



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

RECEIVED

JAN 29 2016

Yavapai County
Supt. of Schools

FOR OFFICE USE ONLY

1. **Yes Yes for Prescott Education**

Full Name of Committee
945 Ponderosa Trail

Address
Prescott 86303 928-533-1623

City Zip Code Phone

3. ID#
SCH2013-001

2. Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)
treasurer@prescottsos.com

Email Address Fax #

4. REPORTING PERIOD (Please check appropriate box)		DUE BETWEEN	
a.	<input 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 checked="" type="checkbox"/> NOVEMBER POST-ELECTION REPORT For Period of October 23 thru November 23, 2015 AMENDED	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)		6,919.64
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	7,362.59	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	1,235.04	30,411.14
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	8597.63	37,330.74
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)	7,365.30	36,098.45
7	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	1,232.33	1,232.33

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Yes Yes for Prescott Education
 3. Report covering period of 10/23/15 11/23/15

2. ID # SCH2013 001

RECEIPTS

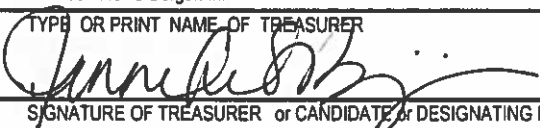
- 4. Contributions other than loans and in-kind:
 - (a) Individuals – more than \$25 (Total from Schedule A)
 - (b) Individuals – aggregate \$25 or less (Total from Schedule A-1)
 - (c) Political Committees (Total from Schedule B)
 - (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]
 - (e) Refund of contributions (Total from Schedule F-2)
 - (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]
- 5.
 - (a) Loans made or guaranteed by candidate (Total from Schedule C)
 - (b) All other loans (Total from Schedule C-1)
 - (c) Total Loans [add 5(a) and 5(b)]
- 6. In-kind contributions (Total from Schedule E)
- 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)
- 8. Total Receipts [add 4(f), 5(c), 6, and 7]

	Column A this period	Column B Campaign to Date
	1,150.00	21,910.00
	85.00	1,050.85
	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	7,450.00
	.04	.25
	1,235.04	30,411.10

DISBURSEMENTS

- 9. Expenditures for operating expenses (Total from Schedule D)
- 10. Independent Expenditures (Total from Schedule D-1)
- 11. Value of In-kind expenditures (Total from Schedule E)
- 12. Loans made by reporting committee (Total from Schedule D-2)
- 13.
 - (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)
 - (b) Repayment of all other loans (Total from Schedule D-5)
 - (c) Total Loan Repayments [all 13(a) and 13(b)]
- 14. Transfers to other political committees (Total from Schedule D-6)
- 15. Any other disbursement (Total from Schedule D-7)
- 16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]
- 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)
- 18. Total disbursements [subtract line 17 from line 16]
- 19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)

	7,365.30	28,648.45
		7,450.00
	7,365.30	36,098.45
	7,365.30	36,098.45

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.
 Jennifer S Bergamini
 TYPE OR PRINT NAME OF TREASURER

 SIGNATURE OF TREASURER or CANDIDATE or DESIGNATING INDIVIDUAL
 1/29/16
 12/3/15
 Date
 Amended

CONTRIBUTIONS more than \$25 – from INDIVIDUALS •

SCHEDULE A

1. Committee Name: Yes Yes for Prescott Education
 3. Report covering period from 10/23/15 thru 11/23/15

2. ID # SCH2013 001

4.	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE		
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR					
a.	Name Abbie Roses	10/2 /15	100.00			
	Street Address 1876 Peaceful Mesa Dr.					
	City Prescott				State AZ	Zip 86305
	Occupation Realtor				Employer Bloomtree Realty	
b.	Name Robert Schmitt	10/27/15	50.00			
	Street Address P. O. Box 5 1					
	City Prescott				State AZ	Zip 86302
	Occupation Attorney				Employer Murphy, Schmitt, Hathaway & Wilson	
c.	Name Prescott Firefighters PAC	10/27/15	1,000.00			
	Street Address P. O. Box 26045					
	City Prescott Valley				State AZ	Zip 86312
	Occupation N/A				Employer N/A	
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]		1,150.00	21,910.00		

* 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 # SCH2013 001

1. Committee Name Yes Yes for Prescott Education

3. Report covering period from 10/23/15 thru 11/23/15

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
Donations received in cash or check for 25 or less	85.00	1,050.85	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]	85.00	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	1,050.85

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

Office Revision 01/2015

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED
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 <i>[If last page of Schedule A-2, transfer total to Detailed Summary Page]</i> 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)	0.00	

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

Schedule A-2 Page 1 of 1

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

4. <u>CONTRIBUTIONS</u>		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
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

CANDIDATE LOANS

SCHEDULE C

1. Committee Name Yes Yes for Prescott Education

2. ID# SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

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.			0.00

Scheduled C Page 1 of 1

OTHER LOANS

SCHEDULE C-1

1. Committee Name Yes Yes for Prescott Education

2. ID# SCH2013-001

Office Revision 01/2015

3. Report covering period from 10/23/15

thru 11/23/15

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]			0.00

EXPENDITURES FOR OPERATING EXPENSES**

SCHEDULE D

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report Covering period from 10/23/15 thru 11/23/15

4.	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
a.	Name <u>Paypal</u> Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased <u>Payment processing fees</u>	10/28/15	3.20
b.	Name <u>Great Circle Radio</u> Street Address <u>116 S. Alto</u> City <u>Prescott</u> State <u>AZ</u> Zip <u>86301</u> Description of Items or Services Purchased <u>Radio Advertising</u>	10/27/15	376.38
c.	Name <u>Arizona's Hometown Radio Group</u> Street Address <u>P. O. Box 26523</u> City <u>Prescott Valley</u> State <u>AZ</u> Zip <u>86312</u> Description of Items or Services Purchased <u>Radio Advertising</u>	10/27/15	1,500.00
d.	Name <u>Matthew Einsohn</u> Street Address <u>713 Dameron Dr.</u> City <u>Prescott</u> State <u>AZ</u> Zip <u>86301</u> Description of Items or Services Purchased <u>Administrative Services</u>	10/27/15	2,500.00
e.	Name <u>EMI Printworks</u> Street Address <u>165 Plaza Drive</u> City <u>Prescott</u> State <u>AZ</u> Zip <u>86305</u> Description of Items or Services Purchased <u>Mailer Printing</u>	10/27/15	1,848.77
f.	Name <u>The Sanctuary International, Inc.</u> Street Address <u>221 E. Phoenix Ave</u> City <u>Flagstaff</u> State <u>AZ</u> Zip <u>86001</u> Description of Items or Services Purchased <u>Radio Advertising</u>	10/2/5	1,122.00
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 Yes Yes for Prescott Education

2. ID # SCH2013-001

3. Report Covering period from 10/23/15 thru 11/23/15

4.	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
a.	Name <u>Wells Fargo</u> Street Address <u>1831 Highway 69</u> City <u>Prescott</u> State <u>AZ</u> Zip <u>86301</u> Description of Items or Services Purchased <u>Bank Charges</u>	10/27/15	14.95
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]	7,365.30	

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

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]				0.00	

*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

REPAYMENT OF OTHER LOANS

SCHEDULE D-5

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

4. <u>REPAYMENT OF ALL OTHER LOANS</u>		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 #		
	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]		0.00

TRANSFERS TO OTHER POLITICAL COMMITTEES

1. Committee Name Yes Yes for Prescott Education

2. ID #
SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

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		
b.	Name and ID #			
	Street Address			
	City	State		
c.	Name and ID #			
	Street Address			
	City	State		
d.	Name and ID #			
	Street Address			
	City	State		
e.	Name and ID #			
	Street Address			
	City	State		
f.	Name and ID #			
	Street Address			
	City	State		
g.	Name and ID #			
	Street Address			
	City	State		
h.	Name and ID #			
	Street Address			
	City	State		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]			0.00

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

4. <u>ANY OTHER DISBURSEMENT</u>		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
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)		0.00

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

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			
a.	Name, Address, City, State, Zip, and ID #	CONTRIBUTION <input type="checkbox"/>	
		EXPENDITURE <input type="checkbox"/>	
	Description		
	Occupation	Employer	
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]		0.00
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]		0.00

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

4. <u>DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS</u> 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 <u>Wells Fargo Bank 1445737800</u> Street Address <u>1831 Highway 69</u> City <u>Prescott</u> State <u>AZ</u> Zip <u>86301</u> Description of Receipt <u>Savings account interest</u>	10/30/15	0.02
b.	Name and ID Number <u>Wells Fargo Bank 1445737800</u> Street Address <u>1831 Highway 69</u> City <u>Prescott</u> State <u>AZ</u> Zip <u>86301</u> Description of Receipt <u>Savings account interest</u>	11/30/15	0.02
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)		0.04

OFFSETS TO CONTRIBUTIONS RECEIVED

SCHEDULE F-2

2. ID # SCH2013 001

3. Report covering period from 10/23/15 thru 11/23/15

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