



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

FOR OFFICE USE ONLY

RECEIVED
OCT 27 2014

YAVAPAI COUNTY
SUPT. OF SCHOOLS

1. Partners in Education

Full Name of Committee

Treasurer, Patricia Winters

Address

508 E. Cottonwood Drive

86326

(928)593-0196

City

Zip Code

Phone

2.

Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)

Email Address

Fax #

3. ID#

09-06-0V-001

*Primary Election: August 26, 2014
General Election: November 4, 2014*

4.	REPORTING PERIOD (Please check appropriate box)	DUE BETWEEN
a.	<input type="checkbox"/> JANUARY 31 REPORT For Period of November 27, 2012 through December 31, 2013	January 1 and January 31, 2014
b.	<input type="checkbox"/> JUNE 30 REPORT For Period of January 1, 2014 through May 31, 2014	June 1 and June 30, 2014
c.	<input type="checkbox"/> PRE-PRIMARY ELECTION REPORT For Period of June 1, 2014 through August 14, 2014	August 15 and August 22, 2014
d.	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT For Period of August 15, 2014 through September 15, 2014	September 16 and September 25, 2014
e.	<input checked="" type="checkbox"/> PRE-GENERAL ELECTION REPORT For Period of September 16, 2014 through October 23, 2014	October 24 and October 31, 2014
f.	<input type="checkbox"/> POST-GENERAL ELECTION REPORT For Period of October 24, 2014 through November 24, 2014	November 25 and December 4, 2014

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)		2141.49
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	7474.57	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	555	6371
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	8029.57	8512.49
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)	1818.73	2151.75
7	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	6210.84	6360.74

**DETAILED SUMMARY PAGE OF
RECEIPTS AND DISBURSEMENTS**

1. Committee Name Partners in Education

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

3. Report covering period of September 16 to October 23, 2014

RECEIPTS

	Column A This Period	Column B Campaign to Date
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	\$500.00	\$5,951.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	\$55.00	\$420.00
(c) Political Committees (Total from Schedule B)	\$0.00	\$0.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	\$555.00	\$6,371.00
(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)]	\$555.00	\$6,371.00
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]	\$555.00	\$6,371.00

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 [add 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)

	\$1,818.73	\$2,151.75
	\$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	\$0.00
	\$1,818.73	\$2,151.75
	\$0.00	\$0.00
	\$1,818.73	\$2,151.75

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

10/24/14

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

4.	CONTRIBUTIONS			DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR					
a	Name Sodexo, Inc. & Affiliates			09/16/14	\$500.00	\$500.00
	Street Address 1728 Ocean Avenue, #222					
	City	State	Zip			
	San Francisco	CA	94112			
	Occupation	Employer				
b	Name					
	Street Address					
	City	State	Zip			
	Occupation	Employer				
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)				\$500.00	\$500.00

*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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
Miscellaneous contributions less than \$50	\$55.00	\$55.00
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]	\$55.00	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B] \$55.00

*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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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	\$0.00	\$0.00
	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

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

1. Committee Name Partners in Education

3. Report covering period from September 16, 2014 thru October 23, 2014

LOANS MADE OR GUARANTEED BY CANDIDATE				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, FROM WHOM RECEIVED						
4a	Last	First	Initial			\$0.00
	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

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

1. Committee Name Partners in Education

3. Report covering period from September 16, 2014 thru October 23, 2014

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			\$0.00
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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4. NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name Starlight Publishing Street Address 116 S. Main St. City Cottonwood AZ State Zip 86326 Description of Items or Services Purchased 100 color fliers & 300 full color fliers	09/17/14	\$256.98
b	Name Larson Newspapers Street Address POB 619 City Sedona AZ State Zip 86339 Description of Items or Services Purchased Newspaper advertising inserts	10/02/14	\$630.00
c	Name Allegra Printing Street Address 11 N Main St, Ste C City Cottonwood AZ State Zip 86326 Description of Items or Services Purchased Flyers Advertising	10/02/14	\$324.09
d	Name Tricia Winters Street Address 508 E. Cottonwood Drive City Cottonwood AZ State Zip 86326 Description of Items or Services Purchased Reimbursement for office supplies & postage	10/03/14	\$63.89
e	Name Jamie Woodward Street Address City Cornville AZ State Zip 86325 Description of Items or Services Purchased Reimbursement for door hangers	10/03/14	\$205.00
f	Name Verde Independent Street Address 116 S. Main St. City Cottonwood AZ State Zip 86326 Description of Items or Services Purchased 	10/06/14	\$338.87
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)			\$1,818.73

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 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"/>	Oppose <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"/>	Oppose <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"/>	Oppose <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
ADM Group, Inc (Construction Industry) Chasse Building Team, Inc. (Construction Industry) Wholesale Floors (Construction Industry)	\$4,000.00

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 September 16, 2014 thru October 23, 2014

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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 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)		\$0.00

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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 Street Address City State Zip		
b	Name and ID Number Street Address City State Zip		
c	Name and ID Number Street Address City State Zip		
d	Name and ID Number Street Address City State Zip		
e	Name and ID Number Street Address City State Zip		
f	Name and ID Number 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

SCHEDULE D-6

1. Committee Name Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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				
	Street Address				
	City	State	Zip		
b	Name and ID Number				
	Street Address				
	City	State	Zip		
c	Name and ID Number				
	Street Address				
	City	State	Zip		
d	Name and ID Number				
	Street Address				
	City	State	Zip		
e	Name and ID Number				
	Street Address				
	City	State	Zip		
f	Name and ID Number				
	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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

4.	ANY OTHER DISBURSEMENT	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
a	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION		
	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
	Name and ID Number		
	Street Address		
	City State Zip		
	Description		
	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)		\$0.00

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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	<p>Name, Address, City, State, Zip, and ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>Description</p> <p>Occupation</p> <p>Employer</p>		
b	<p>Name, Address, City, State, Zip, and ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>Description</p> <p>Occupation</p> <p>Employer</p>		
c	<p>Name, Address, City, State, Zip, and ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>Description</p> <p>Occupation</p> <p>Employer</p>		
d	<p>Name, Address, City, State, Zip, and ID#</p> <p>CONTRIBUTION <input type="checkbox"/></p> <p>EXPENDITURE <input type="checkbox"/></p> <p>Description</p> <p>Occupation</p> <p>Employer</p>		
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 8, 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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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 Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

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 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)

SCHEDULE F-3

1. Committee Name Partners in Education

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

3. Report covering period from September 16, 2014 thru October 23, 2014

4. DEBTS AND OBLIGATIONS		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
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				
6	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