 2015
g.	<input type="checkbox"/> AUGUST POST-ELECTION REPORT For Period of August 14 thru September 14, 2015	September 15 and September 24, 2015
h.	<input type="checkbox"/> NOVEMBER PRE-ELECTION REPORT For Period of September 15 thru October 22, 2015	October 23 and October 30, 2015
i.	<input type="checkbox"/> NOVEMBER POST-ELECTION REPORT For Period of October 23 thru November 23, 2015	November 24 and December 3, 2015

5	Summary	Column A Total This 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)		\$1,991.49
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	\$1,991.49	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$6,971.50	\$6,971.50
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	\$8,962.99	\$8,962.99
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)	\$7,696.25	\$7,696.25
7	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	\$ 1,266.74	\$ 1,266.74

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Partners in Education

2. ID # 09-06-0V-001

3. Report covering period of January 1, 2014 thru December 31, 2014

RECEIPTS	Column A this period	Column B Campaign to Date
4. Contributions other than loans and in-kind:		
(a) Individuals – more than \$25 (Total from Schedule A)	\$6,451	\$6,451
(b) Individuals – aggregate \$25 or less (Total from Schedule A-1)	\$470.25	\$470.25
(c) Political Committees (Total from Schedule B)	0	0
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	0	0
(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)]	\$6,921.25	\$6,921.25
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0	0
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total Loans [add 5(a) and 5(b)]	0	0
6. In-kind contributions (Total from Schedule E)	\$50.25	\$50.25
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	0
8. Total Receipts [add 4(f), 5(c), 6, and 7]	\$6,971.50	\$6,971.50

DISBURSEMENTS	Column A this period	Column B Campaign to Date
9. Expenditures for operating expenses (Total from Schedule D)	\$7,646	\$7,646
10. Independent Expenditures (Total from Schedule D-1)	0	0
11. Value of In-kind expenditures (Total from Schedule E)	\$50.25	\$50.25
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 [all 13(a) and 13(b)]	0	0
14. Transfers to other political committees (Total from Schedule D-6)	0	0
15. Any other disbursement (Total from Schedule D-7)	0	0
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	\$7,696.25	\$7,696.25
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	0
18. Total disbursements [subtract line 17 from line 16]	\$7,696.25	\$7,696.25
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.

PATRICIA WINTERS
TYPE OR PRINT NAME OF TREASURER

Patricia Winters
SIGNATURE OF TREASURER or CANDIDATE or DESIGNATING INDIVIDUAL

January 25, 2015
Date

CONTRIBUTIONS more than \$25 – from INDIVIDUALS*

SCHEDULE A

1. Committee Name: Partners in Education

2. ID # 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	11-15-14	\$250	\$250
a.	Name Michael Taylor Architects			
	Street Address Phoenix AZ			
	City State Zip Phoenix AZ			
	Occupation Employer Architecture			
b.	Name DLR Group	11-15-14	\$250	\$250
	Street Address 6225 N. 24th Street			
	City State Zip Phoenix AZ 85016			
	Occupation Employer Architecture			
c.	Name Sodexo Inc. & Affiliates	9-16-14	\$500	\$500
	Street Address 1728 Ocean Avenue #222			
	City State Zip San Francisco CA 94112			
	Occupation Employer Architecture			
d.	Name Dr. Robert Richards	8-25-14	\$100	\$100
	Street Address 1495 E. Crestview Drive			
	City State Zip Cottonwood AZ 86326			
	Occupation Employer Retired			
e.	Name Mr. Robert Oliphant	8-25-14	\$100	\$100
	Street Address 330 S. Desperado Drive			
	City State Zip Cottonwood AZ 86326			
	Occupation Employer Retired			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]			

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

CONTRIBUTIONS more than \$25 – from INDIVIDUALS *

SCHEDULE A

2. Committee Name: : Partners in Education

2. ID # 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	9-13-14	\$50	\$50
a.	Name Terry Schlick			
	Street Address 1810 S. Shawnee Trail			
	City State Zip Cottonwood AZ 86326			
	Occupation Employer Retired			
b.	Name ADM Group, Inc.	9-03-14	\$1,000	\$1,000
	Street Address 2100 S. 15th St.			
	City State Zip Tempe AZ 85281			
	Occupation Employer 			
c.	Name Chasse Building Team	9-04-14	\$2,000	\$2,000
	Street Address 2400 W. Broadway			
	City State Zip Mesa AZ 85202			
	Occupation Employer 			
d.	Name Wholesale Floors, LLC	9-02-14	\$1,000	\$1,000
	Street Address 8855 N. Black Canyon Hwy			
	City State Zip Phoenix AZ 85021			
	Occupation Employer 			
e.	Name Progressive Services, Inc.	8-29-14	\$1,000	\$1,000
	Street Address 23 N. 35th Avenue			
	City State Zip Phoenix AZ 85009			
	Occupation Employer 			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]			

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

CONTRIBUTIONS more than \$25 – from INDIVIDUALS*

SCHEDULE A

3. Committee Name: Partners in Education

2. ID # 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

4.	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	8-13-14	\$100	\$100
a.	Name Teresa Gorder			
	Street Address P.O. Box 4274			
	City State Zip Cottonwood AZ 86326			
	Occupation Employer Teacher MUHSD			
b.	Name Anita Glazer	8-19-14	\$101	\$101
	Street Address 275 E. Shadow Ridge Road			
	City State Zip Cottonwood AZ 86326			
	Occupation Employer Retired Teacher/Counselor MUHSD			
c.	Name			
	Street Address			
	City State Zip			
	Occupation Employer			
d.	Name			
	Street Address			
	City State Zip			
	Occupation Employer			
e.	Name			
	Street Address			
	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]		\$6,451	\$6,451

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

CONTRIBUTIONS of \$25 or less – AGGREGATE TOTAL*

SCHEDULE A-1

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
<p style="text-align: center;">Miscellaneous Contributions of \$25 or Less</p>	<p>\$470.25</p>	<p>\$470.25</p>
<p>5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]</p>	<p>\$470.25</p>	<p>6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]</p> <p style="text-align: center;">\$470.25</p>

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

QUALIFYING CONTRIBUTIONS OF \$5 – FROM INDIVIDUALS

SCHEDULE A-2

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

4. CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR			
a.	LAST FIRST MI		
	STREET ADDRESS		
	CITY STATE ZIP		
	COUNTY OF RESIDENCE SOLICITOR		
b.	LAST FIRST MI		
	STREET ADDRESS		
	CITY STATE ZIP		
	COUNTY OF RESIDENCE SOLICITOR		
c.	LAST FIRST MI		
	STREET ADDRESS		
	CITY STATE ZIP		
	COUNTY OF RESIDENCE SOLICITOR		
d.	LAST FIRST MI		
	STREET ADDRESS		
	CITY STATE ZIP		
	COUNTY OF RESIDENCE SOLICITOR		
e.	LAST FIRST MI		
	STREET ADDRESS		
	CITY STATE ZIP		
	COUNTY OF RESIDENCE SOLICITOR		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A-2 (If last page of Schedule A-2, transfer total to Detailed Summary Page) Reminder: The total sum must be attached as a check or money order (made payable to the Citizen's Clean Election Fund) to the participating Candidate's Application to Receive Funds and Qualifying Contributions Report (filed with the Secretary of State). See A.R.S. §16-950(B)		0

* For Participating Candidates, as defined in A.R.S. § 16-961 (C)

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID # 09-06-0V-001

1. Committee Name Partners in Education
 3. Report covering period from January 1, 2014 thru December 31, 2014

CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE				
4.	IDENTITY OF CONTRIBUTOR AND DATE RECEIVED						
a.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
b.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
c.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
d.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
e.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
f.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
g.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
h.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
ID #	Name, Address, City, State and Zip						
DATE RECEIVED							
i.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ID #</td> <td>Name, Address, City, State and Zip</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID #	Name, Address, City, State and Zip	DATE RECEIVED			
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]	0	0				

CANDIDATE LOANS

SCHEDULE C

1. Committee Name Partners in Education

2. ID# 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

4. <u>LOANS MADE OR GUARANTEED BY CANDIDATE</u>				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, FROM WHOM RECEIVED						
4a.	Last	First	Middle Initial			
	Street Address					
	City	State	Zip			
	Description					
b.	Last	First	Middle Initial			
	Street Address					
	City	State	Zip			
	Description					
c.	Last	First	Middle Initial			
	Street Address					
	City	State	Zip			
	Description					
e.	Last	First	Middle Initial			
	Street Address					
	City	State	Zip			
	Description					
f.	Last	First	Middle Initial			
	Street Address					
	City	State	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.					0

OTHER LOANS

SCHEDULE C-1

1. Committee Name Partners in Education

2. ID # 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

4. 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 TO DATE
4a. NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip			
NAME OF ENDORSEMENT OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip Description			
b. NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip			
NAME OF ENDORSEMENT OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip Description			
c. NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip			
NAME OF ENDORSEMENT OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip Description			
d. NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip			
NAME OF ENDORSEMENT OR COMMITTEE MAKING LOAN AND ID# Street Address City State Zip 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 A]	0		

EXPENDITURES FOR OPERATING EXPENSES**

SCHEDULE D

1. Committee Name Partners in Education
 3. Report Covering period from January 1, 2014 thru December 31, 2014

2. ID # 09-06-0V-001

4.	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
a.	Name Primary Consultants Street Address 5320 N. 16 th St., STE. #111 City Phoenix State AZ Zip 85016 Description of Items or Services Purchased Palm Cards & Direct Mailing Services	11-04-14	\$5,000 Previously reported in error as \$5694.93
b.	Name Yavapai Broadcasting Street Address P.O. Box 187 City Cottonwood State AZ Zip 86326 Description of Items or Services Purchased Advertising	11-04-14	\$444
c.	Name Allegra Print & Imaging Street Address 11 N. Main St. City Cottonwood State AZ Zip 86326 Description of Items or Services Purchased Printing 500 Fliers and 10 Street Signs	9-24-14	\$50.25
d.	Name Starlight Publishing Street Address 116 S. Main St. City Cottonwood State AZ Zip 86326 Description of Items or Services Purchased 100 Fliers & 300 Full Color Fliers	9-17-14	\$256.98
e.	Name Larson Newspapers Street Address P.O. Box 619 City Sedona State AZ Zip 86339 Description of Items or Services Purchased	10-02-14	\$630
f.	Name Allegra Print & Imaging Street Address 11 N. Main St., Ste. C City Cottonwood State AZ Zip 86326 Description of Items or Services Purchased Fliers/Advertising Signs	10-02-14	\$324.09
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page Line 9, Column A]		

EXPENDITURES FOR OPERATING EXPENSES**

SCHEDULE D

1. Committee Name Partners in Education2. ID # 09-06-0V-0013. Report Covering period from January 1, 2014 thru December 31, 2014

4.	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
a.	Name Tricia Winters Street Address 508 E. Cottonwood Drive City Cottonwood State AZ Zip 86326 Description of Items or Services Purchased Reimbursement for Office Supplies & Postage	10-03-14	\$63.89
b.	Name Jamie Woodward Street Address City Cornville State AZ Zip 86325 Description of Items or Services Purchased Reimbursement for Door Hangers	10-03-14	\$205
c.	Name Verde Independent Street Address 116 S. Main St. City Cottonwood State AZ Zip 86326 Description of Items or Services Purchased Advertising	10-06-14	\$338.87
d.	Name The UPS Store Street Address 989 S. Main St. City Cottonwood State AZ Zip 86326 Description of Items or Services Purchased Mailbox Rental Fee	8-15-14	\$42.92
e.	Name Magnet America Street Address City State Zip Description of Items or Services Purchased Vehicle Campaign Magnets	8-15-14	\$290
f.	Name Street Address City State 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 Detailed Summary Page Line 9, Column A]		\$7646

SCHEDULE D-1

INDEPENDENT EXPENDITURES*

1. Committee Name Partners in Education

2. ID # 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

INDEPENDENT EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE		
4. IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED					
a. Name					
Street Address					
City	State			Zip	
Purpose and Description of Purchase				Benefited <input type="checkbox"/>	Opposed <input type="checkbox"/>
Candidate	Office Sought			Year of Election	
b. Name					
Street Address					
City	State			Zip	
Purpose and Description of Purchase				Benefited <input type="checkbox"/>	Opposed <input type="checkbox"/>
Candidate	Office Sought			Year of Election	
c. Name					
Street Address					
City	State			Zip	
Purpose and Description of Purchase				Benefited <input type="checkbox"/>	Opposed <input type="checkbox"/>
Candidate	Office Sought			Year of Election	
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULED D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]			0		

*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
ADM Group, Inc. (Construction Industry)	\$1,000
Chasse Building Team, Inc. (Construction Industry)	\$2,000
Wholesale Floors (Construction Industry)	\$1,000

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name Partners in Education

2. ID # 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

LOANS MADE BY THE REPORTING COMMITTEE			DATE LOAN MADE	AMOUNT OF LOAN
4.	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE			
a.	Committee Name	ID#		
	Address			
	City	State	Zip	
b.	Committee Name	ID#		
	Address			
	City	State	Zip	
c.	Committee Name	ID#		
	Address			
	City	State	Zip	
d.	Committee Name	ID#		
	Address			
	City	State	Zip	
e.	Committee Name	ID#		
	Address			
	City	State	Zip	
f.	Committee Name	ID#		
	Address			
	City	State	Zip	
g.	Committee Name	ID#		
	Address			
	City	State	Zip	
h.	Committee Name	ID#		
	Address			
	City	State	Zip	
i.	Committee Name	ID#		
	Address			
	City	State	Zip	
5.	ENTER TOTAL ONLY LAST PAGE OF SCHEDULE D-2 [if last page of Schedule D-2, transfer totals to Detailed Summary Page, Line 12, Column A]			0

OFFSETS TO OPERATING EXPENSES*

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

4. 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			
a.	Name		
	Street Address		
	City State Zip		
	Description of Refund		
b.	Name		
	Street Address		
	City State Zip		
	Description of Refund		
c.	Name		
	Street Address		
	City State Zip		
	Description of Refund		
d.	Name		
	Street Address		
	City State Zip		
	Description of Refund		
e.	Name		
	Street Address		
	City State Zip		
	Description of Refund		
f.	Name		
	Street Address		
	City State 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]		0

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

4. <u>REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE</u>		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAMES AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a.	Name		
	Street Address		
	City State Zip		
b.	Name		
	Street Address		
	City State Zip		
c.	Name		
	Street Address		
	City State Zip		
d.	Name		
	Street Address		
	City State Zip		
e.	Name		
	Street Address		
	City State Zip		
f.	Name		
	Street Address		
	City State Zip		
g.	Name		
	Street Address		
	City State Zip		
h.	Name		
	Street Address		
	City State Zip		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [if last page of Schedule D-4, transfer total to Detailed Summary Page, Line 13(a), Column A]		0

REPAYMENT OF OTHER LOANS

SCHEDULE D-5

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

	<u>REPAYMENT OF ALL OTHER LOANS</u>	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
a.	Name and ID #		
	Street Address		
	City State Zip		
b.	Name and ID #		
	Street Address		
	City State Zip		
c.	Name and ID #		
	Street Address		
	City State Zip		
d.	Name and ID #		
	Street Address		
	City State Zip		
e.	Name and ID #		
	Street Address		
	City State Zip		
f.	Name and ID #		
	Street Address		
	City State Zip		
g.	Name and ID #		
	Street Address		
	City State Zip		
h.	Name and ID #		
	Street Address		
	City State Zip		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [if last page of schedule, transfer total to Detailed Summary Page, Line 13(b), Column A]		0

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name Partners in Education

2. ID # 09-06-0V-001

3. Report covering period from January 1, 2014 thru December 31, 2014

TRANSFERS MADE BY THE REPORTING COMMITTEE			DATE TRANSFER WAS MADE	AMOUNT OF THE TRANSFER
4.	NAMES, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE			
a.	Name and ID #			
	Street Address			
	City	State	Zip	
b.	Name and ID #			
	Street Address			
	City	State	Zip	
c.	Name and ID #			
	Street Address			
	City	State	Zip	
d.	Name and ID #			
	Street Address			
	City	State	Zip	
e.	Name and ID #			
	Street Address			
	City	State	Zip	
f.	Name and ID #			
	Street Address			
	City	State	Zip	
g.	Name and ID #			
	Street Address			
	City	State	Zip	
h.	Name and ID #			
	Street Address			
	City	State	Zip	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]			0

ANY OTHER DISBURSEMENT

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

ANY OTHER DISBURSEMENT		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
4.	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE: DESCRIPTION		
a.	Name and ID #		
	Street Address		
	City State Zip		
	Description		
b.	Name and ID #		
	Street Address		
	City State Zip		
	Description		
c.	Name and ID #		
	Street Address		
	City State Zip		
	Description		
d.	Name and ID#		
	Street Address		
	City State Zip		
	Description		
e.	Name and ID #		
	Street Address		
	City State Zip		
	Description		
f.	Name and ID #		
	Street Address		
	City State Zip		
	Description		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7, [if last page Schedule D-7, transfer total to Detailed Summary Page, Line 15, Column A]		0

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

4. <u>IN-KIND CONTRIBUTIONS and EXPENDITURES</u>		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			
a.	Name, Address, City, State, Zip, and ID # Ruth Marie Wicks P.O. Box 223 Clarkdale, AZ 86324 CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input checked="" type="checkbox"/>	09-24-14	\$50.25
Description 500 Fliers & 10 Street Signs			
Occupation Retired Counselor		Employer MUHSD	
b.	Name, Address, City, State, Zip, and ID # CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>		
Description			
Occupation		Employer	
c.	Name, Address, City, State, Zip, and ID # CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>		
Description			
Occupation		Employer	
d.	Name, Address, City, State, Zip, and ID # CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>		
Description			
Occupation		Employer	
e.	Name, Address, City, State, Zip, and ID # CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>		
Description			
Occupation		Employer	
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A]		\$50.25
6.	ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SECHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]		\$50.25

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

4. DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS		DATE RECEIVED	AMOUNT OF THE RECEIPT
NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED			
a.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
b.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
c.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
d.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
e.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
f.	Name and ID Number		
	Street Address		
	City State Zip		
	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)		0

OFFSETS TO CONTRIBUTIONS RECEIVED*

SCHEDULE F-2

2. ID # 09-06-0V-001

1. Committee Name Partners in Education
3. Report covering period from January 1, 2014 thru December 31, 2014

	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE REFUND WAS MADE; DESCRIPTION	DATE REFUND WAS MADE	AMOUNT OF THE REFUND
4.			
a.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
b.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
c.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
d.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
e.	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
f.	Name and ID Number		
	Street Address		
	City State Zip		
	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)		0

*Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

2. ID # 09-06-0V-001

1. Committee Name Partners in Education

3. Report covering period from January 1, 2014 thru December 31, 2014

4. DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID # OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
a.	Name, Address, City, State, Zip, and ID# Description of Debt				
b.	Name, Address, City, State, Zip, and ID# Description of Debt				
c.	Name, Address, City, State, Zip, and ID# Description of Debt				
d.	Name, Address, City, State, Zip, and ID# Description of Debt				
e.	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 [if last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]				0