



CITIZENS CLEAN ELECTIONS COMMISSION
Independent Expenditure Report

Pursuant to A.R.S. §§16-941(D), -956, -958, and A.A.C. R2-20-109(F)

OFFICIAL USE ONLY

☐ Received _____

Name:

Save Our AZ Solar

| | | | | |
|---|--|--|---|----------------------|
| Address: 740 South Mill Ave. Suite 200 | | City: Tempe | State: AZ | Zip: 85281 |
| Telephone Number: 480-303-7175 | | Fax Number: | | |
| Name of Authorized Agent: Kris Mayes | | Telephone Number: 480-303-7175 | E-mail Address: info@yesonazsolar.com | |
| Authorized Agent Address (if different from above): | | City: | State: | Zip: |

| Date of Expenditure (i.e. 5/30/2016) | Amount of Expenditure (i.e. \$5,000.00) | Candidate Supported /Opposed |
|--------------------------------------|---|------------------------------|
| August 23, 2016 | \$32,441 | Robert Burns (supported) |
| | | |
| | | |

All persons, including corporations, limited liability companies, and labor organizations, are required to file independent expenditure reports under A.R.S. §§ 16-941(D); -958 & Ariz. Admin. Code R2-20-109(F). Please fill out, scan and return to the Arizona Citizens Clean Elections Commission, ccec@azcanelections.gov.

Forms received within 24 hours of the date of expenditure will be considered timely.

Failure to file the form and submit the information required subjects an entity that makes independent expenditures to penalties under the Clean Elections Act unless the entity receives an exemption from the Commission. Exemption forms are available at www.azcanelections.gov.

Please contact ccec@azcanelections.gov or 602-364-3477 with questions.

I, the undersigned, certify that the above statements are true and accurate to the best of my knowledge and belief:


Signature of Authorized Agent



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|---|--|-------------------------|---|
| Name: <u>Save Our AZ Solar</u> | | | |
| Address: <u>3030 N. 3rd St. Ste 200</u> | | City: <u>Phoenix</u> | State: <u>AZ</u> Zip: <u>85012</u> |
| Telephone Number: <u>480 303 7175</u> | | Fax Number: _____ | |
| Name of Authorized Agent: <u>Kris Marks</u> | | Telephone Number: _____ | E-mail Address: <u>kmarks@kismarkslaw.com</u> |
| Authorized Agent Address (if different from above): _____ | | City: _____ | State: _____ Zip: _____ |

| Date of Expenditure (i.e. 5/30/2016) | Amount of Expenditure (i.e. \$5,000.00) | Candidate Supported /Opposed |
|--------------------------------------|---|------------------------------|
| <u>8/26/16</u> | <u>\$14,937.96</u> | <u>Support Bob Burns</u> |
| <u>9/8/16</u> | <u>\$4,502.46</u> | <u>Support Bob Burns</u> |

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|---|--|----------------------|--|
| Name: <u>Save Our AC Solar</u> | | | |
| Address: <u>3030 N. 3rd St. Ste 200</u> | | City: <u>Phoenix</u> | State: <u>AZ</u> Zip: <u>85012</u> |
| Telephone Number: <u>480-303-7175</u> | | Fax Number: | |
| Name of Authorized Agent: <u>Kris Mayes</u> | | Telephone Number: | E-mail Address: <u>kmayes@krismayeslaw.com</u> |
| Authorized Agent Address (if different from above): | | City: | State: Zip: |

| Date of Expenditure (i.e. 5/30/2016) | Amount of Expenditure (i.e. \$5,000.00) | Candidate Supported /Opposed |
|--------------------------------------|---|------------------------------|
| <u>8/18/16</u> | <u>\$111,177.80</u> | <u>Support Bob BIRN</u> |
| | | |
| | | |

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| Name: <u>Save Our AC Solar</u> | | | |
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| Telephone Number: <u>480-303-7175</u> | | Fax Number: | |
| Name of Authorized Agent: <u>Kris Mayes</u> | | Telephone Number: | E-mail Address: <u>kmayes@krismayeslaw.com</u> |
| Authorized Agent Address (if different from above): | | City: | State: Zip: |

| Date of Expenditure (i.e. 5/30/2016) | Amount of Expenditure (i.e. \$5,000.00) | Candidate Supported /Opposed |
|--------------------------------------|---|------------------------------|
| <u>8/10/16</u> | <u>\$ 27,753.68</u> | <u>Support Bob Burns</u> |
| <u>8/19/16</u> | <u>\$ 96,934.56</u> | <u>Support Bob Burns</u> |

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| Telephone Number: <u>480-303-7175</u> | | Fax Number: _____ | | |
| Name of Authorized Agent: <u>Kris Mayes</u> | | E-mail Address: <u>kmayes@krismayeslaw.com</u> | | |
| Authorized Agent Address (if different from above): _____ | | City: _____ | State: _____ | Zip: _____ |

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|--------------------------------------|---|------------------------------|
| <u>8/2/16</u> | <u>\$181,766.00</u> | <u>Support Bob Burns</u> |
| | | |
| | | |

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