



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER

CAN 24-02

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Darryl Croft for Town Council

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought: [] County Office: [] Special District Office: [] City/Town Office: Town Council [] School Board District:

Cumulative Report:

[X] Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.

Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below):

REPORTING PERIOD (check one):

Table with 2 columns: REPORTING PERIOD and REPORT DUE. Rows include various election reports from 2023 to 2024. The 2024 Quarter 2 Report is checked with an X.

*Reporting deadline extended to next business day if deadline date is a holiday or Sunday. A.R.S. §§ 1-243(A)1-301 and 1-303.

FINANCIAL SUMMARY (required):

Table with 3 columns: Activity, Cash Activity This Reporting Period, and Election Cycle to Date. Rows show committee value, receipts, disbursements, and balance.

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity.

RECEIVED
JUL 09 2024
BY: E. Deskins



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER

CAN 24-02

Under A.R.S. § 16-926(B)(5), a campaign finance report must be certified by the committee treasurer under penalty of perjury that the contents of the report are true and correct.

By filing this report, you certify that, under penalty of perjury, you have examined the contents of this report, and the contents are true and correct.

Mary Hamm
Printed Name of Committee Treasurer

Mary E. Hamm 7-9-24
Signature of Committee Treasurer Date

RECEIVED
JUL 09 2024
E. Deskins



**STATE OF ARIZONA
 COMMITTEE CAMPAIGN
 FINANCE REPORT**

COMMITTEE ID NUMBER
CAN 24-02

MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(j)

Candidate Information				Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Darryl Croft	Date Contribution Received 5/20/24		\$215.18	\$215.18	\$215.18
	Street Address 1055 Parkside Village Drive,					
	City Chino Valley	State AZ.	ZIP 86323			
	Occupation Retired	Employer				
2	Name Daryl Croft	Date Contribution Received 6/20/24		\$215.18	\$430.36	\$430.36
	Street Address 1055 Parkside Village Dr.					
	City Chino Valley	State AZ.	ZIP 86323			
	Occupation Retired	Employer				
3	Name Darryl Croft	Date Contribution Received 6/5/24		\$32.99	\$463.35	\$463.35
	Street Address 1055 Parkside Village Dr.					
	City Chino Valley	State AZ>	ZIP 86323			
	Occupation Retired	Employer				
4	Name Darryl Croft	Date Contribution Received 6/11/24		\$26.41	\$488.76	\$488.76
	Street Address 1055 Parkside Village Dr.					
	City Chino Valley	State AZ.	ZIP 86323			
	Occupation Rertired	Employer				
5	Name	Date Contribution Received				
	Street Address					
	City	State	ZIP			
	Occupation	Employer				
Enter total only if last page of schedule (transfer the total received this period to "Summary of Receipts," line 1(j))						

Schedule A(1)(j), page 34 of 4



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER

CAN 24-02

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information				Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Tom's Print Shop	Disbursement Date 5/20/24		\$215.18	\$215.18	\$215.18
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)				
				<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit		
2	Name Tom's Print Shop	Disbursement Date 6/10/24		\$215.18	\$430.36	\$430.36
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)				
				<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
3	Name Providence Engraving, LLC	Disbursement Date 6/5/24		\$32.99	\$463.35	\$463.35
	Street Address 11 Orange St.					
	City TARPON	State fl	ZIP 34689			
	Type of Operating Expense Paid Business Cards	Non-Electoral Purpose? (PACs and Political Parties Only)				
				<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit		
4	Name EliteGear4U	Disbursement Date 6/11/24		\$26.41	\$488.76	\$488.76
	Street Address 3242 W. 13th Street N. Suite 500					
	City Wichita	State KS.	ZIP 67203			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)				
				<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit		
5	Name	Disbursement Date				
	Street Address					
	City	State	ZIP			
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)				
				<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
Enter total only if last page of schedule (transfer the total disbursed this period to "Summary of Disbursements," line 1)						

Schedule B(1), page 4 of 4