



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

RECEIVED

Date Received:

2016 JUN 13 P 1:56

COCHISE COUNTY
ELECTIONS AND
SPECIAL DISTRICTS

Candidate ID#:

2016-08

1. STEVENS FOR AZ

Full Name of Committee
po box 13

Address
sierra vista 85636 520-732-1003

City Zip Code Phone

2.

Sponsoring Organization (if applicable)

DAVID W. STEVENS COUNTY RECORDER

Name of Candidate and Office Sought (if applicable)

stevensforaz@gmail.com

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
a.	January 31 Report - For Period of November 25, 2014 to December 31, 2015	January 1, 2016 to February 1, 2016
b.	<input checked="" type="checkbox"/> 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

	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5.			
5a	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		23,447.31
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	23,447.31	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	9,303.21	9,303.21
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	32,750.52	32,750.52
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)	2,366.99	2,366.99
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	30,383.53	30,383.53

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: STEVENS FOR AZ
 3. Report covering period from 1-1-2016 thru 5-31-2016

2. ID# 2016-08

RECEIPTS

	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind	0	0
(a) Individuals - more than \$25 (Total from Schedule A)	5,278.12	5,278.12
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	0	0
(c) Political Committees (Total from Schedule B)	3,950.00	3,950.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	0	0
(e) Refund of contributions (Total from Schedule F-2)	0	0
(f) Total Contributions Other than Loans and In-Kind [subtract 4(e) from 4(d)]	0	0
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0	0
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total Loans [add 5(a) and 5(b)]	0	0
6. In-kind contributions (Total from Schedule E)	0	0
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	.09	.09
8. Total Receipts [add 4(f), 5(c), 6 and 7]	9,303.21	9,303.21

DISBURSEMENTS

9. Expenditures for operating expenses (Total from Schedule D)	2,366.99	2,366.99
10. Independent Expenditures (Total from Schedule D-1)	0	0
11. Value of in-kind expenditures (Total from Schedule E)	0	0
12. Loans made by reporting committee (Total from Schedule D-2)	0	0
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	0
(b) Repayment of all other loans (Total from Schedule D-5)	0	0
(c) Total Loan Repayments [add 13(a) and 13(b)]	0	0
14. Transfers to other political committees (Total from Schedule D-6)	0	0
15. Any other disbursement (Total from Schedule D-7)	0	0
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	2,366.99	2,366.99
17. Rebates, refunds and other offsets to operating expenses (total from Schedule D-3)	0	0
18. Total disbursements [subtract line 17 from line 16]	2,366.99	2,366.99
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	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.

DAVID W. STEVENS

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

13 June 2016
Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
2016-08

1. Committee Name: Stevens for AZ
 3. Report covering period from 1-1-16 thru 31-5-16

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 <u>KOZA John MI</u> STREET ADDRESS <u>PO Box 1441</u> CITY STATE ZIP <u>Los Altos CA 94023</u> OCCUPATION EMPLOYER		1-6-16	300-	300-
4b. LAST FIRST MI <u>Barclay Steven MI</u> STREET ADDRESS <u>40 N Central Ave</u> CITY STATE ZIP <u>Phoenix AZ 85004</u> OCCUPATION EMPLOYER <u>Logist self</u>		1-6-16	100-	100-
4c. LAST FIRST MI <u>Shapson DON MI</u> STREET ADDRESS <u>501 W SunEagles Dr</u> CITY STATE ZIP <u>Phoenix AZ 85023</u> OCCUPATION EMPLOYER <u>Att</u>		1-6-16	100-	100-
4d. LAST FIRST MI <u>Bodin Scott MI</u> STREET ADDRESS <u>6080 W Park Ave</u> CITY STATE ZIP <u>Chandler AZ 85226</u> OCCUPATION EMPLOYER		1-6-16	200-	200-
4e. LAST FIRST MI <u>Mclary Gibson MI</u> STREET ADDRESS <u>8411 N 11th Ave</u> CITY STATE ZIP <u>Phoenix AZ</u> OCCUPATION EMPLOYER <u>WRBISTY</u>		1-6-16	150-	150-
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]				

*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 are than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
2016-08

1. Committee Name: Spans for AZ

3. Report covering period from 1-1-16 thru 5-31-16

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				
Greene	Molly					
STREET ADDRESS						
239 W Lamar Rd						
CITY	STATE	ZIP				
Phoenix	AZ	85013	1-6-16	100-	100-	
OCCUPATION						
WORKER						
EMPLOYER						
SRP						
4b.						
LAST	FIRST	MI				
Pooler	Ellen					
STREET ADDRESS						
417 E Marisid Lane						
CITY	STATE	ZIP				
Tempe	AZ	85281	1-6-16	100-	100-	
OCCUPATION						
WORKER						
EMPLOYER						
USAA						
4c.						
LAST	FIRST	MI				
Ryan	Emily					
STREET ADDRESS						
8540 Central Ave #27						
CITY	STATE	ZIP				
Phoenix	AZ	85020	1-6-16	100-	100-	
OCCUPATION						
WORKER						
EMPLOYER						
Copper State						
4d.						
LAST	FIRST	MI				
Barnes	Spav					
STREET ADDRESS						
3412 E Grand View St.						
CITY	STATE	ZIP				
Mesa	AZ	85213	1-6-16	200-	200-	
OCCUPATION						
WORKER						
EMPLOYER						
Copper State						
4e.						
LAST	FIRST	MI				
Stelouski	Laura					
STREET ADDRESS						
11323 N Eagle Landing Pl						
CITY	STATE	ZIP				
Oro Valley	AZ	85137	1-6-16	100-	100-	
OCCUPATION						
Requested						
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(c), 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: Steens for AZ

2. ID#
2016-08

3. Report covering period from 1-1-16 thru 5-31-16

4. CONTRIBUTIONS				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	STATE	MI			
SIMONETTA Mck						
STREET ADDRESS						
9850 W Eagle Talon Trl				1-6-16	250	250
CITY	STATE	ZIP				
Peoria	Az	85383				
OCCUPATION						
CORP/ST						
EMPLOYER						
Printed Policies						
4b. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	STATE	MI			
Bailini Kristen						
STREET ADDRESS						
119 E M Isabel Ave						
CITY	STATE	ZIP				
Phoenix	Az	85012		1-6-16	150	150
OCCUPATION						
CORP/ST						
EMPLOYER						
Printed Policies						
4c. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	STATE	MI			
HAY Sydney						
STREET ADDRESS						
8711 E Pinnacle Peak Rd						
CITY	STATE	ZIP				
Scottsdale	Az	85255		1-6-16	100	100
OCCUPATION						
CORP/ST						
EMPLOYER						
Southwest Policy						
4d. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	STATE	MI			
Finic Jerry						
STREET ADDRESS						
PO BOX 969						
CITY	STATE	ZIP				
Bon Son	Az	85602		1-6-16	250	250
OCCUPATION						
Vaguesteal						
EMPLOYER						
4e. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	STATE	MI			
Brono James						
STREET ADDRESS						
7900 S. Avenida de Pine						
CITY	STATE	ZIP				
Tucson	Az	85747		1-6-16	500	500
OCCUPATION						
Diner						
EMPLOYER						
AZ Ambulance						
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]						

*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#
2016-08

1. Committee Name: Stevens for AZ

3. Report covering period from 1-1-16 thru 5-31-16

4. CONTRIBUTORS				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	MI				
Anthony	Benedict					
STREET ADDRESS						
7820 S Avenida Bonita						
CITY	STATE	ZIP				
Tucson	AZ	85747	1-6-16	500-	500-	
OCCUPATION						
Retiree						
EMPLOYER						
4b. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	MI				
Jacobs	Gordon					
STREET ADDRESS						
10916 E. Mariposa Dr.						
CITY	STATE	ZIP				
Scottsdale	AZ	85257	1-6-16	471.25	471.25	
OCCUPATION						
VERBIST						
EMPLOYER						
AZ Gov Affairs						
4c. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	MI				
Lundy	Kelsey					
STREET ADDRESS						
7332 Binnacle Drive						
CITY	STATE	ZIP				
Carlsbad	CA	92011	1-10-16	188.50	188.50	
OCCUPATION						
Partner						
EMPLOYER						
Axiom						
4d. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	MI				
Stevens	Susie					
STREET ADDRESS						
10116 N 38th Place						
CITY	STATE	ZIP				
Paradise Valley	AZ	85253	1-10-16	188.50	188.50	
OCCUPATION						
VERBIST						
EMPLOYER						
Stevens & Stevens						
4e. NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
LAST	FIRST	MI				
Biggs	Wendy					
STREET ADDRESS						
509 E Actin St						
CITY	STATE	ZIP				
Phoenix	AZ	85012	1-10-16	141.37	141.37	
OCCUPATION						
VERBIST						
EMPLOYER						
Veridus						
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]						

* 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:

Steves for AZ

2. ID#

2016-08

3. Report covering period from 1-1-16

thru

5-31-16

4				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
CONTRIBUTORS						
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
4a. LAST FIRST STATE ZIP Shedden Pessell MI						
STREET ADDRESS 357 E. North UStE Rd						
CITY STATE ZIP Phoenix AZ 85004				1-10-16	94.25	94.25
OCCUPATION EMPLOYER CEO B3						
4b. LAST FIRST STATE ZIP Lowe J. Michael MI						
STREET ADDRESS 15215 N. Highland Blvd						
CITY STATE ZIP Scotts Dale AZ 85254				1-10-16	94.25	94.25
OCCUPATION EMPLOYER Lawyer Lewis Brisobols						
4c. LAST FIRST STATE ZIP Spindrust Jeff MI						
STREET ADDRESS 9457 E. Trailside View						
CITY STATE ZIP Scotts Dale AZ 85255				1-11-16	200-	200
OCCUPATION EMPLOYER Director Various						
4d. LAST FIRST STATE ZIP MI						
STREET ADDRESS						
CITY STATE ZIP						
OCCUPATION EMPLOYER						
4e. LAST FIRST STATE ZIP 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(a), Column A]					9303.21	9363.21

*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 FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name: Stevens for AZ

2. ID#
2016-08

3. Report covering period from 1-1-16 thru 5-31-16

4. CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	ID# DATE RECEIVED		
	1354 1-05-16	300	300
	NAME, ADDRESS, CITY, STATE, AND ZIP Femmore Game P.C 2394 E Camel Back Rd S-600 Phoenix AZ 85016		
b.	ID# DATE RECEIVED		
	1325 1-05-16	500	500
	NAME, ADDRESS, CITY, STATE, AND ZIP Prima Tech Council State PAC 2800 N Central Ave Phoenix AZ 85004		
c.	ID# DATE RECEIVED		
	6586 1-05-16	500	500
	NAME, ADDRESS, CITY, STATE, AND ZIP Doctors of AZ Political Action 255 E OSBORN RD S-205 Committee Phoenix AZ 85012		
d.	ID# DATE RECEIVED		
	2066 1-05-16	400	400
	NAME, ADDRESS, CITY, STATE, AND ZIP Optometric PAC 1702 Highlands Ave S-213 Phoenix AZ 85016		
e.	ID# DATE RECEIVED		
	11-10964 1-05-16	500	500
	NAME, ADDRESS, CITY, STATE, AND ZIP LKA Corp 500 W. Madison St Chicago IL 60661		
f.	ID# DATE RECEIVED		
	2552 1-05-16	400	400
	NAME, ADDRESS, CITY, STATE, AND ZIP Express Scripts One express way St. Louis MO 63121		
g.	ID# DATE RECEIVED		
	1247 1-05-16	500	500
	NAME, ADDRESS, CITY, STATE, AND ZIP AZ Prof Fire Fighters 61 E Columbus Ave S-100 Phoenix AZ 85012		
h.	ID# DATE RECEIVED		
	11922 1-05-16	250	250
	NAME, ADDRESS, CITY, STATE, AND ZIP Allstate 2775 Sanders Rd S-42W Northbrook IL 60062		
i.	ID# DATE RECEIVED		
	1095 1-05-16	400	400
	NAME, ADDRESS, CITY, STATE, AND ZIP CPNAs of AZ 15210 N 44th Pl Phoenix AZ 85032		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B (If last page of Schedule B, transfer total to Detailed Summary Page, line 40, column A)

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID#
2016-08

1. Committee Name: Stevens for AZ

3. Report covering period from 1-1-10 thru 5-31-10

4. CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	ID# 1029 DATE RECEIVED 1-05-15		
IDENTITY OF CONTRIBUTOR AND DATE RECEIVED NAME, ADDRESS, CITY, STATE, AND ZIP A2 PATRICK IND PRZ PO Box 3689 Avazome city, AZ 85123		200-	200-
b.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
c.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
d.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
e.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
f.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
g.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
h.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
i.	ID# DATE RECEIVED		
NAME, ADDRESS, CITY, STATE, AND ZIP			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B (if last page of Schedule B, transfer total to Detached Summary Page, Line 40, Column A)		
		3950-	3950-

EXPENDITURES FOR OPERATING EXPENSE

SCHEDULE D

1. Committee Name: Stevens for AZ

2. ID# 2016-08

3. Report covering period from 1-1-16 thru 5-31-16

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 WALMART 500 N HWY 90 Stearns Vile AZ 85625	1-8-16	499.24
4b.	DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE, AND ZIP Cardtronics 2850 N 7th St Phoenix AZ	1-13-16	42.95
4c.	DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE, AND ZIP Go Daddy, com (480) 565-8877	1-13-16	2.50
4d.	DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE, AND ZIP Go Daddy, com (480) 565-8877	1-19-16	177.74
4e.	DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE, AND ZIP Go Daddy, com (480) 565-8877	1-19-16	26.34
4f.	DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE, AND ZIP Charice Lora Steed 5912 S. Arabian Steine Nevada Rd 85615	3-25-16	460.00
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)		2366.99

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

EXPENDITURES FOR OPERATING EXPENSE

SCHEDULE D

1. Committee Name:

Stevens for AZ

2. ID#

2016-06

3. Report covering period from 1-1-16 thru 5-31-16

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 Jackie Stevens 5234 S. Santa Pauline Ln Sierra Vista Az 85635 DESCRIPTION OF ITEMS OR SERVICES PURCHASED: Campaign Support	3-25-16	400.00
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP Staples 4299 E Hwy 90 Sierra Vista Az 85635 DESCRIPTION OF ITEMS OR SERVICES PURCHASED: supplies	4-22-16	18.22
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP Patrick Wagner 5045 Via de Lomas Sierra Vista Az 85635 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	5-17-16	200.00
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP David Cowen Jr 2027 Santa Larese Dr Sierra Vista Az 85635 DESCRIPTION OF ITEMS OR SERVICES PURCHASED: Campaign Support	5-17-16	200.00
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP Jackie Stevens 5234 S. Santa Pauline Ln Sierra Vista Az 85635 DESCRIPTION OF ITEMS OR SERVICES PURCHASED: Campaign Support	5-17-16	400.00
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP Cherie Ferestead 5972 S. Arabian Hereford Az 85615 DESCRIPTION OF ITEMS OR SERVICES PURCHASED: Campaign Support	5-17-16	400.00
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

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name: STEVENS FOR AZ

2. ID# 2016-08

3. Report covering period from _____ thru _____

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# Bank Of America 3148 E. Fry Blvd Sierra Vista Az 85635	5-13-2016	.09
	DESCRIPTION OF RECEIPT Collection		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4c.	DESCRIPTION OF RECEIPT		
	DESCRIPTION OF RECEIPT		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
4e.	DESCRIPTION OF RECEIPT		
	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)		