



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

FOR OFFICE USE ONLY  
**RECEIVED**

FEB 01 2016

**Coconino County Elections**

1. Yes for FUSD  
Full Name of Committee  
PO Box 249  
Address  
Flagstaff 86002 9288536458  
City Zip Code Committee Phone #  
2. Citizens for School Success  
Sponsoring Organization (if applicable)

3. ID#  
12-016

**Primary Election: August 30, 2016  
General Election: November 8, 2016**

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

Amended Report

4. Reporting Period (Please Check Appropriate Box)		Due Between
a	<input checked="" type="checkbox"/> JANUARY 31ST REPORT - For Period of November 25, 2014 through December 31, 2015	Jan. 1 and Feb. 1, 2016
b	<input type="checkbox"/> JUNE 30TH REPORT - For Period of January 1, 2016 through May 31, 2016	June 1 and June 30, 2016
c	<input type="checkbox"/> PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2016 through August 18, 2016	Aug. 19 and Aug. 26, 2016
d	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT - For Period of August 19, 2016 through September 19, 2016	Sept. 20 and Sept. 29, 2016
e	<input type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 20, 2016 through October 27, 2016	Oct. 28 and Nov. 4, 2016
f	<input type="checkbox"/> POST-GENERAL ELECTION REPORT - For Period of October 28, 2016 through November 28, 2016	Nov. 29 and Dec. 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)		4,778.32
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	8,222.89	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	242.57	18,879.79
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	8465.46	23,658.11
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)	1339.70	16,532.35
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	7125.76	7125.76

**DETAILED SUMMARY PAGE OF  
RECEIPTS AND DISBURSEMENTS**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period of November 25, 2014 to December 31, 2015

**RECEIPTS**

Column A This Period	Column B Campaign to Date
	18,012.25
242.57	867.54
—	—
242.57	8,879.79
—	—
242.57	18,879.79
242.57	18,879.79

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]

**DISBURSEMENTS**

1339.70	16,532.35
—	
—	
—	
—	
—	
—	
—	
—	
—	
1339.70	16,532.35
—	
1339.70	16,532.35
—	

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)

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

2-1-16  
Date

**CONTRIBUTIONS more than \$50 - from INDIVIDUALS\***

**SCHEDULE A**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25 2014 thru December 31, 2015

4.	CONTRIBUTIONS			DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR					
a	Name					
	Street Address					
	City	State	Zip			
	Occupation	Employer				
b	Name					
	Street Address					
	City	State	Zip			
	Occupation	Employer				
c	Name					
	Street Address					
	City	State	Zip			
	Occupation	Employer				
d	Name					
	Street Address					
	City	State	Zip			
	Occupation	Employer				
e	Name					
	Street Address					
	City	State	Zip			
	Occupation	Employer				
5	ENTER TOTAL ONLY 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 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 November 25 2014 thru December 31, 2015

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
PayPal Anonymous	25.00	25.00
PayPal	217.57	217.57
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]	242.57	242.57
6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column 13]		

\*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 November 25, 2014 thru December 31, 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]		—

**CANDIDATE LOANS**

**SCHEDULE C**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

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]					—

**OTHER LOANS**

**SCHEDULE C-1**

1- Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

ALL OTHER LOANS		DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
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			
a	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description			
b	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description			
c	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description			
d	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  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]				

**EXPENDITURES FOR OPERATING EXPENSES\***

**SCHEDULE D**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2014

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name <u>AZ Daily Sun</u> Street Address <u>1751 S. Thompson Street</u> City <u>Flagstaff</u> State <u>AZ</u> Zip <u>86001</u> Description of Items or Services Purchased <u>Print Advertising</u>	<u>11/20</u>	<u>513.69</u>
b	Name <u>AZ Daily Sun</u> Street Address <u>1751 S. Thompson Street</u> City <u>Flagstaff</u> State <u>AZ</u> Zip <u>86001</u> Description of Items or Services Purchased <u>Print Advertising</u>	<u>12/11</u>	<u>79.00</u>
c	Name <u>United States Postal Services</u> Street Address <u>104 N. Agassiz Street</u> City <u>Flagstaff</u> State <u>AZ</u> Zip <u>86001</u> Description of Items or Services Purchased <u>Renewal P.O. Box</u>	<u>12/12</u>	<u>220.00</u>
d	Name <u>Annette Avery</u> Street Address <u>728 N. Bertrand Street</u> City <u>Flagstaff</u> State <u>AZ</u> Zip <u>86001</u> Description of Items or Services Purchased <u>Reimbursement for website invoices</u>	<u>9/17</u>	<u>311.01</u>
e	Name <u>United States Postal Service</u> Street Address <u>104 N. Agassiz Street</u> City <u>Flagstaff</u> State <u>AZ</u> Zip <u>86001</u> Description of Items or Services Purchased <u>Renewal of P.O. Box</u>	<u>11/9</u>	<u>216.00</u>
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>1339.70</u>



INDEPENDENT EXPENDITURES\*

SCHEDULE D-1

1. Committee Name Yes for FUSD

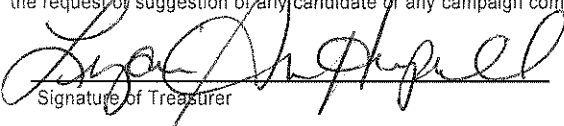
2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

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	Zip		
	Purpose and Description of Purchase		Benefited   Opposed		
	Candidate	Office Sought	Year of Election		
b	Name				
	Street Address				
	City	State	Zip		
	Purpose and Description of Purchase		Benefited   Opposed		
	Candidate	Office Sought	Year of Election		
c	Name				
	Street Address				
	City	State	Zip		
	Purpose and Description of Purchase		Benefited   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]				—	

\* 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 November 25, 2014 thru December 31, 2015

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	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Committee Name</td> <td>ID#</td> </tr> <tr> <td colspan="3">Address</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> </table>	Committee Name		ID#	Address			City	State	Zip		
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City	State	Zip										
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Address												
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Address												
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g	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Committee Name</td> <td>ID#</td> </tr> <tr> <td colspan="3">Address</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> </table>	Committee Name		ID#	Address			City	State	Zip		
Committee Name		ID#										
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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]		_____									

OFFSETS TO OPERATING EXPENSES\*

SCHEDULE D-3

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

	<b>REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES</b>	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
4.	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)		—

\* 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 November 25, 2014 thru December 31, 2015

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			
a	Name		
	Street Address		
	City <span style="float: right;">State Zip</span>		
b	Name		
	Street Address		
	City <span style="float: right;">State Zip</span>		
c	Name		
	Street Address		
	City <span style="float: right;">State Zip</span>		
d	Name		
	Street Address		
	City <span style="float: right;">State Zip</span>		
e	Name		
	Street Address		
	City <span style="float: right;">State Zip</span>		
f	Name		
	Street Address		
	City <span style="float: right;">State Zip</span>		
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)		—

**REPAYMENT OF OTHER LOANS**

**SCHEDULE D-5**

1. Committee Name Yes for FVSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

4.	<b>REPAYMENT OF ALL OTHER LOANS</b>	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 <hr/> Street Address <hr/> City State Zip		
b	Name and ID Number <hr/> Street Address <hr/> City State Zip		
c	Name and ID Number <hr/> Street Address <hr/> City State Zip		
d	Name and ID Number <hr/> Street Address <hr/> City State Zip		
e	Name and ID Number <hr/> Street Address <hr/> City State Zip		
f	Name and ID Number <hr/> Street Address <hr/> 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]		<hr/>

**TRANSFERS TO OTHER POLITICAL COMMITTEES**

**SCHEDULE D-6**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

4.	<b>TRANSFERS MADE BY THE REPORTING COMMITTEE</b>	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]		—

**ANY OTHER DISBURSEMENT**

**SCHEDULE D-7**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

4.	<b>ANY OTHER DISBURSEMENT</b>	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION			
a	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
	Description		
b	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
	Description		
c	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
	Description		
d	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
	Description		
e	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
	Description		
f	Name and ID Number		
	Street Address		
	City <span style="float: right;">State</span> <span style="float: right;">Zip</span>		
	Description		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [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 Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN		
a	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>	
		EXPENDITURE <input type="checkbox"/>	
	Description		
	Occupation	Employer	
b	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>	
		EXPENDITURE <input type="checkbox"/>	
	Description		
	Occupation	Employer	
c	Name, Address, City, State, Zip, and ID#	CONTRIBUTION <input type="checkbox"/>	
		EXPENDITURE <input type="checkbox"/>	
	Description		
	Occupation	Employer	
d	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 Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

	<b>DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS</b>	DATE RECEIVED	AMOUNT OF THE RECEIPT
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED		
a	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Receipt		
b	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Receipt		
c	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Receipt		
d	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Receipt		
e	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Receipt		
f	Name and ID Number <hr/> Street Address <hr/> City State Zip <hr/> Description of Receipt		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-11 [If last page of Schedule F-1, transfer total to Detailed Summary Page, Line 7, Column A]		—

**OFFSETS TO CONTRIBUTIONS RECEIVED\***

**SCHEDULE F-2**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

4.	<b>REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED</b>	DATE REFUND WAS MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) TO WHOM THE REFUND WAS MADE; DESCRIPTION		
a	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City <span style="float: right;">State <span style="float: right;">Zip</span></span></div> <div style="border-bottom: 1px solid black; padding: 2px;">Description of Refund</div>		
b	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City <span style="float: right;">State <span style="float: right;">Zip</span></span></div> <div style="border-bottom: 1px solid black; padding: 2px;">Description of Refund</div>		
c	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City <span style="float: right;">State <span style="float: right;">Zip</span></span></div> <div style="border-bottom: 1px solid black; padding: 2px;">Description of Refund</div>		
d	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City <span style="float: right;">State <span style="float: right;">Zip</span></span></div> <div style="border-bottom: 1px solid black; padding: 2px;">Description of Refund</div>		
e	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City <span style="float: right;">State <span style="float: right;">Zip</span></span></div> <div style="border-bottom: 1px solid black; padding: 2px;">Description of Refund</div>		
f	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City <span style="float: right;">State <span style="float: right;">Zip</span></span></div> <div style="border-bottom: 1px solid black; padding: 2px;">Description of Refund</div>		
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**

1. Committee Name Yes for FUSD

2. ID#

3. Report covering period from November 25, 2014 thru December 31, 2015

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					
a	Name, Address, City, State, Zip, and ID#  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 [if last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]				---

RESET