PINAL•COUNTY
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STATE OF ARIZONA
PINAL COUNTY
POLITICAL COMMITTEE
CAMPAIGN FINANCE REPORT

FOR OFFICE USE ONLY

PINAL COUNTY
ELECTIONS DEPARTMENT
2012 AUG 28 PM 3:13

3. ID#

1. Alica for Supervisor
Full Name of Committee

1995 W. American Ave
Address

Oracle 85623
City Zip Code Phone

2.
Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)

Primary Election: August 28, 2012
General Election: November 6, 2012

Email Address Fax #

4. **Reporting Period** (Please Check Appropriate Box)

			Due Between
a		**JANUARY 31ST REPORT -** For Period of November 23, 2010 through December 31, 2011	Jan. 1, 2012 and Jan. 31, 2012
b		**JUNE 30TH REPORT -** For Period of January 1, 2012 through May 31, 2012	June 1, 2012 and July 2, 2012
c	✓	**PRE-PRIMARY ELECTION REPORT -** For Period of June 1, 2012 through August 16, 2012	Aug. 17, 2012 and Aug. 24, 2012
d		**POST-PRIMARY ELECTION REPORT -** For Period of August 17, 2012 through September 17, 2012	Sept. 18, 2012 and Sept. 27, 2012
e		**PRE-GENERAL ELECTION REPORT -** For Period of September 18, 2012 through October 25, 2012	Oct. 26, 2012 and Nov. 2, 2012
f		**POST-GENERAL ELECTION REPORT -** For Period of October 26, 2012 through November 26, 2012	Nov. 27, 2012 and Dec. 6, 2012

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a	Total 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 (ending balance from the previous reporting period)	1332.42	
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)	0 1332.42	0
5a	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]		
5b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	1125.71	
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	206.29	206.29

INDEPENDENT EXPENDITURES* SCHEDULE D-1

2. ID#

1. Committee Name Alicia for Supervisor

3. Report covering period from June 1st thru August 11th

4. INDEPENDENT EXPENDITURES — IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
a Name Copper Area News Publishers; Street Address PO Box 579; City Kearny; State Arizona; Zip 85137; Purpose and Description of Purchase Campaign Advertising; Benefited ☐ Opposed ☐; Candidate Bristow; Office Sought Supervisor; Year of Election 2012	8/14/12	$735.00
b Name Florence Chamber of Commerce; Street Address 291 Bailey St; City Florence; State Arizona; Zip 85132; Purpose and Description of Purchase Advertising Event; Benefited ☐ Opposed ☐; Candidate Bristow; Office Sought Supervisor; Year of Election 2012	8/15/12	$100.00
c Name Sue Parra (Oracle Womens Network); Street Address 115 American Ave; City Oracle; State Arizona; Zip 85623; Purpose and Description of Purchase Forum Space Rental; Benefited ☐ Opposed ☐; Candidate Bristow; Office Sought Supervisor; Year of Election 2012	8/15/12	290.74
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]		1125.74

* 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
Lynda Brzeniak 100.00 Teacher	300.00
Dinesh Tiwari 100.00 Bus. owner	
Charla Wright 50.00 Teaher	

Schedule D-1 Page _____ of _____

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DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Alicia for Supervisor

2. ID #

3. Report covering period of

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)	Ø	2649.00
(b) Individuals - aggregate $25 or less (Total from Schedule A-1)	Ø	
(c) Political Committees (Total from Schedule B)	Ø	
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	Ø	
(e) Refund of contributions (Total from Schedule F-2)	Ø	
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	Ø	
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	Ø	
(b) All other loans (Total from Schedule C-1)	Ø	
(c) Total Loans [add 5(a) and 5(b)]	Ø	
6. In-kind contributions (Total from Schedule E)	Ø	
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	Ø	
8. Total Receipts [add 4(f), 5(c), 6, and 7]		
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	1185.74	
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)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
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]		
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]		
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	Ø	

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.

Type or Print Name of Treasurer: Rosario S Cruz

Signature of Treasurer or Candidate or Designating Individual

Date: 24 Aug 12

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LOANS MADE BY REPORTING COMMITTEE — SCHEDULE D-2

1. Committee Name: alicia for Supervisor

2. ID#:

3. Report covering period from: June 1st thru: Aug 16th

4.	LOANS MADE BY THE REPORTING COMMITTEE NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE				DATE LOAN MADE	AMOUNT OF LOAN
a	Committee Name: n/a			ID#		
	Address					
	City	State	Zip			
b	Committee Name			ID#		
	Address					
	City	State	Zip			
c	Committee Name			ID#		
	Address					
	City	State	Zip			
d	Committee Name			ID#		
	Address					
	City	State	Zip			
e	Committee Name			ID#		
	Address					
	City	State	Zip			
f	Committee Name			ID#		
	Address					
	City	State	Zip			
g	Committee Name			ID#		
	Address					
	City	State	Zip			
h	Committee Name			ID#		
	Address					
	City	State	Zip			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [If last page of Schedule D-2, transfer total to Detailed Summary Page, Line 12, Column A]					

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OFFSETS TO OPERATING EXPENSES* SCHEDULE D-3

1. Committee Name Alicia for Supervisor

2. ID#

3. Report covering period from June 1st thru August 11th

4.	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
a	Name n/a Street Address City State Zip Description of Refund		
b	Name Street Address City State Zip Description of Refund		
c	Name Street Address City State Zip Description of Refund		
d	Name Street Address City State Zip Description of Refund		
e	Name Street Address City State Zip Description of Refund		
f	Name Street Address City State 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

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IN-KIND CONTRIBUTIONS and EXPENDITURES SCHEDULE E

1. Committee Name: Alicia for Supervisor

2. ID#:

3. Report covering period from: June 1st thru Aug 11th

4.	IN-KIND CONTRIBUTIONS and EXPENDITURES NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN		DATE	FAIR MARKET VALUE
a	Name, Address, City, State, Zip, and ID#	CONTRIBUTION ☐ EXPENDITURE ☑		
	Description			
	Occupation	Employer		
b	Name, Address, City, State, Zip, and ID#	CONTRIBUTION ☐ EXPENDITURE ☐		
	Description			
	Occupation	Employer		
c	Name, Address, City, State, Zip, and ID#	CONTRIBUTION ☐ EXPENDITURE ☐		
	Description			
	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 OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A]			
6	ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]			

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