



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

RECEIVED

AUG 26 2016

Yavapai County
Supt. of Schools

FOR OFFICE USE ONLY

1. Mandy Worth
Full Name of Committee

116 Fourth St, PO Box 872
Address

Jerome 86331 (928) 254-9122
City Zip Code Phone

2. _____
Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)

mandy.worth@hotmail.com
Email Address Fax #

3. ID#
SCH16-060

*Primary Election: August 30, 2016
General Election: November 8, 2016*

4. REPORTING PERIOD (Please check appropriate box)		DUE BETWEEN	
a.	<input type="checkbox"/> JANUARY 31 REPORT For Period of November 25, 2014 thru December 31, 2015	January 1 and January 31, 2016	
b.	<input type="checkbox"/> JUNE 30 REPORT For Period of January 1 thru May 31, 2016	June 1 and June 30, 2016	
c.	<input checked="" type="checkbox"/> PRE-PRIMARY ELECTION REPORT For Period of June 1 thru August 18, 2016	August 19 and August 26, 2016	
d.	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT For Period of August 19 thru September 19, 2016	September 20 and September 29, 2016	
e.	<input type="checkbox"/> PRE-GENERAL ELECTION REPORT For Period of September 20 thru October 27, 2016	October 28 and November 4, 2016	
f.	<input type="checkbox"/> POST-GENERAL ELECTION REPORT For Period of October 28 thru November 28, 2016	November 29 and December 8, 2016	
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)		0.00
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	0.00	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	0.00	0.00
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	0.00	0.00
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)	0.00	0.00
7	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	0.00	0.00

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DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Mandy Worth
 3. Report covering period from June 1, 2016 thru August 18, 2016

2. ID #

Column A this period	Column B Campaign to Date
-------------------------	------------------------------

RECEIPTS

4. Contributions other than loans and in-kind:		
(a) Individuals – more than \$50 (Total from Schedule A)	0.00	0.00
(b) Individuals – aggregate \$50 or less (Total from Schedule A-1)	0.00	0.00
(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)	0.00	0.00
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]	0.00	0.00

DISBURSEMENTS

9. Expenditures for operating expenses (Total from Schedule D)	0.00	0.00
10. Independent Expenditures (Total from Schedule D-1)	0.00	0.00
11. Value of In-kind expenditures (Total from Schedule E)	0.00	0.00
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]	0.00	0.00
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]	0.00	0.00
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.

Amanda M. Worth (Mandy)
 Type or Print Name of Treasurer

[Signature]
 Signature of Treasurer or Candidate or Designating Individual

08/25/2016
 Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4.	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR			
a	Name <hr/> Street Address <hr/> City State Zip <hr/> Occupation Employer			
b	Name <hr/> Street Address <hr/> City State Zip <hr/> Occupation Employer			
c	Name <hr/> Street Address <hr/> City State Zip <hr/> Occupation Employer			
d	Name <hr/> Street Address <hr/> City State Zip <hr/> Occupation Employer			
e	Name <hr/> Street Address <hr/> City State Zip <hr/> Occupation Employer			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]		0.00	0.00

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

CONTRIBUTIONS of \$50 or less - AGGREGATE TOTAL*

SCHEDULE A-1

1. Committee Name Mandy Worth 2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]	0.00	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]
		6.00

*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

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
4.			
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		
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)		
			0.00
			0.00

CANDIDATE LOANS

SCHEDULE C

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

LOANS MADE OR GUARANTEED BY CANDIDATE			DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, FROM WHOM RECEIVED					
4.					
4a	Last	First Initial			
	Street Address				
	City	State Zip			
	Description				
b	Last	First Initial			
	Street Address				
	City	State Zip			
	Description				
c	Last	First Initial			
	Street Address				
	City	State Zip			
	Description				
d	Last	First Initial			
	Street Address				
	City	State Zip			
	Description				
e	Last	First 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]				0.00

OTHER LOANS

SCHEDULE C-1

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

ALL OTHER LOANS		DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4.	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN			
a	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# Street Address 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# Street Address City, State, Zip NAME OF ENDORSER OR GUARANTOR OF LOAN Street Address City, State, Zip Description			
c	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# Street Address City, State, Zip NAME OF ENDORSER OR GUARANTOR OF LOAN Street Address City, State, Zip Description			
d	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# Street Address City, State, Zip NAME OF ENDORSER OR GUARANTOR OF LOAN 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]		0.00	0.00

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
a	Name Street Address City State Zip Description of Items or Services Purchased		
b	Name Street Address City State Zip Description of Items or Services Purchased		
c	Name Street Address City State Zip Description of Items or Services Purchased		
d	Name Street Address City State Zip Description of Items or Services Purchased		
e	Name Street Address City State Zip Description of Items or Services Purchased		
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)		0.00

INDEPENDENT EXPENDITURES*

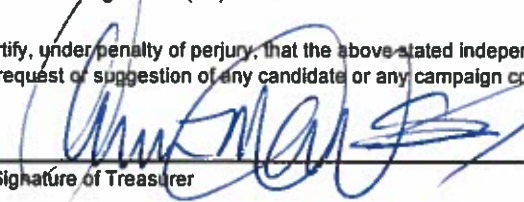
SCHEDULE D-1

1. Committee Name Mandy Worth 2. ID#
 3. Report covering period from June 1, 2016 thru August 18, 2016

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 SCHEDULE D-1 (If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A)		0.00

* 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

1. Committee Name

Mandy Worth

2. ID#

3. Report covering period from

June 1, 2016 thru August 18, 2016

4. LOANS MADE BY THE REPORTING COMMITTEE				DATE LOAN MADE	AMOUNT OF LOAN
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		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [If last page of Schedule D-2, transfer total to Detailed Summary Page, Line 12, Column A]				0.00

OFFSETS TO OPERATING EXPENSES

SCHEDULE D-3

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

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 <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund <hr/>		
b	Name <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund <hr/>		
c	Name <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund <hr/>		
d	Name <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund <hr/>		
e	Name <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund <hr/>		
f	Name <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund <hr/>		
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]		<u>0.00</u>

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME 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		
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)		0.00

REPAYMENT OF OTHER LOANS

SCHEDULE D-5

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
a	Name and ID Number <hr/> Street Address <hr/> City State Zip		
b	Name and ID Number <hr/> Street Address <hr/> City State Zip		
c	Name and ID Number <hr/> Street Address <hr/> City State Zip		
d	Name and ID Number <hr/> Street Address <hr/> City State Zip		
e	Name and ID Number <hr/> Street Address <hr/> City State Zip		
f	Name and ID Number <hr/> Street Address <hr/> 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)	<u>0.00</u>	

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER WAS MADE	AMOUNT OF THE TRANSFER
	NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE		
a	Name and ID Number <hr/> Street Address <hr/> City State Zip		
b	Name and ID Number <hr/> Street Address <hr/> City State Zip		
c	Name and ID Number <hr/> Street Address <hr/> City State Zip		
d	Name and ID Number <hr/> Street Address <hr/> City State Zip		
e	Name and ID Number <hr/> Street Address <hr/> City State Zip		
f	Name and ID Number <hr/> Street Address <hr/> City State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		<u>0.00</u>

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

	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 Number		
	Street Address		
	City State Zip		
	Description		
b	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
c	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
e	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
f	Name and ID Number		
	Street Address		
	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 Page, Line 15, Column A)		<u>0.00</u>

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE												
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN														
a	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Name, Address, City, State, Zip, and ID#</td> <td style="width: 10%;">CONTRIBUTION <input type="checkbox"/></td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="3">Description</td> </tr> <tr> <td>Occupation</td> <td colspan="2">Employer</td> </tr> </table>	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			EXPENDITURE <input type="checkbox"/>		Description			Occupation	Employer			
Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>														
	EXPENDITURE <input type="checkbox"/>														
Description															
Occupation	Employer														
b	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Name, Address, City, State, Zip, and ID#</td> <td style="width: 10%;">CONTRIBUTION <input type="checkbox"/></td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="3">Description</td> </tr> <tr> <td>Occupation</td> <td colspan="2">Employer</td> </tr> </table>	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			EXPENDITURE <input type="checkbox"/>		Description			Occupation	Employer			
Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>														
	EXPENDITURE <input type="checkbox"/>														
Description															
Occupation	Employer														
c	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Name, Address, City, State, Zip, and ID#</td> <td style="width: 10%;">CONTRIBUTION <input type="checkbox"/></td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="3">Description</td> </tr> <tr> <td>Occupation</td> <td colspan="2">Employer</td> </tr> </table>	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			EXPENDITURE <input type="checkbox"/>		Description			Occupation	Employer			
Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>														
	EXPENDITURE <input type="checkbox"/>														
Description															
Occupation	Employer														
d	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Name, Address, City, State, Zip, and ID#</td> <td style="width: 10%;">CONTRIBUTION <input type="checkbox"/></td> <td style="width: 40%;"></td> </tr> <tr> <td></td> <td>EXPENDITURE <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="3">Description</td> </tr> <tr> <td>Occupation</td> <td colspan="2">Employer</td> </tr> </table>	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>			EXPENDITURE <input type="checkbox"/>		Description			Occupation	Employer			
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)		0.00												
6	ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E (if last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A)		0.00												

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED	DATE RECEIVED	AMOUNT OF THE RECEIPT
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)		0.00

OFFSETS TO CONTRIBUTIONS RECEIVED*

SCHEDULE F-2

1. Committee Name Mandy Worth

2. ID#

3. Report covering period from June 1, 2016 thru August 18, 2016

4.	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND WAS MADE	AMOUNT OF THE REFUND
NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) TO WHOM THE REFUND WAS MADE; DESCRIPTION			
a	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund		
b	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund		
c	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund		
d	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund		
e	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Refund		
f	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> 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]		0.00

*Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name

Mandy Worth

2. ID#

3. Report covering period from

June 1, 2016

thru

August 18, 2016

DEBTS AND OBLIGATIONS		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED				
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)				0.00