#### POLITICAL COMMITTEE

CITY OF TEMPE **CAMPAIGN FINANCE REPORT** 2012 March/May Regular Election FOR PORTOED SE PRIVED

2012 MAR -5 PH 4:09

CITY OF TEMPE

1	Friends of GC Saarup				CITY OF TEMPE CITY CLERK'S OFFICE
••	Full Name of Committee				CITY CLERK'S OFFICE
	837 East Stephens Drive				
	Address				A stal cock for
	Tempe	85283	Maricopa	(480) 420-4855	100 ans late the
	Слу	ZIP Code	County	Phone	
2					3A. ID#
···	Spensoring Organization or Candidate and offi	ce			1
	GC Saarup - City Council				
	Name of Candidate and Office Sought (if applie	able)	<del> </del>		
	gc@akioma.com				
	E-Mail Address	Fax#	****		
4.	REPORTING PERIO	D (Please check approp	riate box)		DUE BETWEEN
	January 31 Report - For F	Period of	* thru Dece	mber 31, 2011	January 1, 2012 and January 31, 2012

Pre-Primary Election Report - For Period of January 1, 2012 thru February 22, 2012 . . . . . . . . February 23, 2012 and March 1, 2012

	Post-General Election Report - For Period of April 26, 2012 thru June 4, 20	12	lune 5, 2012 and June 14, 2012
	**January 31 Report - For Period of June 5, 2012 thru December 31, 2013	Januar	y 1, 2014 and January 31, 2014
5.	SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5а	Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)	0	0
5b	Cash on Hand at the Beginning of this Reporting Period	0	0
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	0	0
5d	Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	0	0
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
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	0	0
7.	Cash on Hand at Close of Reporting Period [Subtract	0	0

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

Line 6b from Line 5d]

<sup>\*\*</sup>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

FRIENDS OF GC SARUS 2 ID#

3. Report covering period from 1/1/26/2 Thru 2/22/2012		
RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind;		· · · · · · · · · · · · · · · · · · ·
(a) Individuals - more than \$25 (Total from Schedule A)	0	0
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	0	0
(c) Political Committees (Total from Schedule B)	0	0
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	0	0
(e) Refund of contributions (Total from Schedule F-2)	0	0
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	0	0
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0	0
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total Loans [add 5(a) and 5(b)]	0	0
In-kind contributions (Total from Schedule E)	0	0
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	0
8. Total Receipts [add 4(f), 5(c), 6, and 7]	0	0
QUALIFYING CONTRIBUTION RECEIPTS	0	0
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).	0	0
DISBURSEMENTS	0	0
9. Expenditures for operating expenses (Total from Schedule D)	0	0
10. Independent Expenditures (Total from Schedule D-1)	0	0
11. Value of In-kind expenditures (Total from Schedule E)	0	0
12. Loans made by reporting committee (Total from Schedule D-2)	0	0
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	0
(b) Repayment of all other loans (Total from Schedule D-5)	0	0
(c) Total Loan Repayments [add 13(a) and 13(b)]	0	0
14. Transfers to other political committees (Total from Schedule D-6)	0	0
15. Any other disbursement (Total from Schedule D-7)	0	0
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	0	0
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	0
18. Total disbursements [subtract line 17 from line 16]	0	0
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0	0
10. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and complete. 3C Saarup	to the best of my knowledge	and belief it is true and
ype or Print Name of Treasure?	<del>*</del>	
March 1,	2012	
Signature of Treasurer or Candidate or Designating Individual Dat	te	

### CONTRIBUTIONS more than \$25 - from INDIVIDUALS\*

SCI	40	ווח	1 6	Α
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	1. Committee Name Fri	ends of GC Saarup	)			
	3. Report covering period	from January 1, 2012		thru February 22, 2	012	
4	NAME, ADDRESS, OCCU	CONTRIBUTION		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST	FIRST	MI		1 27000	TODATE
	STREET ADDRESS					
	CITY	STATE	ZIP			
	OCCUPATION		EMPLOYER			
b.	LAST	FIRST	Mi			
	STREET ADDRESS	unmande and daily a management of the second	<u>, , , , , , , , , , , , , , , , , , , </u>			
	CITY	STATE	ZiP			
	OCCUPATION		EMPLOYER	**************************************		
C.	LAST	FIRST	MI			
	STREET ADDRESS					
	CITY	STATE	ZIP			
	OCCUPATION		EMPLOYER	<del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </del>		
ď.	LAST	FIRST	MI			
	STREET ADDRESS					]
	CITY	STATE	ZIP			
	OCCUPATION		EMPLOYER			
е.	LAST	FIRST	MI			
	STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·				
	CITY	STATE	ZIP			
	OCCUPATION		EMPLOYER			
5,	ENTER TOTAL ONLY IF LAS Summary Page Line 4(z), Colo	T PAGE OF SCHEDULE A [If ia: ımn A]	st page of Schedule A, transfer total i	to Detailed		

# **CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL\***

SCHEDULE A-1

Friends of GC Saarup  1. Committee Name	2. 10#					
3. Report covering period from January 1, 2012	thru_	February 22, 2012				
4. Aggregate Total of Contributions of \$25 or	Aggregate Total of Contributions of \$25 or less					
DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE				
5, TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b),		6. CUMMULATIVE TOTAL THIS				
Column A]		CAMPAIGN TO DATE  [Transfer total to Detailed  Summary Page, Line 4(b),  Column 8)				

<sup>\*</sup>If contributions of \$25 or less are listed with contributor's 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**

SCF	IEDI	II E	F
1 3 1 3 1		31 I	_

	1. Committee Name	ends of GC Saarup				
	3. Report covering period	from January 1, 2012 thru_Feb	bruaru 22, 2012			
4	ine	CONTRIBUTIONS  NTITY OF CONTRIBUTOR AND DATE RECEIVED	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN TO		
	· · · · · · · · · · · · · · · · · · ·		PERIOD	DATE		
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 RÉCEIVED					
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 LA Detailed Summary Page, Lin	ST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to be 4(c), Column A]				

CANDIDATE LOANS				HEDULE <b>C</b>
1.	Committee Name Friends of GC Saarup		2. ID#	
3.	Report covering period from Janaury 1, 2012 thru Feb	ruary 22, 2012		·
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	· · · · · · · · · · · · · · · · · · ·		
	DESCRIPTION			
C.	NAME, ADDRESS, CITY, STATE, AND ZIP			
		ANA (A)		
	DESCRIPTION			
ď.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
е.	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 PAG [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), C			

#### OTHER LOANS

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]

SCHEDULE C1

1.	Committee Name Friends of GC Saarup	2. ID#		
3.	Report covering period from January 1, 2012 thru Fel	oruary 22, 201	2	
4	ALL OTHER LOANS  NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
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	·		

## **EXPENDITURES FOR OPERATING EXPENSES\***

SC	NI.B	_				r
<b>5</b> 0	, 17	1	IJ	u	1 1	L

	1. Committee Name Friends of GC Saarup	2. ID#	
	3. Report covering period from January 1, 2012 thru February 22,	2012	
4	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
C.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	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]		

<sup>\*</sup>Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

## **INDEPENDENT EXPENDITURES\***

SCHEDULE D-1

	Friends of GC Saarun	2. ID#			
	1. Committee Name Friends of GC Saarup				
	3. Report covering period from January 1, 2012 thru February 22, 2012				
4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE		
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	1917 122-722			
4a.	NAME, ADDRESS, CITY, STATE AND ZIP				
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION				
4b.	NAME, ADDRESS, CITY, STATE AND ZIP				
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION				
4c.	NAME, ADDRESS, CITY, STATE AND ZIP  PURPOSE AND DESCRIPTION OF PURCHASE Benefitted Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION				
5.	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [if last page of Schedule D-1, transfer total to Detailed Summary Page Line 1]	0, Column A]			
l certif	*SEE A.R.S. § 16-901(14).  certify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the equest or suggestion of any candidate or any campaign committee or agent of that candidate.				
Signati	ure of Treasurer				
	NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS SIX MONTHS	WITHIN THE LAST	AMOUNT		

## LOANS MADE BY REPORTING COMMITTEE

# SCHEDULE D-2

	1. Committee Name Friends of GC Saarup	2. ID#	
	3. Report covering period from January 1, 2012 thru February 22, 20	)12	
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	EOAN MADE	0. 1 20/11
<b>4</b> a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
ъ.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
¢.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	!	
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
ħ.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i.	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

	1. Committee Name Friends of GC Saarup		
	3. Report covering period from January 1, 2012 thru February 22,	2012	
	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	NEGENED	KELOND
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
C.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 fif last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column AJ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
*	Includes return of contributions made by reporting committee		

# REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

	1. Committee Name Friends of GC Saarup	2. ID#	
	3. Report covering period from Janaury 1, 2012 thru_February 22	2012	
	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	MADE	REPAYMENT
a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
١.	NAME, ADDRESS, CITY, STATE, AND ZIP		
<b>5.</b>	NAME, ADDRESS, CITY, STATE, AND ZIP		
	(A)		
i.	NAME, ADDRESS, CITY, STATE, AND ZIP		
			:
). ).	NAME, ADDRESS, CITY, STATE, AND ZIP		
	NAME, ADDRESS, CITY, STATE, AND ZIP		
i.	ENTER TOTAL, ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		

#### **REPAYMENT OF ALL OTHER LOANS**

NAME, ADDRESS, CITY, STATE, ZIP AND ID#

NAME, ADDRESS, CITY, STATE, ZIP AND ID#

SCHEDULE D-5

	Friends of GC Saarup	2. ID#	
	3. Report covering period from January 1, 2012 thru February 22,	2012	
	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT	AMOUNT OF THE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	MADE	REPAYMENT
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	Friends of GC Saarup		
1			
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
1			
1			
1			
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		

f.	NAME, ADDRESS, CITY, STATE, ZIP AND (D#		
		<u> </u>	
		<u> </u>	
		1	

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]

### TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

	1. Committee Name Friends of GC Saarup	100 P	
	3. Report covering period from January 1, 2012 thru February	22, 2012	
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#		
		:	
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	·		
	,		
G.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	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]		
5.	ENTER TOTAL ONLT IF LAST PAGE OF SUPERIOLE DO FRANSIEI IGIAI IO DELANEU SURINIARY PAGE, LIRE 14, COMMINAJ		

### **ANY OTHER DISBURSEMENT**

1. Committee Name Friends of GC Saarup

SCHEDULE D-7

		L	
	3. Report covering period from January 1, 2012 thru February	22, 2012	
	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	MADE	DISBORSEMENT
Ġ.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
,	DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION	i	
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		
€.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION		

### IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE **E** 

	1. Committee Name Friends of GC Saarup		2. ID#	
	3. Report covering period from	thru February	22, 2012	
4	IN-KIND CONTRIBUTION	NS and EXPENDITURES	DATE	FAIR MARKET VALUE
		(OR NAME, ADDRESS AND ID# OF THE OM RECEIVED OR TO WHOM GIVEN		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION CONTR		
	DESCRIPTION	<u> </u>		
	OCCUPATION	EMPLOYER		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION CONTR		
	DESCRIPTION	<del>*************************************</del>		
	OCCUPATION	EMPLOYER		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE Line 6, Column A]	GE OF SCHEDULE E [If last page of Schedule E, transfer total to l	Detailed Summary Page	
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAI Line 11, Column A)	GE OF SCHEDULE E [If last page of Schedule E, transfer total to I	Detailed Summary Page	
				Page 16 of 19

## **DIVIDENDS, INTEREST, AND OTHER RECEIPTS**

# SCHEDULE F-1

	1. Committee Name Friends of GC Saarup		
	3. Report covering period from January 1, 2012 thru February 22,	2012	
4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT	AMOUNT OF THE
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED	RECEIVED	RECEIPT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	-	
	DESCRIPTION OF RECEIPT		
b,	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
đ.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
₽.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	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 T Column A		

#### **OFFSETS TO CONTRIBUTIONS RECEIVED \***

# SCHEDULE F-2

2. ID#

	1. Committee Name Friends of GC Saarup	2. 15#	
	3. Report covering period from January 1, 2012 thru February 22,	2012	
4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND	AMOUNT OF THE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	MADE	REFUND
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
G.	NAME, ADDRESS, GITT, STATE, ZIP AND ID#		
			•
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
		!	
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF PETING		
	DESCRIPTION OF REFUND		
5.	ENTER YOTAL ONLY IF LAST PAGE OF SCHEDLILE F-2 lift last page of Schedule F-2 transfer total to Detailed Summary Page 1 inc.	ME) Column Al	

\* Includes return of contributions received by reporting committee

## DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

	1. Committee Name Friends of GC Saarup				2. 1D#
	3. Report covering period from January 1, 2012		thru_Febru	ary 22, 2012	
4	DEBTS AND OBLIGATIONS  NAME AND ADDRESS OF INDIVIDUAL (OR NAME,	OUTSTANDING BALANCE BEGINNING	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE
	ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	THIS PERIOD	mor Engo	i Littob	OF THIS PERIOD
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 CLO F-3 [Transfer total to Detail Summary Page Line 19, Col		ONLY IF LAST PAGE OF	SCHEDULE	