FOR OFFICE USE ONLY

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

1	David Evans for C	ouncil						
1	Full Name of Committee						:	
	P. O. Box 3233							
	Address							
_	Flagstaff, AZ	86003	Coconii	no	(928) 526-7	971		
	City		ZIP Code	County	Phone			
2							3A. ID#	
	Sponsoring Organization or	Candidate and office						
-	Name of Candidate and Offi davidevans1550							
-	E-Mail Address	@gman.com	Fax#					
4.	REPORTI	NG PERIOD (P	lease check appropriat	e box)				DUE BETWEEN
	January 31 R	eport - For Period	l of	* thru Dec	ember 31, 2009 .		Janua	ry 1, 2010 and January 31, 201
	Pre-Primary E	lection Report	- For Period of	January 1, 201	0 thru February 17	, 2010	February	18, 2010 and February 25, 201
✓	Post-Primary	Election Repo	rt - For Period of	February 18,	2010 thru March 2	9, 2010		March 30, 2010 thru April 8, 201
	Pre-General E	Election Report	t - For Period of	March 30, 201	0 thru April 28, 201	10		April 29, 2010 thru May 6, 201
	Post-General	Election Repo	rt - For Period o	April 29, 2010) thru June 7, 2010)		June 8, 2010 and June 17, 201
	**January 31	Report - For Per	iod of June 8, 20	10 thru Decem	ber 31, 2011		Janua	ry 1, 2012 and January 31, 201:
5.		SUMI	MARY	ı		To	olumn A otal This rting Period	Column B Election Period Total To Date
5a	Surplus from Pre Organization wa				f			0.00
5b	Cash on Hand a	t the Beginning	of this Report	ing Period	_	\$	616.28	
5c	Total Receipts (I Summary Page,		ding columns	on Detailed		\$2,	201.05	\$5,338.50
5d	Subtotal [add Li a and c for Colu		Column A and	d add lines		\$2,8	317.33	\$5,338.50
6а	Total Debts and Beginning of this Organization wa	Election Perior	d (or at time S	tatement of				

Total Disbursements (from corresponding columns on

Cash on Hand at Close of Reporting Period [Subtract

subtract this line from the other lines]

Detailed Summary Page, Line 18)

Line 6b from Line 5d]

\$484.49

\$3,005.66

^{*}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: David Evans for Council	2. ID#	
3.	Report covering period from 02/18/10 Thru 03/29/10		
_	RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4.	Contributions other than loans and in-kind:	\$1,270	\$3,570
	(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)]	\$1,270.00	\$3,570.00
5.	(a) Loans made or guaranteed by candidate (Total from Schedule C)	931.05	1,768.50
	(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]	\$2,201.05	\$5,338.50
	QUALIFYING CONTRIBUTION RECEIPTS		
Qu	alifying Contributions of \$5 from Individuals (Total from Schedule A2).]
	DISBURSEMENTS		
9.	Expenditures for operating expenses (Total from Schedule D)	\$484.49	\$3,005.66
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]	\$484.49	\$3,005.66
19	. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		
	ertify, under penalty of perjury, that I have examined the contents of this campaign finance report and	to the best of my knowledge	e and belief it is true and
mpleمسر	David Evans		
pe or	Print Name of Treasurer		
	m (Se 2 1/2	1/10	
anati	re of Treasurer or Candidate or Designating Individual Da	ate	

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

							2. ID#	
	Committee Name	for Council						
	3. Report covering period from 02/18	3/10			thru_	03/29/10	-1	
4		CONTRIBUTION				DATE RECEIVED	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR						PERIOD	TO DATE
4a.	SEE ATTACHED LIST	FIRST		МІ				
	STREET ADDRESS							
	СПҮ	STATE		ZIP				
	OCCUPATION		EMPLOYER	·				
b.	LAST	FIRST		Μī				
	STREET ADDRESS							
	CITY	STATE	,	ZIP				
	OCCUPATION		EMPLOYER	*******	"	•		
C.	LAST	FIRST		MI				
	STREET ADDRESS							
	СІТҮ	STATE		ZIP				
	OCCUPATION		EMPLOYER '		•			
d.	LAST	FIRST		MI				
	STREET ADDRESS							
	СІТУ	STATE		ZIP				
	OCCUPATION		EMPLOYER					<u>.</u>
e.	LAST	FIRST	·	MI				
	STREET ADDRESS							
	CITY	STATE		ZIP				-
	OCCUPATION	<u> </u>	EMPLOYER					
5.	ENTER TOTAL ONLY IF LAST PAGE OF: Summary Page Line 4(z), Column Aj	SCHEDULE A [If last	page of Schedule	A, transfer total	to Detailed	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
l	Запини у гаде сте 4(2), Сошти Ај						<u> </u>	1

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

David Evans for Council

1. Committee Name

3. Report covering period from 02/18/10

SCHEDULE A-1

2. ID#

thru_03/29/10

4. Aggregate Total of Contributions of \$25 or less						
DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE				
NONE						
		,				
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]		6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE				
		[Transfer total to Detailed Summary Page, Line 4(b), Column B]				

^{*}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.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE **B**

	1. Committee Name _	avid Evans for Council		
	Report covering per		V/10	
4		CONTRIBUTIONS	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
		DENTITY OF CONTRIBUTOR AND DATE RECEIVED	THIS PERIOD	CAMPAIGN TO DATE
4a	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED	NONE		
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 Detailed Summary Page,	LAST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to Line 4(c), Column A]		

CANDIDATE LOANS SCHEDULE C Committee Name David Evans for Council 2. ID# thru 03/29/10 Report covering period from 02/18/10 3. **AMOUNT CUMULATIVE** DATE LOANS MADE OR GUARANTEED BY CANDIDATE RECEIVED RECEIVED TOTAL THIS CAMPAIGN NAME AND ADDRESS FROM WHOM RECEIVED TO DATE NAME, ADDRESS, CITY, STATE, AND ZIP 4a. 03/23/10 30.40 867.85 Office Max 4601 Railhead; Flagstaff AZ 86004 Personal credit card for copy paper and envelopes NAME, ADDRESS, CITY, STATE, AND ZIP Office Max 03/23/10 12.65 880.50 4601 Railhead; Flagstaff AZ 86004 DESCRIPTION Personal credit card for card stock and copying NAME, ADDRESS, CITY, STATE, AND ZIP USPS; Flagstaff, AZ 03/23/10 88.00 968.50 DESCRIPTION personal credit card for stamps NAME, ADDRESS, CITY, STATE, AND ZIP David Evans 700.00 03/24/10 1,668.50 P.O. Box 3233 Flagstaff, AZ 86003 DESCRIPTION Loan from personal account NAME, ADDRESS, CITY, STATE, AND ZIP 03/24/10 100.00 1.768.50 David Evans P.O. Box 3233 Flasgstaff, AZ 86003 DESCRIPTION NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C 5. [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A] 1,768.50 931.05

OTHER LOANS

SCHEDULE C1

1.	Committee Name		2. ID#	·w.
3.	Report covering period from 02/18/10 thru 03	N/29/10		
		Ì	I	1
4	ALL OTHER LOANS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR 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, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION		·	
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Page, Line 5(a), Column A]	Detailed Summary		

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE **D**

	2. ID#	
Committee Name David Evans for Council		
Report covering period from 02/18/10	thru 03/29/10	

	3. Report covering period from 02/18/10 thru 03/29/10		
4	EXPENDITURES EXPENDITURES AND THE PROPERTY OF THE PROPERTY WAS MADE.	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE NAME, ADDRESS, CITY, STATE AND ZIP		
	Flagstaff Chamber of Commerce 101 W. Route 66 Flagstaff, AZ 86001	03/10/10	150.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Newsletter insert		
b.	NAME, ADDRESS, CITY, STATE AND ZIP Office Max 4601 Railhead Flagstaff, AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED copy paper	03/23/10	30.40
C.	NAME, ADDRESS, CITY, STATE AND ZIP Office Max 4601 Railhead Flagstaff, AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED card stock and copying	03/23/10	12.65
d.	NAME, ADDRESS, CITY, STATE AND ZIP USPS Flagstaff, AZ	03/23/10	88.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED postage stamps		
е.	NAME, ADDRESS, CITY, STATE AND ZIP Arizona Daily Sun 1751 S. Thompson Flagstaff, AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED 1751 S. Thompson	02/27/10	203.44
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]		484.49

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

INDEPENDENT EXPENDITURES*

SCHEDULE **D-1**

	Committee Name David Evans for Council Report covering period from 02/18/10 thru_03/29/1	0	
4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	MADE	EXPENDITU
4a.	NAME, ADDRESS, CITY, STATE AND ZIP		
	NONE		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
	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 AJ	
	EE A.R.S. § 16-901(14).		1
*S	fy, under pently of perjury, that the above stated independent expenditure(s) was not made in coolest or suggestion of any candidate or any campaign committee or agent of that candidate.	peration, consultation or co	ncert with or a
erti			
erti) { E->		
certi	ture of Treasurer		·
erti	NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRISIX MONTHS		AMOUN
certi	NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRI	RIBUTORS WITHIN THE LAST	AMOMA

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

2. ID#

	Committee Name David Evans for Council		
	3. Report covering period from 02/18/10		
4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE	20744 1887 (32	01 1112 20711
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
	none		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
_	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
C.	TVANIE, ADDRESS, OTT, STATE, AIR TOW		
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
			111111111111111111111111111111111111111
е.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		
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Page___of ___

OFFSETS TO OPERATING EXPENSES *

SCHEDULE **D-3**

		2. ID#	
	1. Committee Name David Evans for Council		
	3. Report covering period from 02/18/10 thru 03/2910		
	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES	DATE REFUND	AMOUNT OF THE REFUND
	NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	RECEIVED	REFUND
a.	NAME, ADDRESS, CITY, STATE, AND ZIP NONE		
	DESCRIPTION OF REFUND		
o .	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
C.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND 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 Pag Line 17 Column A]	e	
*	Includes return of contributions made by reporting committee		
		Schedule	D-3 Page of

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

	1. Committee Name		,
	3. Report covering period from 02/18/10 thru 03/29/10		
	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4 a.	NAME, ADDRESS, CITY, STATE, AND ZIP NONE		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		

REPAYMENT OF ALL OTHER LOANS

NONE

SCHEDULE **D-5**

	1. Committee Name	<u></u>	
	3. Report covering period from 02/18/10 thru 03/29/10	A-SILVANA V	
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	WADE	
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# NONE		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
Ć	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
, ,			
-			
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
		·	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		
			<u> </u>

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

	Committee Name David Evans for Council		
	3. Report covering period from 02/18/10 thru 03/29/10		
4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE)		
	TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# NONE		
b,	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		[
u.	NAME, ADDICESS, CITT, STATE, ZE AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		

IN-KIND CONTRIBUTIONS and EXPENDITURES

(* , * 0 ¥

SCHEDULE ${f E}$

	Committee Name David Evans for Council		2. ID#	
	3. Report covering period from	thru_ 03/29/10		
4	IN-KIND CONTRIBUTIO	NS and EXPENDITURES	DATE	FAIR MARKET VALUE
	NAME AND ADDRESS OF INDIVIDUAL POLITICAL COMMITTEE) FROM WH	(OR NAME, ADDRESS AND ID# OF THE OM RECEIVED OR TO WHOM GIVEN		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# NONE	CONTRIBUTION • • EXPENDITURE • •	_	
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION * * EXPENDITURE * *		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			:
	OCCUPATION	EMPLOYER		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PA	GE OF SCHEDULE E [If last page of Schedule E, transfer total to D	etailed Summary Page	
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PA	GE OF SCHEDULE E [If last page of Schedule E, transfer total to I	etailed Summary Page	

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID# NONE

	Committee Name David Evans for Council		
	3. Report covering period from 02/18/10 thru 03/29/10		
4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# NONE		
	DESCRIPTION OF RECEIPT]	
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT	1	
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT	-	
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT	-	
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	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		

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

		2. ID#
David Evans for Council		
3. Report covering period from 02/18/10	thru_03/29/10	

4			AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	MADE	KEFUNU
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	NONE		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	·		
	DESCRIPTION OF REFUND		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
		}	
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
 			
		1	1
1	DESCRIPTION OF REFUND		
е.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
₽.	1909 (mg 1000) 00 1, 0171 Epider 1909 1909		
	DECORPOSION OF REFUND	1	
1	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
			1
		_	
	DESCRIPTION OF REFUND		
<u> </u>		<u>L</u>	

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 AJ

* Includes return of contributions received by reporting committee

Page	of

DEBTS AND OBLIGATIONS (Excluding Loans)

er jare for

SCHEDULE F-3

	Committee Name David Evans for Council				Z. 10 #
	3. Report covering period from 02/18/10		thru_03/29/	10	
4	DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND 1D# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# NONE				
	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				
е.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLC F-3 [Transfer total to Detail Summary Page Line 19, Co	OSE OF THIS PERIO	D ONLY IF LAST PAGE C	F SCHEDULE	