POLITICAL COMMITTEE
CITY/TOWN OF _____
CAMPAIGN FINANCE REPORT
2013 August/November Regular Election

FOR OFFICE USE ONLY

FILED WITH CITY CLERK

Date 6.13.13 Hr. 10:45 AM

Sign. [signature]

1. COMMITTEE TO REELECT LEN SCAMARDO
Full Name of Committee

3 [illegible] D
Address

PRESCOTT AZ 86303
City ZIP Code County Phone

2. _____
Sponsoring Organization or Candidate and office

LEN SCAMARDO - COUNCILMAN CAP
Name of Candidate and Office Sought (if applicable)

LEN SCAMARDO @ [illegible]
E-Mail Address Fax #

3A. ID#
2013-02/PC

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

- [ ] January 31 Report - For Period of _____* thru December 31, 2012 ..... January 1, 2013 and January 31, 2013
- [x] June 30 Report - For Period of January 1, 2013 thru May 31, 2013 ..... June 1, 2013 and June 30, 2013
- [ ] Pre-Primary Election Report - For Period of June 1, 2013 thru August 15, 2013 ..... August 16, 2013 and August 23, 2013
- [ ] Post-Primary Election Report - For Period of August 16, 2013 thru September 16, 2013 ..... September 17, 2013 and September 26, 2013
- [ ] Pre-General Election Report - For Period of September 17, 2013 thru October 24, 2013 ..... October 25, 2013 and November 1, 2013
- [ ] Post-General Election Report - For Period of October 25, 2013 thru November 25, 2013 ..... November 26, 2013 and December 5, 2013
- [ ] **January 31, Report - For Period of November 26, 2013 thru December 31, 2014 ..... January 1, 2015 and January 31, 2015

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	0	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	50.00	
5d	Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	50.-	
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)	0	
7.	Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	50.-	

*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.

CONTRIBUTIONS more than $50 - from INDIVIDUALS*

SCHEDULE **A**

2. ID #

1. Committee Name Committee to Select Lenz Samaras

3. Report covering period from Jan 13 to [illegible] thru [illegible] May 31 2013

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER	0	0	0
b.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
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]*		0	0

*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**

1. Committee Name Committee to Reelect Ken Sanders

2. ID #

3. Report covering period from April 2013 thru May 31, 2013

4. Aggregate Total of Contributions of $50 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	0	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	0

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

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE **B**

1. Committee Name Committee to Reelect Lex Schmied

2. ID #

3. Report covering period from Jan 1, 2013 thru March 31, 2013

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		0	0
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

CANDIDATE LOANS

SCHEDULE **C**

1.	Committee Name COMMITTEE TO RELEC LEN SCAMARDO	2. ID #
3.	Report covering period from JAN 1, 2013 thru MAY 31, 2013	

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 LEN SCAMARDO			
	314 DOGBLE D, PRESCOTT [illegible]	[illegible]	50	50
	DESCRIPTION CASH LOAN			
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]			

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

1. Committee Name COMMITTEE TO REELECT LEE SCAMARDO

2. ID#

3. Report covering period from JAN 13 Thru MAY 31, 2013

RECEIPTS	*COLUMN A* THIS PERIOD	*COLUMN B* CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:	0	
(a) Individuals - more than $50 (Total from Schedule A)	0	
(b) Individuals - aggregate $50 or less (Total from Schedule A-1)	0	
(c) Political Committees (Total from Schedule B)	0	
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	0	
(e) Refund of contributions (Total from Schedule F-2)	0	
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	0	
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	50.-	
(b) All other loans (Total from Schedule C-1)	0	
(c) Total Loans [add 5(a) and 5(b)]	50.-	
6. In-kind contributions (Total from Schedule E)	0	
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	
8. Total Receipts [add 4(f), 5(c), 6, and 7]	50.-	
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	0	
10. Independent Expenditures (Total from Schedule D-1)	0	
11. Value of In-kind expenditures (Total from Schedule E)	0	
12. Loans made by reporting committee (Total from Schedule D-2)	0	
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	
(b) Repayment of all other loans (Total from Schedule D-5)	0	
(c) Total Loan Repayments [add 13(a) and 13(b)]	0	
14. Transfers to other political committees (Total from Schedule D-6)	0	
15. Any other disbursement (Total from Schedule D-7)	0	
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	0	
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	
18. Total disbursements [subtract line 17 from line 16]	0	
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	50.-	

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.

Lee Scamardo

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

Date

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE **D**

2. ID #

1. Committee ~~Name~~ to Reject Len Schwarzbo

3. Report covering period from JAN 1, 2013 thru May 31, 2013

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 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	0	0
b.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
c.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
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]*		0

*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 to Reelect Len Scamardo

3. Report covering period from Jan 1 '13 thru May 31, 2013

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		0
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.

Len Scamardo

Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE **D-2**

2. ID #

1. Committee Name ~~to~~ REJECT LEX EDWARDS

3. Report covering period from JAN 1 2013 thru MAY 31, 2013

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#	0	
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~~ To reelect Len Scamarcio

3. Report covering period from JAN 1, 2013 thru MAY 31, 2013

	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND	0	0
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

OTHER LOANS

SCHEDULE **C1**

1. Committee Name [illegible] | 2. ID #

3. Report covering period from JAN 2013 thru MARCH 31, 2013

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#	0	0	0
	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

REPAYMENT OF CANDIDATE LOANS

SCHEDULE **D-4**

2. ID #

1. Committee Name TO REELECT LEN SCAMARCIO

3. Report covering period from JAN, 2013 thru MAY 31, 2013

	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		0
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~~ To Reelect Len Scamardo

3. Report covering period from Jan 1, 2013 thru May 3, 2013

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#	0	0
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~~ To Elect Len Sommers

3. Report covering period from JAN, 1, 2013 thru MAY 31, 2013

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#		0
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~~ to Protect Ken Schmidt

2. ID #

3. Report covering period from JAN 1, 2013 thru MAY 31, 2013

	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		0
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~~ to Reelect Len Scamardo

2. ID #

3. Report covering period from JAN 1, 2013 thru MAY 31, 2013

4	IN-KIND CONTRIBUTIONS and EXPENDITURES NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN		DATE	FAIR MARKET VALUE
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION ☐ EXPENDITURE ☐		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		0
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]*			0
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 ~~TO~~ RE-ELECT LEN SERRANO

3. Report covering period from JAN. 2013 thru MAY 31, 2013

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		0
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~~ to Reelect Len Schmaedeke

3. Report covering period from JAN 1, 2013 thru MAY 31, 2013

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		0
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		0
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		
			0

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]*

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE **F-3**

2. ID #

1. Committee ~~Name~~ to REELECT LEN SCAMARDO

3. Report covering period from JAN 1, 2013 thru MAY 31, 2013

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# LEN SCAMARDO 314 DOUBLE D PRESCOTT, AZ 86303	50	-	-	50
	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]*				50