

POLITICAL COMMITTEE
CITY OF CASA GRANDE
CAMPAIGN FINANCE REPORT
2016 August/November Regular Election

FOR OFFICE USE ONLY

CITY CLERK'S
JUN 27 2016
OFFICE

1. Craig McFarland for Mayor
Full Name of Committee
152 W. Auburn Sky Ct.
Address
Casa Grande, AZ 85122 Pinal 520-251-0687
City ZIP Code County Phone

2. Craig McFarland, candidate for Mayor of Casa Grande
Sponsoring Organization or Candidate and office
Same as above
Name of Candidate and Office Sought (if applicable)
craigmcf54@gmail.com or craigmcfarland4mayor@gmail.com
E-Mail Address Fax#

3A. ID# MC-15-1

4. REPORTING PERIOD (Please check appropriate box)

DUE BETWEEN

- January 31 Report - For Period of 3/1/2013 * thru December 31, 2015 January 1, 2016 and February 1, 2016
- June 30 Report - For Period of January 1, 2016 thru May 31, 2016 June 1, 2016 and June 30, 2016
- Pre-Primary Election Report - For Period of June 1, 2016 thru August 18, 2016 August 19, 2016 and August 26, 2016
- Post-Primary Election Report - For Period of August 19, 2016 thru September 19, 2016 September 20, 2016 and September 29, 2016
- Pre-General Election Report - For Period of September 20, 2016 thru October 27, 2016 October 28, 2016 and November 4, 2016
- Post-General Election Report - For Period of October 28, 2016 thru November 28, 2016 November 29, 2016 and December 8, 2016
- **January 31, Report - For Period of November 29, 2016 thru December 31, 2017 January 1, 2018 and January 31, 2018

5. **SUMMARY**

5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)

5b Cash on Hand at the Beginning of this Reporting Period

5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)

5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]

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)

7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]

Column A Total This Reporting Period	Column B Election Period Total To Date
	\$0.00
\$8,389.29	
\$3,725.00	\$21,095.00
\$12,114.29	\$21,095.00
	\$0.00
\$3,383.08	\$12,363.79
\$8,731.21	\$8,731.21

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Craig McFarland for Mayor
 3. Report covering period from 1/1/16 Thru 5/31/16

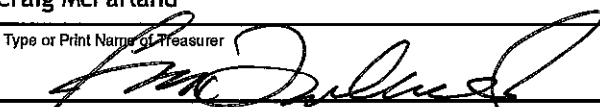
2. ID# MC-15-1

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	\$2,725.00	\$12,675.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	\$0.00	\$70.00
(c) Political Committees (Total from Schedule B)	\$1,000.00	\$1,00.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	\$3,725.00	\$13,745.00
(e) Refund of contributions (Total from Schedule F-2)	\$0.00	\$0.00
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	\$3,725.00	\$13,745.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	\$0.00	\$7,300.00
(b) All other loans (Total from Schedule C-1)	\$0.00	\$0.00
(c) Total Loans [add 5(a) and 5(b)]	\$0.00	\$7,300.00
6. In-kind contributions (Total from Schedule E)	\$0.00	\$50.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	\$0.00	\$0.00
8. Total Receipts [add 4(f), 5(c), 6, and 7]	\$3,725.00	\$21,095.00
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	\$3,383.08	\$12,313.79
10. Independent Expenditures (Total from Schedule D-1)	\$0.00	\$0.00
11. Value of In-kind expenditures (Total from Schedule E)	\$0.00	\$50.00
12. Loans made by reporting committee (Total from Schedule D-2)	\$0.00	\$0.00
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	\$0.00	\$0.00
(b) Repayment of all other loans (Total from Schedule D-5)	\$0.00	\$0.00
(c) Total Loan Repayments [add 13(a) and 13(b)]	\$0.00	\$0.00
14. Transfers to other political committees (Total from Schedule D-6)	\$0.00	\$0.00
15. Any other disbursement (Total from Schedule D-7)	\$0.00	\$0.00
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	\$3,383.08	\$12,363.79
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	\$0.00	\$0.00
18. Total disbursements [subtract line 17 from line 16]	\$3,383.08	\$12,363.79
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	\$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.

Craig McFarland

Type or Print Name of Treasurer



6/27/16

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID# **MC-15-1**

1. Committee Name: **Craig McFarland for Mayor**

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
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			
4a.	LAST: Duvall FIRST: Mark & Elsa MI:	1/18/2016	\$ 250	\$ 250
	STREET ADDRESS: 42119 N. Mountain Loop Dr.			
	CITY: Phoenix STATE: AZ ZIP: 85081			
	OCCUPATION: EMPLOYER:			
b.	LAST: Delgado FIRST: Robert MI:	1/13/2016	\$ 250	\$ 250
	STREET ADDRESS: 3034 E Ocotillo Rd.			
	CITY: Phoenix STATE: AZ ZIP: 85016			
	OCCUPATION: CEO EMPLOYER: Hensley Beverage Co.			
c.	LAST: Ewing FIRST: John & Patty MI:	1/18/2016	\$ 100	\$ 100
	STREET ADDRESS: 2443 N. Sandstone Place			
	CITY: Casa Grande STATE: AZ ZIP: 85122			
	OCCUPATION: Teacher EMPLOYER: CAVIT			
d.	LAST: Voigts FIRST: Rosie MI:	1/18/2016	\$ 200	\$ 200
	STREET ADDRESS: 3198 N. Desert Horizons Ln.			
	CITY: Casa Grande STATE: AZ ZIP: 85122			
	OCCUPATION: Retired EMPLOYER: N/A			
e.	LAST: Kiehne FIRST: Gary MI:	1/18/2016	\$ 250	\$ 250
	STREET ADDRESS: 724 W. School Bus Rd.			
	CITY: Eager STATE: AZ ZIP: 85925			
	OCCUPATION: Inn Keeper/Rancher EMPLOYER: Self Employed			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (if last page of Schedule A, transfer total to detailed Summary Page Line 4(z), 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# **MC-15-1**

1. Committee: Name: **Craig McFarland for Mayor**

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	
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR					
4a.	LAST: Hobbs	FIRST: Jan	1/9/2016	\$ 250	\$ 250	
	STREET ADDRESS: 275 E. Cottonwood Ln, ste 1					
	CITY: Casa Grande	STATE: AZ				ZIP: 85122
	OCCUPATION: Insurance Brooker	EMPLOYER: American Family Insurance				
b.	LAST: Goodmiller	FIRST: Chuck	1/14/2016	\$ 500	\$ 500	
	STREET ADDRESS: 1115 E. Cottonwood Ln, ste 100					
	CITY: Casa Grande	STATE: AZ				ZIP: 85122
	OCCUPATION: CPA	EMPLOYER: Henry & Horn				
c.	LAST: Scott	FIRST: Irving	1/20/2016	\$ 50	\$ 50	
	STREET ADDRESS: 426 E. Providence Dr.					
	CITY: Casa Grande	STATE: AZ				ZIP: 85122
	OCCUPATION: Sales	EMPLOYER: CG Dispatch				
d.	LAST: Cline	FIRST: Sariena	2/11/2016	\$ 100	\$ 100	
	STREET ADDRESS: 110 E. Laurel Cir.					
	CITY: Casa Grande	STATE: AZ				ZIP: 85122
	OCCUPATION: Rest. Owner	EMPLOYER: Bostons Rest.				
e.	LAST: McCarville	FIRST: Kirk	3/3/2016	\$ 250	\$ 250	
	STREET ADDRESS: 211 N. Florence St., ste 101					
	CITY: Casa Grande	STATE: AZ				ZIP: 85122
	OCCUPATION: Real Estate	EMPLOYER: Land Advisors				
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to detailed Summary Page Line 4(z), 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# **MC-15-1**

1. Committee Name: **Craig McFarland for Mayor**

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
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR				
4a.	LAST: Williams	FIRST: Sandra	3/7/2016	\$ 250	\$ 250
	STREET ADDRESS: 8350 E. San Ramon Dr.				
	CITY: Scottsdale	STATE: AZ ZIP: 85258			
	OCCUPATION: Retired	EMPLOYER: N/A			
b.	LAST: Miller	FIRST: Laurie	3/8/2016	\$ 100	\$ 100
	STREET ADDRESS: 930 N. Lehmborg Ave.				
	CITY: Casa Grande	STATE: AZ ZIP: 85122			
	OCCUPATION: Court Reporter	EMPLOYER: Pinal Co.			
c.	LAST: Palenkas	FIRST: Sharon	4/9/2016	\$ 100	\$ 100
	STREET ADDRESS: 6502 E. Marilyn Rd.				
	CITY: Scottsdale	STATE: AZ ZIP: 85258			
	OCCUPATION: Retired	EMPLOYER: N/A			
d.	LAST: Diano	FIRST: Martin	4/19/2016	\$ 25	\$ 25
	STREET ADDRESS: 3 N. Bolera Ln.				
	CITY: Casa Grande	STATE: AZ ZIP: 85194			
	OCCUPATION: Retired	EMPLOYER: N/A			
e.	LAST: Caywood	FIRST: Tommy	5/5/2016	\$ 50	\$ 50
	STREET ADDRESS: 910 E. 2nd St.				
	CITY: Casa Grande	STATE: AZ ZIP: 85122			
	OCCUPATION: Retired Farmer	EMPLOYER: Self			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to detailed Summary Page Line 4(z), Column A]			\$ 2,725	\$ 12,675

* 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 of \$50 or less - AGGREGATE TOTAL*

SCHEDULE A-1

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
Cash contributions: N/A			
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	\$0.00	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	\$70.00

*If contributions of \$50 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

4		CONTRIBUTIONS	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
		IDENTITY OF CONTRIBUTOR AND DATE RECEIVED		
4a	ID # 2000-02281	NAME, ADDRESS, CITY, STATE AND ZIP Professional Fire Fighters of Arizona UPFF-Tempe Chapter 61 E. Columbus Ave, ste 200 Phoenix, AZ 85012	\$1,000	\$1,000
	DATE RECEIVED 5/12/16			
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]		\$1000.00	\$1000.00

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Craig McFarland for Mayor	2. ID # MC-15-1		
3.	Report covering period from <u>1/1/16</u> thru <u>5/31/16</u>			
4.	LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS FROM WHOM RECEIVED	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND 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	\$7,300.00

OTHER LOANS

SCHEDULE C1

2. ID# MC-15-1

1. Committee Name Craig McFarland for Mayor
 3. Report covering period from 1/1/16 thru 5/31/16

4	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
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			
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(a), Column A]	\$0.00	\$0.00	

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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 Casa Grande Chamber of Commerce 575 N. Marshall St. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Casa Grande Chamber Annual Dinner	1/6/16	\$120.00
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Print & Sign Express 623 E. Florence Blvd. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing book mark handout @ Home & Garden Show	1/6/16	\$97.83
4c.	NAME, ADDRESS, CITY, STATE AND ZIP Print & Sign Express 623 E. Florence Blvd. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing book mark handout @ Home & Garden Show	1/8/16	\$179.35
4d.	NAME, ADDRESS, CITY, STATE AND ZIP Print & Sign Express 623 E. Florence Blvd. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing book mark handout @ Downtown Street Fair	1/13/16	\$365.23
4e.	NAME, ADDRESS, CITY, STATE AND ZIP BeDillon's 800 N. Park Ave Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Meet & Greet food and beverage expense	1/18/16	\$884.05
4f.	NAME, ADDRESS, CITY, STATE AND ZIP Miele Entertainment Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Meet & Greet photo booth	1/18/16	\$175.00
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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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 Print & Sign Express 623 E. Florence Blvd. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing Campaign handout material	2/11/16	\$45.39
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Print & Sign Express 623 E. Florence Blvd. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Printing Campaign handout material	2/23/16	\$24.67
4c.	NAME, ADDRESS, CITY, STATE AND ZIP Safeway 1637 N. Trezell Rd. Casa Grande, AZ DESCRIPTION OF ITEMS OR SERVICES PURCHASED Beverage expense for Jan Hobbs Meet & Greet on 2/23/16	2/23/16	\$48.45
4d.	NAME, ADDRESS, CITY, STATE AND ZIP Casa Grande Valley Newspaper 200 W.2nd St. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Advertising in CG Dispatch	2/25/16	\$1,221.60
4e.	NAME, ADDRESS, CITY, STATE AND ZIP Pinal Partnership P. O. Box 904 Florence, AZ DESCRIPTION OF ITEMS OR SERVICES PURCHASED Meeting fee for their Monthly event	5/3/16	\$30.00
4f.	NAME, ADDRESS, CITY, STATE AND ZIP Casa Grande Chamber 575 N. Marshall St. Casa Grande, AZ 85122 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Meet & Greet Chamber event May 2016	5/31/16	\$20.00
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

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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 JJG Consulting, LLC 3701 Bradley Lane Chevy Chase, MD DESCRIPTION OF ITEMS OR SERVICES PURCHASED Campaign Survey fee (Survey Monkey)	5/31/16	\$78.00
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Google Ad Words Boost On-Line Transaction pd on Great Western Bank Account DESCRIPTION OF ITEMS OR SERVICES PURCHASED Google Face Book & Website boost service - April	4/25/16	\$49.96
4c.	NAME, ADDRESS, CITY, STATE AND ZIP Google Ad Words Boost On-Line Transaction pd on Great Western Bank Account DESCRIPTION OF ITEMS OR SERVICES PURCHASED Google Face Book & Website boost service - May	5/25/16	\$43.55
4d.	NAME, ADDRESS, CITY, STATE AND ZIP C DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
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]		\$3,383.08

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

2. ID# MC-15-1

1. Committee Name Craig McFarland for Mayor

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

4	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 <table style="width: 100%; border: none;"> <tr> <td style="width: 65%; border: none;">PURPOSE AND DESCRIPTION OF PURCHASE</td> <td style="width: 5%; border: none; text-align: center;"><input type="checkbox"/></td> <td style="width: 10%; border: none; text-align: center;">Benefitted</td> <td style="width: 5%; border: none; text-align: center;"><input type="checkbox"/></td> <td style="width: 15%; border: none; text-align: center;">Opposed</td> </tr> <tr> <td style="border: none;">CANDIDATE</td> <td style="border: none;">OFFICE SOUGHT</td> <td colspan="3" style="border: none;">YEAR OF ELECTION</td> </tr> </table>	PURPOSE AND DESCRIPTION OF PURCHASE	<input type="checkbox"/>	Benefitted	<input type="checkbox"/>	Opposed	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION				
PURPOSE AND DESCRIPTION OF PURCHASE	<input type="checkbox"/>	Benefitted	<input type="checkbox"/>	Opposed									
CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION											
4b.	NAME, ADDRESS, CITY, STATE AND ZIP <table style="width: 100%; border: none;"> <tr> <td style="width: 65%; border: none;">PURPOSE AND DESCRIPTION OF PURCHASE</td> <td style="width: 5%; border: none; text-align: center;"><input type="checkbox"/></td> <td style="width: 10%; border: none; text-align: center;">Benefitted</td> <td style="width: 5%; border: none; text-align: center;"><input type="checkbox"/></td> <td style="width: 15%; border: none; text-align: center;">Opposed</td> </tr> <tr> <td style="border: none;">CANDIDATE</td> <td style="border: none;">OFFICE SOUGHT</td> <td colspan="3" style="border: none;">YEAR OF ELECTION</td> </tr> </table>	PURPOSE AND DESCRIPTION OF PURCHASE	<input type="checkbox"/>	Benefitted	<input type="checkbox"/>	Opposed	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION				
PURPOSE AND DESCRIPTION OF PURCHASE	<input type="checkbox"/>	Benefitted	<input type="checkbox"/>	Opposed									
CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION											
4c.	NAME, ADDRESS, CITY, STATE AND ZIP <table style="width: 100%; border: none;"> <tr> <td style="width: 65%; border: none;">PURPOSE AND DESCRIPTION OF PURCHASE</td> <td style="width: 5%; border: none; text-align: center;"><input type="checkbox"/></td> <td style="width: 10%; border: none; text-align: center;">Benefitted</td> <td style="width: 5%; border: none; text-align: center;"><input type="checkbox"/></td> <td style="width: 15%; border: none; text-align: center;">Opposed</td> </tr> <tr> <td style="border: none;">CANDIDATE</td> <td style="border: none;">OFFICE SOUGHT</td> <td colspan="3" style="border: none;">YEAR OF ELECTION</td> </tr> </table>	PURPOSE AND DESCRIPTION OF PURCHASE	<input type="checkbox"/>	Benefitted	<input type="checkbox"/>	Opposed	CANDIDATE	OFFICE SOUGHT	YEAR OF ELECTION				
PURPOSE AND DESCRIPTION OF PURCHASE	<input type="checkbox"/>	Benefitted	<input type="checkbox"/>	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]		\$0.00										

*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

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

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#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		\$0.00

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

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		
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

2. ID#
MC-15-1

1. Committee Name Craig McFarland

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

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, AND ZIP		
4b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
4f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]			\$0.00

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

4	REPAYMENT OF ALL OTHER LOANS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
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#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		\$0.00

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID#
MC-15-1

1. Committee Name Craig McFarland

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

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 data-bbox="232 520 669 638">NAME, ADDRESS, CITY, STATE, ZIP AND ID# N/A</td> <td data-bbox="669 520 1117 638">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="232 638 1117 697">DESCRIPTION</td> </tr> <tr> <td data-bbox="232 697 669 747">OCCUPATION</td> <td data-bbox="669 697 1117 747">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID# N/A	CONTRIBUTION EXPENDITURE	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID# N/A	CONTRIBUTION EXPENDITURE								
DESCRIPTION									
OCCUPATION	EMPLOYER								
4b.	<table border="1"> <tr> <td data-bbox="232 747 669 865">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td data-bbox="669 747 1117 865">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="232 865 1117 924">DESCRIPTION</td> </tr> <tr> <td data-bbox="232 924 669 974">OCCUPATION</td> <td data-bbox="669 924 1117 974">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE								
DESCRIPTION									
OCCUPATION	EMPLOYER								
4c.	<table border="1"> <tr> <td data-bbox="232 974 669 1092">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td data-bbox="669 974 1117 1092">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="232 1092 1117 1150">DESCRIPTION</td> </tr> <tr> <td data-bbox="232 1150 669 1201">OCCUPATION</td> <td data-bbox="669 1150 1117 1201">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE								
DESCRIPTION									
OCCUPATION	EMPLOYER								
4d.	<table border="1"> <tr> <td data-bbox="232 1201 669 1318">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td data-bbox="669 1201 1117 1318">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="232 1318 1117 1377">DESCRIPTION</td> </tr> <tr> <td data-bbox="232 1377 669 1428">OCCUPATION</td> <td data-bbox="669 1377 1117 1428">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE								
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]	\$0.00							
6.	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 11, Column A]	\$0.00							

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

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		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	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		\$0.00

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	DATE REFUND MADE	AMOUNT OF THE REFUND
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		
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

2. ID#
MC-15-1

1. Committee Name Craig McFarland for Mayor

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

4	DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
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				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [Transfer total to Detail Summary Page Line 19, Column A]				\$0.00