



**STATE OF ARIZONA
COCHISE COUNTY
POLITICAL COMMITTEE
CAMPAIGN FINANCE REPORT**

3. ID# 2014-26

1. Committee to Elect CJ Garan

Full Name of Committee _____

Address PO Box 1975

Benson AZ 85602 520-909-6737

City Zip Code Phone

2. _____

Sponsoring Organization (if applicable) _____

Name of Candidate and Office Sought (if applicable) _____

Email Address _____ Fax # _____

2014
Consolidated Elections
March 11, 2014
May 20, 2014
Countywide Elections
August 26, 2014
November 4, 2014

4. Reporting Period (Please Check Appropriate Box)		Due Between
a.	<input type="checkbox"/> JANUARY 31ST REPORT - For Period of November 27, 2012 through December 31, 2013	January 1, 2014 and January 31, 2014
b.	<input type="checkbox"/> JUNE 30TH REPORT - For Period of January 1, 2014 through May 31, 2014	June 1, 2014 and June 30, 2014
c.	<input type="checkbox"/> PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2014 through August 14, 2014	August 15, 2014 and August 22, 2014
d.	<input checked="" type="checkbox"/> POST-PRIMARY ELECTION REPORT - For Period of August 15, 2014 through September 15, 2014	September 16, 2014 and September 25, 2014
e.	<input type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 16, 2014 through October 23, 2014	October 24, 2014 and October 31, 2014
f.	<input type="checkbox"/> POST-GENERAL ELECTION REPORT - For Period of October 24, 2014 through November 24, 2014	November 25, 2014 and December 4, 2014

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a	Total 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 (ending balance from the previous reporting period)	-0-	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	1,500.00	1,500.00
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	1,500.00	1,500.00
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)	1,227.89	1,227.89
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	272.11	272.11

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Committee to Elect CJ Garan
 3. Report covering period from 05/20/2014 thru 09/15/2014

2. ID# 2014-26

RECEIPTS

- 4. Contributions other than loans and in-kind
 - (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)]
- 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]

COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
1,500.00	1,500.00
-0-	-0-
1,500.00	1,500.00
-0-	-0-
-0-	-0-
1,500.00	1,500.00

DISBURSEMENTS

- 9. Expenditures for operating expenses (Total from Schedule D)
- 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)

1,227.89	1,227.89
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-
1,227.89	1,227.89
-0-	-0-
1,227.89	1,227.89
-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.

CJ Garan

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual


09/16/2014

Date

Committee To Elect CJ Garan

2. ID# 2014-26

1. Committee Name: _____

3. Report covering period from 05/20/2014 thru 09/15/2014

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR			
	LAST FIRST MI			
	NONE TO DATE			
	STREET ADDRESS			
4b.	CITY STATE ZIP			
	OCCUPATION EMPLOYER			
	LAST FIRST MI			
	STREET ADDRESS			
4c.	CITY STATE ZIP			
	OCCUPATION EMPLOYER			
	LAST FIRST MI			
	STREET ADDRESS			
4d.	CITY STATE ZIP			
	OCCUPATION EMPLOYER			
	LAST FIRST MI			
	STREET ADDRESS			
4e.	CITY STATE ZIP			
	OCCUPATION EMPLOYER			
	LAST FIRST MI			
	STREET ADDRESS			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(a), 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.

2. ID# 2014-26

1. Committee Name: Committee To Elect CJ Garan

3. Report covering period from 05/20/2014 thru 09/15/2014

4. Aggregate total of Contributions of \$50 or less

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
<p>NONE TO DATE</p>			
<p>5. TOTAL THIS PERIOD <i>[Transfer total to Detailed Summary Page, Line 4(b), Column A]</i></p>	<p>-0-</p>	<p>6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE <i>[Transfer total to Detailed summary Page, Line 4(b), Column B]</i></p>	<p>-0-</p>

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

2. ID#

2014-26

1. Committee Name: Committee To Elect CJ Garan

3. Report covering period from 05/20/2014 thru 09/15/2014

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	NONE TO DATE		
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 <i>[If last page of Schedule B, transfer total to Detailed Summary Page, Line 4C, Column A]</i>		-0-	-0-

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Committee To Elect CJ Garan	2. ID#	2014-26	
3.	Report covering period from 05/20/2014 thru 09/15/2014			
4.	LOANS MADE OR GUARANTEED BY CANDIDATE	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS FROM WHOM RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP CJ Garan	05/20/14	500.00	500.00
	PO Box 1975, Benson, AZ 85602			
	DESCRIPTION Cash Loan			
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP CJ Garan	08/29/14	1,000.00	1,500.00
	PO Box 1975, Benson, AZ 85602			
	DESCRIPTION			
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C <i>[If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]</i>		1,500.00	1,500.00

OTHER LOANS

SCHEDULE C-1

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY STATE, ZIP AND ID#			
	NONE TO DATE			
	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(b), Column A]	-0-	-0-	

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

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 Cochise County Map Department 1415 Melody Lane, Bisbee, AZ 85603 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Precinct Map	05/20/14	20.00
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP GoDaddy WEB Host 14455 N. Hayden Rd., Ste. 226 Scottsdale, AZ 85260 USA DESCRIPTION OF ITEMS OR SERVICES PURCHASED WEB Hosting	06/04/14	54.06
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP Vista Print Hudsonweg 8 5928 LW Venlo The Netherlands DESCRIPTION OF ITEMS OR SERVICES PURCHASED Advertising signs/cards	07/24/14	96.99
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP Vista Print Hudsonweg 8 5928 LW Venlo The Netherlands DESCRIPTION OF ITEMS OR SERVICES PURCHASED Advertising signs/t-shirts	08/20/14	196.42
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP Benson Ace Hardware 591 W 4th St Benson, AZ 85602 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Sign hardware	08/28/14	7.59
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP Lowes 3700 Martin Luther King Drive Sierra Vista, AZ 85635 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Sign Hardware	09/05/14	14.62
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]		

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP Victory Store 5200 SW 30th Street, Davenport, Iowa 52802 Advertising signs DESCRIPTION OF ITEMS OR SERVICES PURCHASED	09/07/14	208.98
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP My Campaign Store 304 Whittington Pkwy, Louisville, KY 40222 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Advertising emory bds	09/07/14	275.88
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP San Pedro Valley News 288 S Ocotillo, Benson, AZ 85602 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Newspaper ad	09/11/14	55.10
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP San Pedro Valley News 288 S Ocotillo, Benson, AZ 85602 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Newspaper ad	09/12/14	55.10
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP Things Remembered 5870 E Broadway, Tucson, AZ 85711 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Name plate	09/11/14	33.50
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP Stereo 97, Inc 156 W 5th St, Benson, AZ 85602 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Radio ads	09/12/14	51.25
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]		

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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP Cochise Trading Post 744 S Foothill Pl, Benson, AZ 85602	09/14/14	158.40
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Newspaper ads		
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
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 5, Column A]	1,227.89	

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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

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		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# NONE TO DATE		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4i.	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

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	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 NONE TO DATE		
	DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
4f.	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

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# NONE TO DATE		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detailed Summary Page, Line 13(a), Column A]	-0-	

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# NONE TO DATE		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4i.	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

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# NONE TO DATE		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
4f.	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: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE: DESCRIPTION		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# NONE TO DATE DESCRIPTION		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# DESCRIPTION		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# DESCRIPTION		
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# DESCRIPTION		
4e.	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: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

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# NONE TO DATE	CONTRIBUTION ___ EXPENDITURE ___		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION ___ EXPENDITURE ___		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION ___ EXPENDITURE ___		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4d.	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 EXPENDITURES 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

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

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 TO DATE DESCRIPTION OF RECEIPT		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
4f.	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

1. Committee Name: Committee to Elect CJ Garan

2. ID# 2014-26

3. Report covering period from 05/20/2014 thru 09/15/2014

4.	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM REFUND WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# NONE TO DATE		
	DESCRIPTION OF REFUND		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
4f.	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: Committee to Elect CJ Garan

2. ID#	2014-26
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3. Report covering period from 05/20/2014 thru 09/15/2014

4.	DEBTS AND OBLIGATIONS	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED				
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# NONE TO DATE				
	DESCRIPTION OF DEBT				
4b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION OF DEBT				
4c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION OF DEBT				
4d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#				
	DESCRIPTION OF DEBT				
4e.	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 Detailed Summary Page, Line 19, Column A]				-0-