POLITICAL COMMITTEE

CITY/TOWN OF FLAGSTAFF
CAMPAIGN FINANCE REPORT
2010 March/May Regular Election

FOR OFFICE USE ONLY

1. Haughey 4 Mayor
   Full Name of Committee

   100 E Astro
   Address

   Flagstaff   86001   Coconino
   City   ZIP Code   County   Phone

2. _____
   Sponsoring Organization or Candidate and office

   _____
   Name of Candidate and Office Sought (if applicable)

   _____
   E-Mail Address   Fax #

3A. ID#

   55458182.6

4.   **REPORTING PERIOD** (Please check appropriate box)   **DUE BETWEEN**

[ ] January 31 Report - For Period of _____* thru December 31, 2009 .... January 1, 2010 and January 31, 2010

[ ] Pre-Primary Election Report - For Period of January 1, 2010 thru February 17, 2010 .... February 18, 2010 and February 25, 2010

[X] Post-Primary Election Report - For Period of February 18, 2010 thru March 29, 2010 .... March 30, 2010 thru April 8, 2010

[ ] Pre-General Election Report - For Period of March 30, 2010 thru April 28, 2010 .... April 29, 2010 thru May 6, 2010

[ ] Post-General Election Report - For Period of April 29, 2010 thru June 7, 2010 .... June 8, 2010 and June 17, 2010

[ ] **January 31 Report - For Period of June 8, 2010 thru December 31, 2011 .... January 1, 2012 and January 31, 2012

5.	SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a	Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		-0-
5b	Cash on Hand at the Beginning of this Reporting Period	1574 26	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	2633 98	12993 08
5d	Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	4208 24	
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)	2560 98	11345 82
7.	Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	1647 26	1647 26

*Insert date which is 21 days after date of last election (A.R.S. §16-913).
**Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Page **2**

1. Committee Name: _Haughey 4 Mayor_

3. Report covering period from _2/18/10_ Thru _3/29/10_

2. ID# _55458 1836_

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)	1700 00	8181 00
(b) Individuals - aggregate $25 or less (Total from Schedule A-1)	85 00	452 22
(c) Political Committees (Total from Schedule B)	-0-	-0-
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	1785 00	8633 22
(e) Refund of contributions (Total from Schedule F-2)	-0-	-0-
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	1785 00	8633 22
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	848 98	4359 86
(b) All other loans (Total from Schedule C-1)	-0-	-0-
(c) Total Loans [add 5(a) and 5(b)]	848 98	4359 86
6. In-kind contributions (Total from Schedule E)	-0-	-0-
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	-0-	-0-
8. Total Receipts [add 4(f), 5(c), 6, and 7]	2633 98	12993 08
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of $5 from Individuals (Total from Schedule A2).		
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	2560 98	11345 82
10. Independent Expenditures (Total from Schedule D-1)	-0-	-0-
11. Value of In-kind expenditures (Total from Schedule E)	-0-	-0-
12. Loans made by reporting committee (Total from Schedule D-2)	-0-	-0-
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	-0-	-0-
(b) Repayment of all other loans (Total from Schedule D-5)	-0-	-0-
(c) Total Loan Repayments [add 13(a) and 13(b)]	-0-	-0-
14. Transfers to other political committees (Total from Schedule D-6)	-0-	-0-
15. Any other disbursement (Total from Schedule D-7)	-0-	-0-
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	2560 98	11345 82
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	-0-	-0-
18. Total disbursements [subtract line 17 from line 16]	2560 98	11345 82
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	-0-	-0-

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.

Blake A Rolley
Type or Print Name of Treasurer

BL A Rolle   _3/7/10_
Signature of Treasurer or Candidate or Designating Individual   Date

CONTRIBUTIONS more than $25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name **HAUGNEVY MAYOR**

2. ID # **554 58 1826**

3. Report covering period from **2/18/10** thru **3/29/10**

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST **KENNEDY** FIRST **JILL** MI STREET ADDRESS **PO BOX 63412** CITY **PHOENIX**, STATE **AZ** ZIP **85082** OCCUPATION ~~RN~~ RN EMPLOYER **KENNEDY + ASSOC.**	2/18/10	200⁰⁰	200
b.	LAST **RICHARDSON** FIRST **PAUL** MI STREET ADDRESS **3508 S. Cocopelli** CITY **FLAGSTAFF**, STATE **AZ** ZIP **86001** OCCUPATION **RETIRED**. EMPLOYER	2/19/10	100⁰⁰	100
c.	LAST **KEMMET** FIRST **ROBERT** MI **H.** STREET ADDRESS **P.O. BOX 63412** CITY **PHOENIX**, STATE **AZ** ZIP **85082** OCCUPATION **ATTORNEY** ~~RETIRED NURSE~~ EMPLOYER **KENNEDY + ASSOC**	2/18/10	150⁰⁰	150
d.	LAST **ZNETKO**, FIRST **SANDRA** MI STREET ADDRESS **3999 E. THRUSH LN** CITY **FLAGSTAFF**, STATE **AZ** ZIP **86004** OCCUPATION **SELF-Employed** EMPLOYER	2/18/10	50⁰⁰	50
e.	LAST **WINDES** FIRST **FRANK** MI **H.** STREET ADDRESS **7301 E. OLD WALNUT CANYON** CITY **FLAGSTAFF**, STATE **AZ** ZIP **86004** OCCUPATION **INSURANCE** EMPLOYER **SELF Employed**	3/1/10	100⁰⁰	100
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]			

*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.

Page **1** of **3**

CONTRIBUTIONS more than $25 - from INDIVIDUALS*

1. Committee Name **HAUGHEY 4 MAYOR**

2. ID # 5545581826

3. Report covering period from **2/18/10** thru **3/29/10**

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a	LAST **GERHARD,** FIRST **DAVID** MI STREET ADDRESS **4395 SACRED PEAKS TR.** CITY **FLAGSTAFF** STATE **AZ** ZIP **86004** OCCUPATION **BUS. OWNER** EMPLOYER **ROOF DANCERS**	3/2/10	100⁰⁰	100—
b.	LAST **SEYB** FIRST **JOHN** MI STREET ADDRESS **1602 N. NAVAJO DR.** CITY **FLAGSTAFF,** STATE **AZ** ZIP **86001** OCCUPATION **RETIRED** EMPLOYER	3/10/10	100⁰⁰	100—
c.	LAST **LEWIS** FIRST **EVERETT** MI STREET ADDRESS **1465 W. MELISSA** CITY **FLAGSTAFF** STATE **AZ** ZIP **86001** OCCUPATION **COMPUTER TECH.** EMPLOYER **SELF EMPLOYED**	3/15/10	200⁰⁰	400⁰⁰
d.	LAST **KENNEDY** FIRST **JILL.** MI STREET ADDRESS **P.O. BOX 63412** CITY **PHOENIX,** STATE **AZ** ZIP **85082** OCCUPATION **REG. NURSE.** EMPLOYER **KENNEDY+ASSOC.**	3/17/10	200⁰⁰	400⁰⁰
e.	LAST **KEMMET,** FIRST **ROBERT** MI **H.** STREET ADDRESS **P.O. BOX 63412** CITY **PHENIX,** STATE **AZ** ZIP **86082** OCCUPATION **ATTORNEY** EMPLOYER **KENNEDY +ASSX**	3/17/10	150⁰⁰	300⁰⁰
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]			

*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 more than $25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name __HANGHEY 4 MAYOR__

2. ID # __5545581826__

3. Report covering period from __2/18/10__ thru __3/29/10__

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a	LAST CASSIDY FIRST HARVEN MI STREET ADDRESS 3187 &o GILA DR. CITY FLAGSTAFF STATE AZ ZIP 86001 OCCUPATION RETIRED. EMPLOYER	3/20/10	100⁰⁰	100—
b.	LAST STAVELEN FIRST JOY MI STREET ADDRESS 1117 E. MARINA LN CITY FLAGSTAFF, STATE AZ ZIP 86004 OCCUPATION BUS. OWNER EMPLOYER CANYONEERS	3/24/10	100⁰⁰	100—
c.	LAST M°CANCE JR. FIRST BILL MI STREET ADDRESS 11160 N. DESERT VIEW LN CITY FLAGSTAFF, STATE AZ ZIP 86004 OCCUPATION RETIRED. EMPLOYER	3/26/10	50⁰⁰	50—
d.	LAST WITTG FIRST DAN MI STREET ADDRESS P.O. BOX 25913 CITY MUNDS PARK, STATE AZ ZIP 86017 OCCUPATION COMPUTER TECH EMPLOYER SELF	3/26/10	100⁰⁰	100—
e.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		1700—	8633²²

*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.

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CONTRIBUTIONS of $25 or less - AGGREGATE TOTAL* SCHEDULE A-1

1. Committee Name __HAUGHEY 4 MAYOR__

2. ID # __55458 1836__

3. Report covering period from __2/18/10__ thru __3/29/10__

4. Aggregate Total of Contributions of $25 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
WILLIAM GRAFTON	25.00	25
CORAL EVANS	10.00	10
JANIE COOK	25.00	25
DOROTHY TRUMPP	25.00	25
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	85.00	
6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]		452.22

*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.

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name HAUGHEY 4 MAYOR		2. ID# 554581836	
3.	Report covering period from 2/18/10 thru 8/29/10			

4.	**LOANS MADE OR GUARANTEED BY CANDIDATE** NAME AND ADDRESS FROM WHOM RECEIVED	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP JOSEPH P. HAUGHEY 100 E. ASTRO LN, FLAGSTAFF AZ 86001			
	DESCRIPTION 4X4 CAMPAING SIGNS	2/18/10	794⁰⁰	
b.	NAME, ADDRESS, CITY, STATE, AND ZIP JOSEPH P. HAUGHEY 100 E. ASTRO, FLAGSTAFF, AZ 86001			
	DESCRIPTION FUNDRAISER Supplies	2/26/10	54.98	
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND 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]		848⁹⁸	4359⁸⁶

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name __Haughey 4 Mayor__

2. ID # __554581836__

3. Report covering period from __2/18/10__ thru __3/29/10__

4	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Colby Poster Printing 1332 W. 12th Pl. Los Angeles, CA 90015 DESCRIPTION OF ITEMS OR SERVICES PURCHASED 4x4 Campaign Signs.	2/18/10	794.00
b.	NAME, ADDRESS, CITY, STATE AND ZIP Colby Poster Printing 1332 W. 12th Pl. Los Angeles, CA 90015 DESCRIPTION OF ITEMS OR SERVICES PURCHASED All Signs For Gen. Election	3/9/10	1,712.00
c.	NAME, ADDRESS, CITY, STATE AND ZIP Sams Club DESCRIPTION OF ITEMS OR SERVICES PURCHASED Food & Supplies Fundraising Event	2/26/10	54.98
d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	NAME, ADDRESS, CITY, STATE AND 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 Detail Summary Page Line 9, Column A]		2560.98

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

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