



COCHISE COUNTY
ELECTIONS DEPARTMENT
STATE OF ARIZONA & COCHISE COUNTY
POLITICAL COMMITTEE CAMPAIGN FINANCE REPORT (2016)

Date Received:

RECEIVED

2016 OCT 13 P 4:03

COCHISE COUNTY
ELECTIONS AND
SPECIAL DISTRICTS

Candidate ID#:

2016-07

1. Peggy Judd for County Supervisor District 3

Full Name of Committee

705 N Arizona Ave

Address

Willcox

85643

520-507-1735

City

Zip Code

Phone

2.

Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)

busbarn@vtc.net

none

Email Address

Fax #

Election Dates

Tue, March 22, 2016 – PPE
Tue, August 30, 2016 – Primary
Tue, November 8, 2016 – General

3. Reporting Period (Please Check Appropriate Box)

Due Between

		Due Between
a.	January 31 Report - For Period of November 25, 2014 to December 31, 2015	January 1, 2016 to February 1, 2016
b.	June 30 Report - For Period of January 1, 2016 to May 31, 2016	June 1, 2016 to June 30, 2016
c.	Pre-Primary Report - For Period of June 1, 2016 to August 18, 2016	August 19, 2016 to August 26, 2016
d.	<input checked="" type="checkbox"/> Post-Primary Report - For Period of August 19, 2016 to September 19, 2016	September 20, 2016 to September 29, 2016
e.	Pre-General Report - For Period of September 20, 2016 to October 27, 2016	October 28, 2016 to November 4, 2016
f.	Post-General Report - For Period of October 28, 2016 to November 28, 2016	November 29, 2016 to December 8, 2016

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)	0	600
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	0	600
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)	0	1180
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	0	0

Mailing Address: Cochise County Elections/Special Districts, 1415 Melody Lane Bldg. A, Bisbee, AZ 85603



COCHISE COUNTY
ELECTIONS DEPARTMENT
NO ACTIVITY STATEMENT

Received Date
RECEIVED
2016 OCT 13 P 4:03
COCHISE COUNTY
ELECTIONS AND
SPECIAL DISTRICTS
ID #
2016-07

1. **Peggy Judd for County Supervisor District 3**

Full Name of Committee

705 N Arizona Ave

Address

Willcox

85643

Cochise

520507-1735

City

Zip Code

County

Phone #

busbarn@vtc.net none

2. Sponsoring Organization or Candidate

E-mail address

Fax#

3. **REPORTING PERIOD**

(Please check appropriate box)

DUE BETWEEN

- a. **January 31 Report**-For Period of
November 25, 2014 to December 31, 2015.....January 1, 2016 to February 1, 2016
- b. **June 30 Report**-For Period of
January 1, 2016 to May 31, 2016.....June 1, 2016 to June 30, 2016
- c. **Pre-Primary Report** -For Period of
June 1, 2016 to August 18, 2016.....August 19, 2016 to August 26, 2016
- d. **Post- Primary Report**-For Period of
August 19, 2016 to September 19, 2016.....September 20, 2016 to September 29, 2016
- e. **Pre-General Report**-For Period of
September 20, 2016 to October 27, 2016.....October 28, 2016 to November 4, 2016
- f. **Post -General Report**- For Period of
October 28, 2016 to November 28, 2016.....November 29, 2016 to December 8, 2016

I, **Peggy Judd**

(Name of treasurer or candidate-printed)

, upon my oath and under penalty of perjury, say that this

political committee received no contributions and made no expenditures for the period indicated above, and therefore is filing
a No Activity Statement pursuant to A.R.S. §16-913 (D), and this statement, pursuant to A.R.S. §16-913 (E) is true and complete.

10/12/16

Date

Peggy Judd

Signature of Candidate or Treasurer

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Committee Name: Peggy Judd for County Supervisor District 3
 Report covering period from 8/19/16 thru 9/19/16

2. ID# 2016-07
~~507 54 1218~~

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	600.00
0	580.00
	1180.00

DISBURSEMENTS

9. Expenditures for operating expenses (Total from Schedule D)
10. Independent Expenditures (Total from Schedule D-1)
 1. Value of In-kind expenditures (Total from Schedule E)
 2. Loans made by reporting committee (Total from Schedule D-2)
 - (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)]
 4. Transfers to other political committees (Total from Schedule D-6)
 5. Any other disbursement (Total from Schedule D-7)
5. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]
7. Rebates, refunds and other offsets to operating expenses (total from Schedule D-3)
8. Total disbursements [subtract line 17 from line 16]
9. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)

0	1180.00
	1180.00
	0
	1180.00
0	0

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.

Peggy Judd

Signature of Print Name of Treasurer

Peggy Judd

10/12/16

Signature of Treasurer or Candidate or Designating Individual

Date

2. ID# 2016-07
~~621-1243~~

1. Committee Name: Peggy Judd for County Supervisor District 3

3. Report covering period from 8/19/16 thru 9/19/16

4		CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
		NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR				
4a.	LAST	FIRST	MI	5/5/16	0	100
	Varga, Henry					
	STREET ADDRESS 624 Beale St					
	CITY	STATE	ZIP			
Kingman, AZ 86401						
OCCUPATION		EMPLOYER				
CPA		self				
4b.	LAST	FIRST	MI	8/16/16	0	500
	Skinner, Linda					
	STREET ADDRESS 907 Palomas					
	CITY	STATE	ZIP			
Willcox, AZ 85643						
OCCUPATION		EMPLOYER				
Retired		n/a				
4c.	LAST	FIRST	MI			
	STREET ADDRESS					
	CITY	STATE	ZIP			
OCCUPATION		EMPLOYER				
4d.	LAST	FIRST	MI			
	STREET ADDRESS					
	CITY	STATE	ZIP			
OCCUPATION		EMPLOYER				
4e.	LAST	FIRST	MI			
	STREET ADDRESS					
	CITY	STATE	ZIP			
OCCUPATION		EMPLOYER				
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to Detailed Summary Page Line #4a, Column A]				0	600	

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#
2016-07

1. Committee Name: Peggy Judd for County Supervisor District 3

3. Report covering period from 8/19/16 thru 9/19/16

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

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

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#

2016-07

1. Committee Name: Peggy Judd for County Supervisor District 3

3. Report covering period from

8/19/16

thru

9/19/16

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		
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [if last page of Schedule B, transfer total to Detailed Summary Page, Line 4C, Column A]		0	0

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Peggy Judd for County Supervisor District 3	2. ID# 2016-07
3.	Report covering period from 8/19/16 thru 9/19/16	
4.	LOANS MADE OR GUARANTEED BY CANDIDATE	
	NAME AND ADDRESS FROM WHOM RECEIVED	
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP Peggy Judd 705 N Arizona Ave, Willcox, AZ 85643	DATE RECEIVED 8/31/15 thru 8/18/16
	DESCRIPTION paid for items as purchased and balance of ads in Mid-August	AMOUNT RECEIVED 0 this report period
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE 580
	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>	580

OTHER LOANS

1. Committee Name: Peggy Judd for County Supervisor District 3

2. ID# 2016-07

3. Report covering period from 8/19/16 thru 9/19/16

4. ALL OTHER LOANS				
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF 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			
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	

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name: Peggy Judd for County Supervisor District 3

2. ID# 50-51-4843 2016-0

3. Report covering period from 8-19-16 thru 9-19-26

4. EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE, AND ZIP STICKERSBANNERS, INC sales@stickersbanners.com paypal payment	August 31, 2015	163.63
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
Bumper Stickers			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP Just Buttons 59 School Ground Rd, Branford, CT 06504	February 18, 2016	58.00
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
Buttons			
Vistaprint.com online paid with paypal [Business Cards]		6/6/16	22.09
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
Buttons			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP Arizona Range News/San Pedro Valley News-Sun PO Box 1155 Willcox, AZ 85644	8/15/16	306.28
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
Newspaper ads			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP Wick Communications 333 W Wilcox Dr., Suite 302 Sierra Vista, AZ 85635	8/15/16	210.00
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
Newspaper ads			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP KHIL PO Box 1250 Willcox, AZ 85643	8/17/16	320.00
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
Willcox Radio Ads			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP Cave Radio Box 18899 Tucson, AZ 85731	8/18/16	100.00
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
Benson Radio Ads			
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]			1180.00

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name: Peggy Judd for County Supervisor District 3

2. ID# ~~527-514843~~

2016-07

3. Report covering period from 8/19/16 thru 9/19/16

INDEPENDENT EXPENDITURES			DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE	
IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED					
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/>				
	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/>				
	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP				
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted <input type="checkbox"/> Opposed <input type="checkbox"/>				
	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1. <i>[If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]</i>				

SEE A.R.S. §16-901(14)

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Peggy Judd

Signature of Treasurer

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

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name: Peggy Judd for County Supervisor District 3

2. ID# ~~527 51 4843~~

3. Report covering period from 8/19/16 thru 9/19/16

2016-07

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#		
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#		
4j.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	0	0
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: Peggy Judd for County Supervisor District 3

2. ID# 527-574048

3. Report covering period from 8/19/16 thru 9/19/16

2016-07

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		
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			
g.	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: _____

Peggy Judd for County Supervisor District 3

2. ID# ~~577 51 1848~~
2016-07

3. Report covering period from 8/19/16 thru 9/19/16

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#		
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#		
j. 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: Peggy Judd for Cochise County Supervisor District 3

2. ID# ~~527-84-1013~~
2016-07

3. Report covering period from 8/19/16 thru 9/19/16

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#		
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#		
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: Peggy Judd for County Supervisor District 3

2. ID# 2016-07

3. Report covering period from 8/19/16 thru 9/19/16

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#		
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#		
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 (Transfer total to Detailed summary Page, Line 14, Column A)		0

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name:

Peggy Judd for County Supervisor Dist 3

2. ID#

2016-07

3. Report covering period from

8/19/16

thru

9/19/16

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#		
	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		
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 (transfer total to Detailed Summary Page, Line 15, Column A)			

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name: Peggy Judd for County Supervisor District #3

2. ID# 2066-07

3. Report covering period from 8/19/16 thru 9/19/16

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.	<table border="1"> <tr> <td>NAME, ADDRESS, CITY, STATE, ZIP, AND ID#</td> <td> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> <td></td> <td></td> </tr> <tr> <td>DESCRIPTION</td> <td></td> <td></td> <td></td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> <td></td> <td></td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>			DESCRIPTION				OCCUPATION	EMPLOYER				
NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>														
DESCRIPTION															
OCCUPATION	EMPLOYER														
4b.	<table border="1"> <tr> <td>NAME, ADDRESS, CITY, STATE, ZIP, AND ID#</td> <td> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> <td></td> <td></td> </tr> <tr> <td>DESCRIPTION</td> <td></td> <td></td> <td></td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> <td></td> <td></td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>			DESCRIPTION				OCCUPATION	EMPLOYER				
NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>														
DESCRIPTION															
OCCUPATION	EMPLOYER														
4c.	<table border="1"> <tr> <td>NAME, ADDRESS, CITY, STATE, ZIP, AND ID#</td> <td> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> <td></td> <td></td> </tr> <tr> <td>DESCRIPTION</td> <td></td> <td></td> <td></td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> <td></td> <td></td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>			DESCRIPTION				OCCUPATION	EMPLOYER				
NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>														
DESCRIPTION															
OCCUPATION	EMPLOYER														
4d.	<table border="1"> <tr> <td>NAME, ADDRESS, CITY, STATE, ZIP, AND ID#</td> <td> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> <td></td> <td></td> </tr> <tr> <td>DESCRIPTION</td> <td></td> <td></td> <td></td> </tr> <tr> <td>OCCUPATION</td> <td>EMPLOYER</td> <td></td> <td></td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>			DESCRIPTION				OCCUPATION	EMPLOYER				
NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>														
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 EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]															

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name: Peggy Judd for County Supervisor Dist 3

2. ID# 2016-07

3. Report covering period from 8/19/16 thru ~~8/19/16~~ 9/19/16

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#		
	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		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
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

Committee Name:

Peggy Judd For Cochise County Supervisor District 3

2. ID#

2016-07

3. Report covering period from _____ thru _____

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# 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		
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

1. Committee Name: Peggy Judd for ~~Butte~~ County Supervisor

2. ID# 2016-07

3. Report covering period from 8/19/16 thru 9/19/16 District 3

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#				
	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				

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)