



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

FOR OFFICE USE ONLY

RECEIVED

AUG 25 2014

Coconino County Elections

1. Yes for FUSD
Full Name of Committee
[Redacted]
Address Flagstaff 86002 928 853 6458
City Zip Code Committee Phone #

3. ID#
12-016

2. Citizens for School Success
Sponsoring Organization (if applicable)

**Primary Election: August 26 2014
General Election: November 4, 2014**

Name of Candidate and Office Sought (if applicable)
info@yesforfUSD.com 928 752 7667
Committee E-mail Address Committee Fax #

___ Amended Report

| 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 | Jan. 1 and Jan. 31, 2014 |
| b | <input type="checkbox"/> JUNE 30TH REPORT - For Period of January 1, 2014 through May 31, 2014 | June 1 and June 30, 2014 |
| c | <input checked="" type="checkbox"/> PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2014 through August 14, 2014 | Aug. 15 and Aug. 22, 2014 |
| d | <input type="checkbox"/> POST-PRIMARY ELECTION REPORT - For Period of August 15, 2014 through September 15, 2014 | Sept. 16 and Sept. 25, 2014 |
| e | <input type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 16, 2014 through October 23, 2014 | Oct. 24 and Oct. 31, 2014 |
| f | <input type="checkbox"/> POST-GENERAL ELECTION REPORT - For Period of October 24, 2014 through November 24, 2014 | Nov. 25 and Dec. 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) | | 8415.92 |
| 5b | Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period) | 8415.92 | |
| 5c | Total Receipts (from corresponding columns on Detailed Summary Page, Line 8) | 2625.00 | 7125.00 |
| 5d | Subtotal (add lines b and c for column A and add lines a and c for column B) | 11040.92 | 12540.92 |
| 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] | | 0.00 |
| 6b | Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18) | 5318.29 | 6180.69 |
| 7. | Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d) | 5722.63 | 6360.23 |

**DETAILED SUMMARY PAGE OF
RECEIPTS AND DISBURSEMENTS**

1. Committee Name Yes for FUSD
 3. Report covering period of June 1 - August 14, 2014

2. ID#

RECEIPTS

4. Contributions other than loans and in-kind:
- (a) Individuals - more than \$50 (Total from Schedule A)
 - (b) Individuals - aggregate \$50 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 |
|-------------------------|------------------------------|
| 2375.00 | 6875.00 |
| 250.00 | 250.00 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| 2625.00 | 7125.00 |

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)

| | |
|---------|---------|
| 5318.29 | 6180.69 |
| | |
| | |
| | |
| | |
| | |
| | |
| 5318.29 | 6180.69 |
| 5318.29 | 6180.69 |
| | |

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.

Lydia Smith-Hemphill
 Type or Print Name of Treasurer

Lydia Smith-Hemphill
 Signature of Treasurer or Candidate or Designating Individual

August 22, 2014
 Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14 2014

| 4. | | CONTRIBUTIONS | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|----|---|---|---------------|-----------------------------|--|
| | | NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR | | | |
| a | Name | Mount Elden Middle School PTO | | 1000.00 | 1000.00 |
| | Street Address | 1660 E. Appalachian Road | | | |
| | City | Flagstaff | State | AZ | Zip |
| | | | | | 86004 |
| | Occupation | Julie Harris | Employer | | |
| b | Name | Ken Garland | | 175.00 | 175.00 |
| | Street Address | 4217 E. Hearn Road | | | |
| | City | Phoenix | State | AZ | Zip |
| | | | | | 85032 |
| | Occupation | | Employer | | |
| c | Name | Glenn; Anne Dunno | | 100.00 | 100.00 |
| | Street Address | 3020 E Matterhorn | | | |
| | City | Flagstaff | State | AZ | Zip |
| | | | | | 86004 |
| | Occupation | | Employer | | |
| d | Name | Hartzell Family Trust | | 100.00 | 100.00 |
| | Street Address | 2825 Forest Hills Dr | | | |
| | City | Flagstaff | State | AZ | Zip |
| | | | | | 86001 |
| | Occupation | | Employer | | |
| e | Name | Chasse Building Team, Inc | | 1000.00 | 1000.00 |
| | Street Address | 2400 W. Broadway Road | | | |
| | City | Mesa | State | AZ | Zip |
| | | | | | 85202 |
| | Occupation | | Employer | | |
| 5 | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A] | | | 2375.00 | 2375.00 |

*If contributions of \$50 or less are listed with contributors name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS of \$50 or less - AGGREGATE TOTAL*

SCHEDULE A-1

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14 2014

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

| DESCRIPTION | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|--|-----------------------------|---|
| John + Mary K Walton | 25.00 | 25.00 |
| Kim + Gary Branges | 25.00 | 25.00 |
| Ginger Wischmann | 50.00 | 50.00 |
| Dietrich + Laura Sauer | 50.00 | 50.00 |
| Anthony + Sylvia Johnson | 50.00 | 50.00 |
| Sarah + Aaron Ellis | 50.00 | 50.00 |
| 5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A] | 250.00 | 6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column 13] |
| | | 250.00 |

*If contributions of \$50 or less are listed with contributors name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14 2014

| CONTRIBUTIONS | | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|---|--|------------------------------------|--|
| IDENTITY OF CONTRIBUTOR AND DATE RECEIVED | | | |
| 4. a | 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 | | |
| 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] | | 0.00 |

CANDIDATE LOANS

SCHEDULE C

1. Committee Name

Yes for FUSD

2. ID#

3. Report covering period from

June 1

thru

August 14, 2014

| LOANS MADE OR GUARANTEED BY CANDIDATE | | | | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|---------------------------------------|---|-------|---------|---------------|-----------------------------|--|
| NAME, ADDRESS, FROM WHOM RECEIVED | | | | | | |
| 4. | | | | | | |
| 4a | Last | First | Initial | | | |
| | Street Address | | | | | |
| | City | State | Zip | | | |
| | Description | | | | | |
| b | Last | First | Initial | | | |
| | Street Address | | | | | |
| | City | State | Zip | | | |
| | Description | | | | | |
| c | Last | First | Initial | | | |
| | Street Address | | | | | |
| | City | State | Zip | | | |
| | Description | | | | | |
| d | Last | First | Initial | | | |
| | Street Address | | | | | |
| | City | State | Zip | | | |
| | Description | | | | | |
| e | Last | First | Initial | | | |
| | Street Address | | | | | |
| | City | State | 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] | | | | | 0.00 |

OTHER LOANS

SCHEDULE C-1

1- Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14, 2014

| ALL OTHER LOANS | | | | |
|---|---|--------------------|----------------|--|
| 4. | 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 |
| a | NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# <hr/> Street Address <hr/> City, State, Zip <hr/> NAME OF ENDORSER OR GUARANTOR OF LOAN <hr/> Street Address <hr/> City, State, Zip <hr/> Description | | | |
| b | NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# <hr/> Street Address <hr/> City, State, Zip <hr/> NAME OF ENDORSER OR GUARANTOR OF LOAN <hr/> Street Address <hr/> City, State, Zip <hr/> Description | | | |
| c | NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# <hr/> Street Address <hr/> City, State, Zip <hr/> NAME OF ENDORSER OR GUARANTOR OF LOAN <hr/> Street Address <hr/> City, State, Zip <hr/> Description | | | |
| d | NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID# <hr/> Street Address <hr/> City, State, Zip <hr/> NAME OF ENDORSER OR GUARANTOR OF LOAN <hr/> Street Address <hr/> City, State, Zip <hr/> 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] | | | 0.00 | 0.00 |

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14, 2014

| EXPENDITURES | | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|--|---|-----------------------|---------------------------|
| 4. NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE | | | |
| a | Name <u>Jen Saunders Design</u> Street Address <u>742 N. Bertrand</u> City <u>Flagstaff</u> State <u>AZ</u> Zip <u>86001</u> Description of Items or Services Purchased <u>Marketing Materials</u> | <u>7/10/14</u> | <u>5,209.08</u> |
| b | Name <u>Go Daddy</u> Street Address <u>godaddy.com</u> City _____ State _____ Zip _____ Description of Items or Services Purchased <u>Online Storage, Calendar & Email</u> | <u>7/12/14</u> | <u>109.21</u> |
| c | Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____ | | |
| d | Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____ | | |
| e | Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____ | | |
| f | Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____ | | |
| ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page Line 9, Column A] | | | <u>5,318.29</u> |

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name Yes for FUSD 2. ID#
 3. Report covering period from June 1 thru August 14, 2014

| INDEPENDENT EXPENDITURES | | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|---|---|-----------------------|---------------------------|
| 4. IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED | | | |
| a | Name | | |
| | Street Address | | |
| | City | State | |
| | Purpose and Description of Purchase | | |
| | Benefited <input type="checkbox"/> Opposed <input type="checkbox"/> | | |
| Candidate | | Office Sought | Year of Election |
| b | Name | | |
| | Street Address | | |
| | City | State | |
| | Purpose and Description of Purchase | | |
| | Benefited <input type="checkbox"/> Opposed <input type="checkbox"/> | | |
| Candidate | | Office Sought | Year of Election |
| c | Name | | |
| | Street Address | | |
| | City | State | |
| | Purpose and Description of Purchase | | |
| | Benefited <input type="checkbox"/> Opposed <input type="checkbox"/> | | |
| 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] | | | |

* 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 at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

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

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14, 2014

| 4. LOANS MADE BY THE REPORTING COMMITTEE | | | | DATE LOAN MADE | AMOUNT OF LOAN |
|---|--|-------|-----|----------------|----------------|
| NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE | | | | | |
| a | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| b | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| c | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| d | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| e | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| f | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| g | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| h | Committee Name | | ID# | | |
| | Address | | | | |
| | City | State | Zip | | |
| 5 | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [if last page of Schedule D-2, transfer total to Detailed Summary Page, Line 12, Column A] | | | | 0.00 |

OFFSETS TO OPERATING EXPENSES*

SCHEDULE D-3

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14, 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 | | | |
| a | Name | | |
| | Street Address | | |
| | City State Zip | | |
| | Description of Refund | | |
| b | Name | | |
| | Street Address | | |
| | City State Zip | | |
| | Description of Refund | | |
| c | Name | | |
| | Street Address | | |
| | City State Zip | | |
| | Description of Refund | | |
| d | Name | | |
| | Street Address | | |
| | City State Zip | | |
| | Description of Refund | | |
| e | Name | | |
| | Street Address | | |
| | City State Zip | | |
| | Description of Refund | | |
| f | Name | | |
| | Street Address | | |
| | City State 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] | | 0.00 |

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14, 2014

| | REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE | DATE REPAYMENT MADE | AMOUNT OF THE REPAYMENT |
|--|---|---------------------|-------------------------|
| NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | | | |
| a | Name Street Address City State Zip | | |
| b | Name Street Address City State Zip | | |
| c | Name Street Address City State Zip | | |
| d | Name Street Address City State Zip | | |
| e | Name Street Address City State Zip | | |
| f | Name Street Address City State Zip | | |
| 5 | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [if last page of Schedule D-4, transfer total to Detailed Summary Page, Line 13(a), Column A] | | 0.00 |

REPAYMENT OF OTHER LOANS

SCHEDULE D-5

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14, 2014

| 4. | REPAYMENT OF ALL OTHER LOANS | DATE REPAYMENT MADE | AMOUNT OF THE REPAYMENT |
|----|--|---------------------|-------------------------|
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | | |
| a | Name and ID Number Street Address City State Zip | | |
| b | Name and ID Number Street Address City State Zip | | |
| c | Name and ID Number Street Address City State Zip | | |
| d | Name and ID Number Street Address City State Zip | | |
| e | Name and ID Number Street Address City State Zip | | |
| f | Name and ID Number Street Address City State Zip | | |
| 5 | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [if last page of schedule Transfer total to Detailed Summary Page, Line 13(b), Column A] | 0.00 | |

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from June 1 thru August 14, 2014

| 4. | TRANSFERS MADE BY THE REPORTING COMMITTEE | DATE TRANSFER WAS MADE | AMOUNT OF THE TRANSFER |
|----|--|------------------------|------------------------|
| | NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE | | |
| a | Name and ID Number | | |
| | Street Address | | |
| | City State Zip | | |
| b | Name and ID Number | | |
| | Street Address | | |
| | City State Zip | | |
| c | Name and ID Number | | |
| | Street Address | | |
| | City State Zip | | |
| d | Name and ID Number | | |
| | Street Address | | |
| | City State Zip | | |
| e | Name and ID Number | | |
| | Street Address | | |
| | City State Zip | | |
| f | Name and ID Number | | |
| | Street Address | | |
| | City State Zip | | |
| 5 | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A] | | 0.00 |