POLITICAL COMMITTEE
CITY OF _____
CAMPAIGN FINANCE REPORT
2016 August/November Regular Election

1. **Committee to Elect Karla Brewster**

Full Name of Committee

1401 N 4th St #144

Address

Flagstaff   AZ   86001

City   ZIP Code   County   Phone

2. _____

Sponsoring Organization or Candidate and office

Karla Brewster for Flagstaff City Council

Name of Candidate and Office Sought (if applicable)

karlabrewster2@aol.com

E-Mail Address   Fax #

3A. ID#

CC 2016-02

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

- [ ] January 31 Report - For Period of _____* thru December 31, 2015 . . . . January 1, 2016 and February 1, 2016
- [ ] June 30 Report - For Period of January 1, 2016 thru May 31, 2016 . . . . June 1, 2016 and June 30, 2016
- [✓] Pre-Primary Election Report - For Period of June 1, 2016 thru August 18, 2016 . . . . August 19, 2016 and August 26, 2016
- [ ] Post-Primary Election Report - For Period of August 19, 2016 thru September 19, 2016 . . . . September 20, 2016 and September 29, 2016
- [ ] Pre-General Election Report - For Period of September 20, 2016 thru October 27, 2016 . . . . October 28, 2016 and November 4, 2016
- [ ] Post-General Election Report - For Period of October 28, 2016 thru November 28, 2016 . . . . November 29, 2016 and December 8, 2016
- [ ] **January 31, Report - For Period of November 29, 2016 thru December 31, 2017 . . . . January 1, 2018 and January 31, 2018

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	1455	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	2100	4113
5d	Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	3555	4113
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)	233	791
7.	Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	3322	3322

*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.

Revised 5/15

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

1. Committee Name: **Committee to Elect Karla Brewster**

3. Report covering period from **6/1/16** Thru **8/18/16**

2. ID#

CC 2016-02

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)	1750	3658
(b) Individuals - aggregate $50 or less (Total from Schedule A-1)	350	455
(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)]	2100	4113
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(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]	2100	4113
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	233	791
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)		

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.

Type or Print Name of Treasurer

Karla Brewster

Signature of Treasurer or Candidate or Designating Individual

8/20/16

Date

CONTRIBUTIONS more than **$50** - from INDIVIDUALS*

SCHEDULE A

2. ID#
CC 2016 -02

1. Committee Name __Committee to Elect Karla Brewster__

3. Report covering period from __6/1/16__ thru __8/18/16__

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			
4a.	LAST Vora FIRST Dharmesh MI	7/10/16	250	250
	STREET ADDRESS 6360 E Abineau Canyon Rd			
	CITY Flagstaff STATE AZ ZIP 86004			
	OCCUPATION Financial Planner EMPLOYER Self			
b.	LAST Millis FIRST Robert MI	7/13/16	100	100
	STREET ADDRESS 5055 W Kiltie Lane			
	CITY Flagstaff STATE AZ ZIP 86005			
	OCCUPATION Retired EMPLOYER			
c.	LAST Staveley FIRST Gaylord MI	7/17/16	300	300
	STREET ADDRESS 1117 E Marina Lane			
	CITY Flagstaff STATE AZ ZIP 86004			
	OCCUPATION Business Owner EMPLOYER Canyoneers			
d.	LAST Cortez FIRST Guillermo MI	7/21/16	100	100
	STREET ADDRESS 2332 N. Fremont			
	CITY Flagstaff STATE AZ ZIP 86001			
	OCCUPATION Engineer EMPLOYER S-W Engineering			
e.	LAST Paulson FIRST Gretchen MI	7/19/16	100	100
	STREET ADDRESS 323 W Apache Rd			
	CITY Flagstaff STATE AZ ZIP 86001			
	OCCUPATION Office Mgr EMPLOYER NAU			
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 $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 more than $50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

CC 2016 -02

1. Committee Name __Committee to Elect Karla Brewster__

3. Report covering period from __6/1/16__ thru __8/18/16__

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST: Harris FIRST: Hilton MI: STREET ADDRESS: 2328 N Cypress Point CITY: Flagstaff STATE: AZ ZIP: 86004 OCCUPATION: Real Estate Broker EMPLOYER: Self	7/22/16	100	100
b.	LAST: Patel FIRST: Hiren MI: STREET ADDRESS: 223 S Milton Rd CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Motel Owner EMPLOYER: Self	7/13/16	100	100
c.	LAST: Dullbson FIRST: Dino MI: STREET ADDRESS: 4800 E Mt Pleasant CITY: Flagstaff STATE: AZ ZIP: 86004 OCCUPATION: Business Owner EMPLOYER: Econolodge	7/17/16	100	100
d.	LAST: McCoy FIRST: Lavelle MI: STREET ADDRESS: 1482 E Castle Hills Dr CITY: Flagstaff STATE: AZ ZIP: 86001 OCCUPATION: Real Estate Mgr EMPLOYER: NACET	8/1/16	300	300
e.	LAST: Prema FIRST: Dhiru MI: STREET ADDRESS: 3345 Skye Way CITY: Flagstaff STATE: AZ ZIP: 86005 OCCUPATION: Business Owner EMPLOYER: Self	7/12/16	100	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 $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 more than **$50** - from INDIVIDUALS*

SCHEDULE A

1. Committee Name __Committee to Elect Karla Brewster__

3. Report covering period from __6/1/16__ _thru__8/18/16__

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST **Patel**	FIRST **Ashokkumar**	MI	7/12/16	100	100
	STREET ADDRESS 2285 E Butler Ave #201					
	CITY Flagstaff	STATE AZ	ZIP 86004			
	OCCUPATION Motel Owner	EMPLOYER Self				
b.	LAST **Keshav**	FIRST **Pramoudkumar**	MI	7/13/16	100	100
	STREET ADDRESS 2255 E Bristlecone Dr					
	CITY Flagstaff	STATE AZ	ZIP 86004			
	OCCUPATION Motel Owner	EMPLOYER Self				
c.	LAST	FIRST	MI			
	STREET ADDRESS					
	CITY	STATE	ZIP			
	OCCUPATION	EMPLOYER				
d.	LAST	FIRST	MI			
	STREET ADDRESS					
	CITY	STATE	ZIP			
	OCCUPATION	EMPLOYER				
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]				1750	1750

*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

2. ID#
CC 2016-02

1. Committee Name **Committee to Elect Karla Brewster**

3. Report covering period from **6/1/16** thru **8/18/16**

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
Two checks @ $50 Two checks @ $25 Four cash @ $50	350	455	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	350	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	455

*If contributions of $50 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#
CC 2016-02

1. Committee Name **Committee to Elect Karla Brewster**

3. Report covering period from **6/1/16** thru **8/18/16**

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 Print Raven 1300 S. Milton Rd Flagstaff AZ 86001 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing	6/2/16	28
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Print Raven DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing	7/27/16	19
4c.	NAME, ADDRESS, CITY, STATE AND ZIP Print Raven DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing	8/10/16	81
4d.	NAME, ADDRESS, CITY, STATE AND ZIP Print Raven DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing	8/17/16	105
4e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	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]		233

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