



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

FOR OFFICE USE ONLY

**RECEIVED**

DEC 3 2015

Yavapai County  
Supl. of Schools

**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	November 24 and December 3, 2015	
5	<b>Summary</b>	<b>Column A</b> Total This Reporting Period	<b>Column B</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

2. ID# SCH2013-001

3. Report covering period of 10/23/15 - 11/23/15

## 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)	1,150.00	21,910.00
(b) Individuals – aggregate \$25 or less (Total from Schedule A-1)	85.00	1,050.85
(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	7,450.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	.04	.25
8. Total Receipts [add 4(f), 5(c), 6, and 7]	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

12/3/15

Date

**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	10/29/15	\$100.00			
	Street Address 1876 Peaceful Mesa Dr.					
	City Prescott				State AZ	Zip 86305
	Occupation Employer					
b.	Name Robert Schmitt	10/27/15	\$50.00			
	Street Address P. O. Box 591					
	City Prescott				State AZ	Zip 86302
	Occupation Employer					
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 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]		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] <span style="float: right;">1,050.85</span>

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

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.	<b>CONTRIBUTIONS</b> 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 [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)	0.00	

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

# CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

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. CONTRIBUTIONS		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

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

4.	<b>ALL OTHER LOANS</b> 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>	10/2/15	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
<b>4. IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED</b>					
<b>a.</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	
<b>b.</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	
<b>c.</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	
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

**LOANS MADE BY REPORTING COMMITTEE**

**SCHEDULE D-2**

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

2. ID # SCH2013-001

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]				0.00

**OFFSETS TO OPERATING EXPENSES\***

SCHEDULE D-3

1. Committee Name Yes Yes for Prescott Education

2. ID # SCH2013-001

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

<b>REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES</b>		<b>DATE REFUND RECEIVED</b>	<b>AMOUNT OF THE REFUND</b>
4.	<b>NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED</b>		
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]		0.00

\* Includes return of contributions made by reporting committee

# REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

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 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]		0.00

# 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

REPAYMENT OF ALL OTHER LOANS		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)		0.00

# 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

4. TRANSFERS MADE BY THE REPORTING COMMITTEE		DATE TRANSFER WAS MADE	AMOUNT OF THE TRANSFER
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]		0.00



**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

<b>ANY OTHER DISBURSEMENT</b>		<b>DATE DISBURSEMENT MADE</b>	<b>AMOUNT OF THE DISBURSEMENT</b>
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]		0.00

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. <b>IN-KIND CONTRIBUTIONS and EXPENDITURES</b>		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.	<b>DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS</b> <b>NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE)</b> <b>FROM WHOM THE RECEIPT WAS RECEIVED</b>	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

1. Committee Name Yes Yes for Prescott Education

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

4. <b>REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED</b>		DATE REFUND WAS MADE	AMOUNT OF THE REFUND
<b>NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE REFUND WAS MADE; DESCRIPTION</b>			
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		0.00

\*Includes return of contributions received by reporting committee

**DEBTS AND OBLIGATIONS (Excluding Loans)**

1. Committee Name Yes Yes for Prescott Education

**SCHEDULE F-3**

2. ID # <b>SCH2013-001</b>
----------------------------

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

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