POLITICAL COMMITTEE

CITY/TOWN OF FLAGSTAFF

CAMPAIGN FINANCE REPORT

2012 March/May Regular Election

FOR OFFICE USE ONLY

1. Nabours for Mayor Committee
Full Name of Committee

10 E Dale Ave
Address

Flagstaff AZ 86001 Coconino (928) 779 5105
City ZIP Code County Phone

2.
Sponsoring Organization or Candidate and office

Jerry Nabours, Flagstaff Mayor
Name of Candidate and Office Sought (if applicable)

gnabours@gmail.com (928) 779 0447
E-Mail Address Fax #

3A. ID#
PC 2011-07

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

- [ ] January 31 Report - For Period of 11/22/2010 * thru December 31, 2011 ..... January 1, 2012 and January 31, 2012
- [ ] Pre-Primary Election Report - For Period of January 1, 2012 thru February 22, 2012 ..... February 23, 2012 and March 1, 2012
- [ ] Post-Primary Election Report - For Period of February 23, 2012 thru April 2, 2012 ..... April 3, 2012 thru April 12, 2012
- [ ] Pre-General Election Report - For Period of April 3, 2012 thru April 25, 2012 ..... April 26, 2012 thru May 3, 2012
- [x] Post-General Election Report - For Period of April 26, 2012 thru June 4, 2012 ..... June 5, 2012 and June 14, 2012
- [ ] **January 31 Report - For Period of June 5, 2012 thru December 31, 2013 ..... January 1, 2014 and January 31, 2014

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)		
5b Cash on Hand at the Beginning of this Reporting Period	1,046	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	1,425	15,400
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	2,471	15,400
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]		
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	2,337	15,266
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	134	134

*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

1. Committee Name: _____

2. ID#

3. Report covering period from _____ Thru _____

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)	1,400	14,230
(b) Individuals - aggregate $25 or less (Total from Schedule A-1)	25	170
(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)]	1,425	14,400
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		1,000
(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]	1,425	15,400
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of $5 from Individuals (Total from Schedule A2).		
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	2,337	15,266
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]	2,337	15,266
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		

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.

BRUCE NORDSTROM

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

Date 6/13/12

CONTRIBUTIONS more than $25 - from INDIVIDUALS*

SCHEDULE **A**

2. ID #

1. Committee Name Nabours for Mayor Comm

3. Report covering period from 4/26/12 thru 6/4/12

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST: Bene FIRST: Charles MI: E. Jr STREET ADDRESS: 8750 N Roundtree Rd CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Retired EMPLOYER:	5/2/12	250	250
b.	LAST: Flagstaff Rolloff and Storage Units, Inc FIRST: MI: STREET ADDRESS: 5400 E Empire Ave CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Bleeker's Boxes EMPLOYER:	5/8/12	125	125
c.	LAST: Cunningham FIRST: Michael MI: STREET ADDRESS: 5330 S Cassandra CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Owner of Carpets of Dalton EMPLOYER: Carpets of Dalton	5/11/12	200	200
d.	LAST: Garbarino FIRST: William MI: F. STREET ADDRESS: 2181 W Blue Willow Rd CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Retired judge EMPLOYER:	5/8/12	100	200
e.	LAST: Geile FIRST: Robert MI: G. STREET ADDRESS: 5400 E Mt. Pleasant Dr. CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Private investor EMPLOYER: Self	5/8/12	200	200
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]*		1,400	

*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**

2. ID #

1. Committee Name Nabours for Mayor Comm

3. Report covering period from 4/26/12 thru 6/4/12

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST: Golightly FIRST: Michael MI: M. STREET ADDRESS: 3900 E. Huntington Dr CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Business Owner EMPLOYER: Golightly Tire	5/11/12	100	100
b.	LAST: Marxen FIRST: Terrence MI: R. STREET ADDRESS: 1520 W. Tolchaco Tr. CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Business Owner EMPLOYER: Marxen Chevrolet	5/2/12	200	200
c.	LAST: Nabours FIRST: Warren MI: R. STREET ADDRESS: 9701 110th St. Ct. CITY: Lakewood STATE: WA ZIP: 98498 OCCUPATION: Retired Air Force officer EMPLOYER:	5/11/12	100	100
d.	LAST: T.L.C. Inc FIRST: MI: STREET ADDRESS: 5400 E. Empire Ave CITY: Flagstaff STATE: AZ ZIP: 86004 OCCUPATION: Business operator, Landscape Conn. EMPLOYER:	5/8/12	125	125
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]*		1,400	14,400

*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**

1. Committee Name Nabours for Mayor Comm

2. ID #

3. Report covering period from 4/26/12 thru 6/4/12

4. Aggregate Total of Contributions of $25 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
Single donor	25	170	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A] 25	25	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	170

*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 Nabours for Mayor Comm

2. ID #

3. Report covering period from 4/26/12 thru 6/4/12-0-

4	CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
4a	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-		-0-	-0-

Schedule B Page____of____

CANDIDATE LOANS

SCHEDULE **C**

1.	Committee Name Nabours for Mayor Comm.	2. ID #
3.	Report covering period from 4/26/12 thru 6/4/12	

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			
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
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]		-0-	

Schedule C Page_____of_____

OTHER LOANS

SCHEDULE **C1**

1. Committee Name Nabours for Mayor Comm

2. ID #

3. Report covering period from 4/26/12 thru 6/4/12

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 Detailed Summary Page, Line 5(a), Column A]		-0-	-0-

Page____of____

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE **D**

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from 4/26/12 thru 6/4/12

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 Northern Arizona IT Solutions Suite 1 2717 N. Steves Blvd. Flagstaff AZ 86004 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Prepare voter mailing list	5/1/12	200
b.	NAME, ADDRESS, CITY, STATE AND ZIP PayPal.com DESCRIPTION OF ITEMS OR SERVICES PURCHASED Handling fees	5/11/12	10
c.	NAME, ADDRESS, CITY, STATE AND ZIP Facebook.com DESCRIPTION OF ITEMS OR SERVICES PURCHASED Advertising	5/15/12	56
d.	NAME, ADDRESS, CITY, STATE AND ZIP Arizona Daily Sun 1751 S. Thompson St Flagstaff AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Advertising	5/21/12	198
e.	NAME, ADDRESS, CITY, STATE AND ZIP Cactus Mailing Co. Suite 103 16121 N. 78th St Scottsdale AZ 85260 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Copying and mailing advertising material	5/25/12	1873
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]*		2,337

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

INDEPENDENT EXPENDITURES*

SCHEDULE **D-1**

2. ID #

1. Committee Name Nabours for Mayor Comm

3. Report covering period from 4/26/12 thru 6/4/12

4	INDEPENDENT EXPENDITURES IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP 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		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ☐ Opposed ☐ 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-

*SEE A.R.S. § 16-901(14).

I certify, under pently 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
Michael Souris, Real estate broker, self employed	400
James G. Pleasant, commercial loan officer, Mission Bank	300
Charles E. Bene Jr., retired	250

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE **D-2**

2. ID #

1. Committee Name Nabours for Mayor

3. Report covering period from 4/26/12 thru 6/4/12

4	LOANS MADE BY THE REPORTING COMMITTEE NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE	DATE LOAN MADE	AMOUNT OF THE LOAN
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
c.	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#		
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]*		-0-

OFFSETS TO OPERATING EXPENSES *

SCHEDULE **D-3**

2. ID #

1. Committee Name Nabours for Mayor Comm

3. Report covering period from 4/26/12 thru 6/4/12

	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		
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
b.	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 Page Line 17 Column A]*		-0-

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE **D-4**

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from 4/26/12 thru 6/4/12

	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
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]		-0-

REPAYMENT OF ALL OTHER LOANS

SCHEDULE **D-5**

2. ID #

1. Committee Name

3. Report covering period from 4/26/12 thru 6/4/12

4	REPAYMENT OF ALL OTHER LOANS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	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]		-0-

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE **D-6**

2. ID #

1. Committee Name Nabours for Mayor Comm

3. Report covering period from 4/26/12 thru 6/4/12

4	TRANSFERS MADE BY THE REPORTING COMMITTEE NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	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-6 [Transfer total to Detailed Summary Page, Line 14, Column A] -0-

ANY OTHER DISBURSEMENT

SCHEDULE **D-7**

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 4/26/12 thru 6/4/12

	ANY OTHER DISBURSEMENTS NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 *(Transfer total to Detailed Summary Page Line 15 Column A)* -0-

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE **E**

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 4/26/12 thru 6/4/12

4	IN-KIND CONTRIBUTIONS and EXPENDITURES		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			
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	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 PAGE OF SCHEDULE E *[If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]*			
6.	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 11, Column A]*			-0-

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE **F-1**

2. ID #

1. Committee Name Nabours for Mayor Comm

3. Report covering period from 4/26/12 thru 6/4/12

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
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*

-0-

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE **F-2**

2. ID #

1. Committee Name Nabours for Mayor Comm.

3. Report covering period from 4/26/12 thru 6/4/12

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	DATE REFUND MADE	AMOUNT OF THE REFUND
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# 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# DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# 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-

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE **F-3**

1. Committee Name Nabours for Mayor Comm.

2. ID #

3. Report covering period from 4/26/12 thru 6/4/12

4	DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# 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#				
	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 *[Transfer total to Detail Summary Page Line 19, Column A]*				-0-