

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

1. Committee Name: Kim Chittick for Payson Council
 3. Report covering period from 4.8.2016 Thru May 31, 2016

2. ID#	<u>16-C-02</u>
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

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)	<u>300.00</u>	<u>300.00</u>
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	<u>540.00</u>	<u>540.00</u>
(c) Political Committees (Total from Schedule B)	<u>-</u>	<u>-</u>
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	<u>840.00</u>	<u>840.00</u>
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	<u>840.00</u>	<u>840.00</u>
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	<u>120.00</u>	<u>120.00</u>
(b) All other loans (Total from Schedule C-1)	<u>-</u>	<u>-</u>
(c) Total Loans [add 5(a) and 5(b)]	<u>120.00</u>	<u>120.00</u>
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]	<u>960.00</u>	<u>960.00</u>

DISBURSEMENTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
9. Expenditures for operating expenses (Total from Schedule D)	<u>510.66</u>	<u>510.66</u>
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)	<u>120.00</u>	<u>120.00</u>
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]	<u>120.00</u>	<u>120.00</u>
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]	<u>630.66</u>	<u>630.66</u>
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	<u>630.66</u>	<u>630.66</u>
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.

MICHAEL L. CHITTIK
 Type or Print Name of Treasurer

[Signature]
 Signature of Treasurer or Candidate or Designating Individual

6-15-2016
 Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID# 16-C-02	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 9, 2016 thru May 31, 2016

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR				
4a.	LAST Swartwood	FIRST Craig	4/28/16	\$100 ⁰⁰	\$100 ⁰⁰
STREET ADDRESS					
CITY Payson	STATE AZ	ZIP 85541			
OCCUPATION Realtor	EMPLOYER				
b.	LAST Vaught	FIRST Steve/Becky	4/28/16	\$100 ⁰⁰	\$100 ⁰⁰
STREET ADDRESS 803 N. Blazing Star Circle					
CITY Payson	STATE AZ	ZIP 85541			
OCCUPATION Pilot/nurse	EMPLOYER				
c.	LAST Chambers	FIRST Kimberly	4/28/16	\$50 ⁰⁰	\$50 ⁰⁰
STREET ADDRESS 2505 S. Grapevine Dr.					
CITY Payson	STATE AZ	ZIP 85541			
OCCUPATION	EMPLOYER				
d.	LAST Kofke	FIRST Andy/Cindy	4/28/16	\$50 ⁰⁰	\$50 ⁰⁰
STREET ADDRESS 1107 W. Country Club Dr.					
CITY Payson	STATE AZ	ZIP 85541			
OCCUPATION	EMPLOYER				
e.	LAST	FIRST		\$300 ⁰⁰	\$300 ⁰⁰
STREET ADDRESS					
CITY	STATE	ZIP			
OCCUPATION	EMPLOYER				
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]			\$300 ⁰⁰	\$300 ⁰⁰

*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# <u>16-C-02</u>	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
fundraiser mail. cash	\$501 ⁰⁰ 40 ⁰⁰	\$540 ⁰⁰
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A] \$540 ⁰⁰		6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B] \$540 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#	16-E-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

4		CONTRIBUTIONS	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
		IDENTITY OF CONTRIBUTOR AND DATE RECEIVED		
4a	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 Kim Chittick for Payson Council		2. ID # 16-C-02	
		<input type="checkbox"/>	Primary
		<input type="checkbox"/>	General
3. Report covering period from April 8, 2016 thru May 31, 2016			
4. LOANS MADE OR GUARANTEED BY CANDIDATE		DATE RECEIVED	AMOUNT RECEIVED
NAME AND ADDRESS FROM WHOM RECEIVED			CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP Kim Chittick	4/8/16	\$20⁰⁰
	101 W. Chateau Circle, Payson, AZ 85541		\$20⁰⁰
	DESCRIPTION Loan to Open Account		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP Kim Chittick	4/27/16	\$100⁰⁰
	101 W. Chateau Circle Payson AZ 85541		\$120⁰⁰
	DESCRIPTION Initial expenses		
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]	\$120⁰⁰	\$120.00

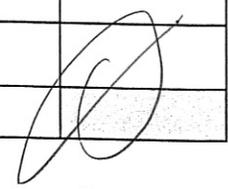
OTHER LOANS

SCHEDULE C1

2. ID#	16.C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council
 3. Report covering period from April 8, 2016 thru May 31, 2016

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]			


 Page ___ of ___

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#	16-C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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 <u>Postnet</u> <u>1000 N. Beeline Hwy</u> <u>Payson AZ 85541</u>	<u>4/27/16</u>	<u>\$897</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Printing - Fundraiser Invites</u>		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Postnet</u> <u>1000 N. Beeline Hwy</u> <u>Payson, AZ 85541</u>	<u>4/28/16</u>	<u>\$3588</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Printing - Businesscards</u>		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Skyler Brien</u> <u>1311 N. East St.</u> <u>Payson AZ 85541</u>	<u>4/28/16</u>	<u>\$80⁰⁰</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Pickup & Delivery Tables & Chairs</u>		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Josies Q BBQ</u> <u>1103 S. Beeline Hwy</u> <u>Payson, AZ 85541</u>	<u>4/28/16</u>	<u>\$167⁵¹</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Meat Rolls for BBQ fundraiser</u>		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wet Mart</u> <u>300 N. Beeline Hwy</u> <u>Payson AZ 85541</u>	<u>4/28/16</u>	<u>\$1830</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Bottled water for fundraiser</u>		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Sawmill Theatre</u> <u>201 N. Main Street</u> <u>Payson, AZ 85541</u>	<u>5/26/16</u>	<u>\$200⁰⁰</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Advertising</u>		
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]		<u>\$510.66</u>

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

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

2. ID# 16-C-02

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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 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 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 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]		

*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#	W.C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittreck for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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]		

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

2. ID# <u>16-C-02</u>	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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])

* Includes return of contributions made by reporting committee



REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

2. ID# <u>16.C-02</u>	
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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 <u>Kim Chittick</u> <u>101 W. Chateau Circle</u> <u>Payson, AZ 85541</u>	<u>4/29/16</u>	<u>\$120⁰⁰</u>
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]			<u>\$120⁰⁰</u>

REPAYMENT OF ALL OTHER LOANS

SCHEDULE D-5

2. ID#	16-C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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		
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

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

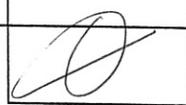
2. ID#	16-C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (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#		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]



ANY OTHER DISBURSEMENT

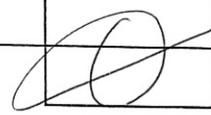
SCHEDULE D-7

2. ID#	16-C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

4.	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]		



IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID#	16-C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
4d.	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]			
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]			

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

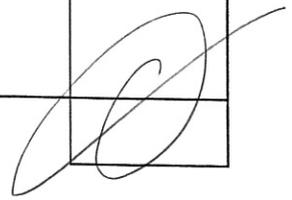
2. ID#	16.C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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)



OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

2. ID#	16-C-02
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

2. ID# 16-C-02

1. Committee Name Kim Chittick for Payson Council

3. Report covering period from April 8, 2016 thru May 31, 2016

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				
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)				