

PM0428 10/15/20 105 Cl-14



**STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT**

COMMITTEE ID NUMBER
2020-01

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Morales for Town Council

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought: Statewide Office: _____ State Legislature: _____
 County Office: _____ City/Town Office: _____

Cumulative Report:

Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.
 Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below): _____

REPORTING PERIOD (check one):

REPORTING PERIOD	REPORT DUE
2018 4 th Quarter Report: October 21, 2018 to December 31, 2018	January 1, 2019 to January 15, 2019
2019 March Pre-Election Report (Local Only): January 1, 2019 to February 23, 2019	February 24, 2019 to March 4, 2019*
2019 1 st Quarter Report (Local Only): February 24, 2019 to March 31, 2019	April 1, 2019 to April 15, 2019
2019 1 st Quarter Report: January 1, 2019 to March 31, 2019	April 1, 2019 to April 15, 2019
2019 May Pre-Election Report (Local Only): April 1, 2019 to May 4, 2019	May 5, 2019 to May 13, 2019*
2019 2 nd Quarter Report (Local Only): May 5, 2019 to June 30, 2019	July 1, 2019 to July 15, 2019
2019 2 nd Quarter Report: April 1, 2019 to June 30, 2019	July 1, 2019 to July 15, 2019
2019 August Pre-Election Report (Local Only): July 1, 2019 to August 10, 2019	August 11, 2019 to August 19, 2019*
2019 3 rd Quarter Report (Local Only): August 11, 2019 to September 30, 2019	October 1, 2019 to October 15, 2019
2019 3 rd Quarter Report: July 1, 2019 to September 30, 2019	October 1, 2019 to October 15, 2019
2019 October Pre-Election Report (Local Only): October 1, 2019 to October 19, 2019	October 20, 2019 to October 28, 2019*
2019 4 th Quarter Report (Local Only): October 20, 2019 to December 31, 2019	January 1, 2020 to January 15, 2020
2019 4 th Quarter Report: October 1, 2019 to December 31, 2019	January 1, 2020 to January 15, 2020
2020 March Pre-Election Report (Local Only): January 1, 2020 to February 22, 2020	February 23, 2020 to March 2, 2020*
2020 1 st Quarter Report (Local Only): February 23, 2020 to March 31, 2020	April 1, 2020 to April 15, 2020
2020 1 st Quarter Report: January 1, 2020 to March 31, 2020	April 1, 2020 to April 15, 2020
2020 May Pre-Election Report (Local Only): April 1, 2020 to May 2, 2020	May 3, 2020 to May 11, 2020*
2020 2 nd Quarter Report (Local Only): May 3, 2020 to June 30, 2020	July 1, 2020 to July 15, 2020
<input checked="" type="checkbox"/> 2020 2 nd Quarter Report: April 1, 2020 to June 30, 2020	July 1, 2020 to July 15, 2020
<input checked="" type="checkbox"/> 2020 July Pre-Election Report: July 1, 2020 to July 18, 2020	July 19, 2020 to July 27, 2020*
<input checked="" type="checkbox"/> 2020 3 rd Quarter Report: July 19, 2020 to September 30, 2020	October 1, 2020 to October 15, 2020
2020 October Pre-Election Report: October 1, 2020 to October 17, 2020	October 18, 2020 to October 26, 2020*
2020 4 th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
Final Campaign Finance Report Prior to Committee Termination	End of Previous Period through Today's Date

*Reporting deadline extended to next business day. A.R.S. §§ 1-243(A) and 1-303.

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)		
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)		
(c) - Total disbursements (from "Summary of Disbursements," line 16 (cash column) for this reporting period)		

Individual Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name William & Charlene Baker		Date In-Kind Contribution Received 10/02/20	\$500.00	\$500.00	\$500.00
	Street Address 4900 N. La Calle Cita					
	City Tucson	State AZ	ZIP 85718			
	Occupation	Employer				
2	Name Fredrick S. Lewis		Date In-Kind Contribution Received 10/02/20	\$1000.00	\$1000.00	\$1000.00
	Street Address 10153 E. Arizmo St.					
	City Tucson	State AZ	ZIP 85744			
	Occupation	Employer				
3	Name Michael Raul		Date In-Kind Contribution Received 10/02/20	\$1000.00	\$1000.00	\$1000.00
	Street Address 535 W. Burton Dr.					
	City Tucson	State AZ	ZIP 85704			
	Occupation	Employer				
4	Name M. Glines		Date In-Kind Contribution Received 10/02/20	\$1000.00	\$1000.00	\$1000.00
	Street Address 535 W. Burton Dr.					
	City Tucson	State AZ	ZIP 85704			
	Occupation	Employer				
5	Name Robert mugford		Date In-Kind Contribution Received 10/02/20	\$1000.00	\$1000.00	\$1000.00
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 5(a))</small>						

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).

Individual Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Paul & Gail Ulan	Date In-Kind Contribution Received 10/02/20		\$500.00	\$500.00	500.00
	Street Address 8041 N. 14th Ave					
	City Phoenix	State AZ	ZIP 85021			
	Occupation	Employer				
2	Name Jeremy Sharpe	Date In-Kind Contribution Received 10/02/20		\$1000.00	\$1000.00	\$1000.00
	Street Address 4549 E. Ft Lowell Rd					
	City Tucson	State AZ	ZIP 85712			
	Occupation	Employer				
3	Name RDS Family Trust	Date In-Kind Contribution Received 10/02/20		\$1000.00	\$1000.00	\$1000.00
	Street Address 4549 E. Ft. Lowell Rd					
	City Tucson	State AZ	ZIP 85712			
	Occupation	Employer				
4	Name Sarah M. Weirter	Date In-Kind Contribution Received 10/02/20		\$1000.00	\$1000.00	\$1000.00
	Street Address 4549 E. Ft Lowell Rd.					
	City Tucson	State AZ	ZIP 85712			
	Occupation	Employer				
5	Name Amy & Christopher McReynolds	Date In-Kind Contribution Received		\$250.00	\$250.00	\$250.00
	Street Address 4760 W. Oasis Rd.					
	City Tucson	State AZ	ZIP 85742			
	Occupation	Employer				
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 5(a))						

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).



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IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(5)(a)

Individual Contributor Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Jennifer Sharpe		Date In-Kind Contribution Received 10/02/20	\$1000.00	\$1000.00	\$1000.00
	Street Address 4549 E. Ft. Lowell					
	City Tucson	State AZ	ZIP 85712			
	Occupation	Employer				
2	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
3	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
4	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
5	Name		Date In-Kind Contribution Received			
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule				\$9250.00	\$9250.00	9250.00
<small>(transfer the total received this period to "Summary of Receipts," line 5(a))</small>						

*If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).



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IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative In-Kind Contributions from Individuals - \$50 or Less		
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 1(b))</small>		

*If contributions of more than \$50 are listed on Schedule A(5)(a), do not include them on Schedule A(5)(b).



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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

Recipient Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name OTM			\$ 891.25 <input type="checkbox"/> Cash <input type="checkbox"/> Credit	\$ 891.25	\$ 891.25
	Street Address PO Box 187					
	City Fort Collins	CO	ZIP 80522			
	Disbursement Type Cashiers Check		Disbursement Date 10/02/20			
2	Name Primary Consultants			\$ 7950.08 <input type="checkbox"/> Cash <input type="checkbox"/> Credit	\$ 7950.08	\$ 7950.08
	Street Address 5320 N. 16 th St St. 111					
	City Phoenix	AZ.	ZIP 85014			
	Disbursement Type Check		Disbursement Date 10/02/20			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
Enter total only if last page of schedule				\$ 8841.33	8841.33	8841.33
<small>(Transfer the total disbursed this period to "Summary of Disbursements," line 12)</small>						



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TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Recipient of Surplus Monies / Source of Transferred Debt		
Total (transfer the total disbursed this period to "Summary of Disbursements," line 14)		



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OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

Debt Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Primary Consultants			\$1987.66		
	Street Address 5320 N. 16th St St. 111					
	City Phoenix	State AZ	ZIP 85016			
	Type of Account Payable or Debt Owed Debt owed		Date that Debt Accrued			
2	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
3	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
4	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
5	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
Enter total only if last page of schedule <small>(transfer the total received this period to "Summary of Receipts," line 12)</small>				\$1987.66		



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REIMBURSEMENTS MADE:

SCHEDULE B(11)

Recipient Information				Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
2	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date			
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements," line 11)</small>						