



STATE OF ARIZONA
 COCONINO COUNTY
 POLITICAL COMMITTEE
CAMPAIGN FINANCE REPORT

RECEIVED

OCT 31 2016

FOR OFFICE USE ONLY

RECEIVED

OCT 5 2016

1. Jim Driscoll 4 Sheriff

Coconino County Elections

Coconino County Elections

Full Name of Committee

3. ID#

15-002

Address

Flagstaff

86001

928 773-1955

City

Zip Code

Committee Phone #

2.

Sponsoring Organization (if applicable)

Jim Driscoll Sheriff of Coconino County Arizona

Primary Election: August 30, 2016

General Election: November 8, 2016

Name of Candidate and Office Sought (if applicable)

jdriscoll@npgcable.com

Committee E-mail Address

Committee Fax #

Amended Report

4. Reporting Period (Please Check Appropriate Box)

Due Between

		Due Between
a	JANUARY 31ST REPORT - For Period of November 25, 2014 through December 31, 2015	Jan. 1 and Feb. 1, 2016
b	JUNE 30TH REPORT - For Period of January 1, 2016 through May 31, 2016	June 1 and June 30, 2016
c	PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2016 through August 18, 2016	Aug. 19 and Aug. 26, 2016
d	POST-PRIMARY ELECTION REPORT - For Period of August 19, 2016 through September 19, 2016	Sept. 20 and Sept. 29, 2016
e	<input checked="" type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 20, 2016 through October 27, 2016	Oct. 28 and Nov. 4, 2016
f	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)		0.00
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	5,102.62	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	11,220.02	33,305.00
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	16,322.64	33,305.00
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]		0.00
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	8,338.86	25,321.22
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	7,983.78	7,983.78

**DETAILED SUMMARY PAGE OF
RECEIPTS AND DISBURSEMENTS**

1. Committee Name Jim Driscoll 4 Sheriff
 3. Report covering period of 9/20/16-10/27/16

2. ID#
 15-002

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
	0.00	20,000.00
	0.00	0.00
	0.00	0.00
	0.00	20,000.00
	0.00	0.00
	0.00	20,000.00
	10,000.00	10,000.00
	0.00	0.00
	10,000.00	10,000.00
	1,220.02	3,305.00
	0.00	0.00
	11,220.02	33,305.00

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)

	7,118.84	22,016.22
	0.00	0.00
	1,220.02	3,305.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	8,338.86	25,321.22
	0.00	0.00
	8,338.86	25,321.22
	0.00	0.00

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.

Laura Driscoll
 Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name JimDriscoll4Sheriff

2. ID#
15-002

3. Report covering period from 9/20/16 thru 10/27/16

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]					0.00

*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 JimDriscoll4Sheriff

2. ID# 15-002

3. Report covering period from 9/20/16 thru 10/27/16

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NONE		
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]	0.00	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column 13]
		0.00

*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 JimDriscoll4Sheriff

2. ID# 15-002

3. Report covering period from 9/20/16 thru 10/27/16

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	0.00
	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
			0.00

CANDIDATE LOANS

SCHEDULE C

1. Committee Name JimDriscoll4Sheriff

2. ID# 15-002

3. Report covering period from 9/20/16 thru 10/27/16

4. LOANS MADE OR GUARANTEED BY CANDIDATE		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
NAME, ADDRESS, FROM WHOM RECEIVED																												
4a	<table border="1"> <tr> <td>Last</td> <td>First</td> <td>Initial</td> </tr> <tr> <td>Driscoll</td> <td>Jim</td> <td>R</td> </tr> <tr> <td colspan="3">Street Address</td> </tr> <tr> <td colspan="3">[REDACTED]</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> <tr> <td>Flagstaff, AZ</td> <td></td> <td>86001</td> </tr> <tr> <td colspan="3">Description</td> </tr> <tr> <td colspan="3">campaign loan</td> </tr> </table>	Last	First	Initial	Driscoll	Jim	R	Street Address			[REDACTED]			City	State	Zip	Flagstaff, AZ		86001	Description			campaign loan			10/06/16	10,000.00	10,000.00
Last	First	Initial																										
Driscoll	Jim	R																										
Street Address																												
[REDACTED]																												
City	State	Zip																										
Flagstaff, AZ		86001																										
Description																												
campaign loan																												
b	<table border="1"> <tr> <td>Last</td> <td>First</td> <td>Initial</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">Street Address</td> </tr> <tr> <td colspan="3"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">Description</td> </tr> <tr> <td colspan="3"></td> </tr> </table>	Last	First	Initial				Street Address						City	State	Zip				Description								
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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]			10,000.00																								

OTHER LOANS

SCHEDULE C-1

1- Committee Name JimDriscoll4Sheriff

2. ID# 15-002

3. Report covering period from 9/20/16 thru 10/27/16

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# 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]				0.00

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name JimDriscoll4Sheriff

2. ID#
15-002

3. Report covering period from 9/20/16 thru 10/27/16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name Build a sign Street Address 11525 A Stonehollow Dr City Austin TX State Zip 78758 Description of Items or Services Purchased sign materials	9/20/16	104.30
b	Name Discount ugs Street Address 12610 NW 115 Ave Bldg 200 City Medley FL State Zip 33178 Description of Items or Services Purchased Pens	9/26/16	931.55
c	Name Coconino County Elections Street Address 110 E Cherry City Flagstaff AZ State Zip 86001 Description of Items or Services Purchased election statistics	9/29/16	139.35
d	Name KBTK-FM Street Address 2409 N 4th St City Flagstaff AZ State Zip 86004 Description of Items or Services Purchased radio advertising	9/26/16	306.15
e	Name Williams Grand Canyon News Street Address 118 S 3rd ST City Williams AZ State Zip 86046 Description of Items or Services Purchased advertising	10/5/16	629.04
f	Name Direct Impressions Street Address 1751 S Thompson St City Flagstaff AZ State Zip 86001 Description of Items or Services Purchased mail advertising	10/5/16	846.46
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]			

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name JimDriscoll4Sheriff

2. ID#
15-002

3. Report covering period from 9/20/16 thru 10/27/16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
a	Name KTNN Broadcasting Street Address PO Box 2569 City Window Rock AZ State Zip 86515 Description of Items or Services Purchased radio advertising	10/21/16	472.50
b	Name Flagstaff Business News Street Address 121 W Birch St #408 City Flagstaff AZ State Zip 86001 Description of Items or Services Purchased advertising	10/25/16	475.00
c	Name Hampton Inn Street Address 294 Sandhill Rd City Page AZ State Zip 86040 Description of Items or Services Purchased campaign travel	10/8/16	141.56
d	Name KSED, KFLX Street Address customerservice@nazbestradio.com City Flagstaff AZ State Zip 86004 Description of Items or Services Purchased 9/28/16	9/28/16	612.31
e	Name Dennys Street Address 2 Legacy Lane City Tuba City AZ State Zip 86045 Description of Items or Services Purchased committee lunch	10/15/16	99.17
f	Name Navajo Times Street Address PO Box 310 City Window Rock AZ State Zip 86515 Description of Items or Services Purchased advertising	10/10/16	819.00
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]			

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name JimDriscoll4Sheriff

2. ID#
15-002

3. Report covering period from 9/20/16 thru 10/27/16

EXPENDITURES				DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE		
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE							
a	Name Navajo Times	Street Address PO Box 310	City Window Rock	State AZ	Zip 86515	10/13/16	220.50
Description of Items or Services Purchased advertising							
b	Name Western Navajo Fair	Street Address Tuba City Chapter	City Tuba City	State AZ	Zip	9/12/16	1,000.00
Description of Items or Services Purchased advertising							
c	Name Aspen Digital Printing	Street Address 606 W Coconino	City Flagstaff	State AZ	Zip 86001	9/26/16	321.95
Description of Items or Services Purchased campaign materials							
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]							7,118.84

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name JimDriscoll4Sheriff

2. ID#
15-002

3. Report covering period from 9/20/16 thru 10/27/16

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	<table border="1"> <tr> <td>Name, Address, City, State, Zip, and ID# Erika Wiltenmuth 911 Sawmill Rd Flagstaff, AZ 86001</td> <td> CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">Description clerical support</td> </tr> <tr> <td>Occupation Executive Assistant</td> <td>Employer Coconino County</td> </tr> </table>	Name, Address, City, State, Zip, and ID# Erika Wiltenmuth 911 Sawmill Rd Flagstaff, AZ 86001	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>	Description clerical support		Occupation Executive Assistant	Employer Coconino County	9/30/16	1,000.00
Name, Address, City, State, Zip, and ID# Erika Wiltenmuth 911 Sawmill Rd Flagstaff, AZ 86001	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
Description clerical support									
Occupation Executive Assistant	Employer Coconino County								
b	<table border="1"> <tr> <td>Name, Address, City, State, Zip, and ID# Bill Pribil 911 Sawmill Rd Flagstaff, AZ 86001</td> <td> CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">Description newspaper advertisement</td> </tr> <tr> <td>Occupation Sheriff</td> <td>Employer Coconino County</td> </tr> </table>	Name, Address, City, State, Zip, and ID# Bill Pribil 911 Sawmill Rd Flagstaff, AZ 86001	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>	Description newspaper advertisement		Occupation Sheriff	Employer Coconino County	10/13/16	220.02
Name, Address, City, State, Zip, and ID# Bill Pribil 911 Sawmill Rd Flagstaff, AZ 86001	CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input type="checkbox"/>								
Description newspaper advertisement									
Occupation Sheriff	Employer Coconino County								
c	<table border="1"> <tr> <td>Name, Address, City, State, Zip, and ID#</td> <td> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">Description</td> </tr> <tr> <td>Occupation</td> <td>Employer</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								
d	<table border="1"> <tr> <td>Name, Address, City, State, Zip, and ID#</td> <td> CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/> </td> </tr> <tr> <td colspan="2">Description</td> </tr> <tr> <td>Occupation</td> <td>Employer</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]		1,220.02						
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]		1,220.02						

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name JimDriscoll4Sheriff

2. ID#
15-002

3. Report covering period from 9/20/16 thru 10/27/16

4. DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS		DATE RECEIVED	AMOUNT OF THE RECEIPT
NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED			
a	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
b	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
c	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
e	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
f	Name and ID Number		
	Street Address		
	City State Zip		
	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]		0.00

OFFSETS TO CONTRIBUTIONS RECEIVED*

SCHEDULE F-2

1. Committee Name JimDriscoll4Sheriff

2. ID#
15-002

3. Report covering period from 9/20/16 thru 10/27/16

4.	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	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	Name and ID Number Street Address City State Zip Description of Refund		
b	Name and ID Number Street Address City State Zip Description of Refund		
c	Name and ID Number Street Address City State Zip Description of Refund		
d	Name and ID Number Street Address City State Zip Description of Refund		
e	Name and ID Number Street Address City State Zip Description of Refund		
f	Name and ID Number Street Address City State Zip 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]		0.00

*Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name JimDriscoll4Sheriff

2. ID# 15-002

3. Report covering period from 9/20/16 thru 10/27/16

	DEBTS AND OBLIGATIONS	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
4.	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]				0.00

