



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

PINAL COUNTY
ELECTIONS DEPARTMENT
FOR OFFICE USE ONLY
2012 NOV -2 PM 3:47

COMMITTEE TO ELECT STEVEN BOYD (TREASURER)

Full Name of Committee

702 E NANCY AV

Address

SANTAN VALLEY 85746 AZ 480-444-6990

City

Zip Code

Phone

3. ID#

C20120119

2. _____
Sponsoring Organization (if applicable)

Name of Candidate and Office Sought (if applicable)

STEVEN L BOYD

Email Address

STEVEN B 1947 @ Yahoo.com

Fax #

NONE

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

4. Reporting Period	(Please Check Appropriate Box)	Due Between
a	<input type="checkbox"/> JANUARY 31ST REPORT - For Period of November 23, 2010 through December 31, 2011	Jan. 1, 2012 and Jan. 31, 2012
b	<input type="checkbox"/> JUNE 30TH REPORT - For Period of January 1, 2012 through May 31, 2012	June 1, 2012 and July 2, 2012
c	<input type="checkbox"/> PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2012 through August 16, 2012	Aug. 17, 2012 and Aug. 24, 2012
d	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT - For Period of August 17, 2012 through September 17, 2012	Sept. 18, 2012 and Sept. 27, 2012
e	<input checked="" type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 18, 2012 through October 25, 2012	Oct. 26, 2012 and Nov. 2, 2012
f	<input type="checkbox"/> 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)		<u>218.14</u>
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	<u>218.14</u>	
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)	0.00	0.00
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]		
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)		<u>\$153.83</u>
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)		<u>\$64.31</u>

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name _____

2. ID #

3. Report covering period of _____

RECEIPTS

4. Contributions other than loans and in-kind:
 - (a) Individuals - more than \$25 (Total from Schedule A)
 - (b) Individuals - aggregate \$25 or less (Total from Schedule A-1)
 - (c) Political Committees (Total from Schedule B)
 - (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]
 - (e) Refund of contributions (Total from Schedule F-2)
 - (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]
5.
 - (a) Loans made or guaranteed by candidate (Total from Schedule C)
 - (b) All other loans (Total from Schedule C-1)
 - (c) Total Loans [add 5(a) and 5(b)]
6. In-kind contributions (Total from Schedule E) *P.C.R.C. for Signs*
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)
8. Total Receipts [add 4(f), 5(c), 6, and 7]

~~15383~~

Column A This Period	Column B Campaign to Date
—	—
—	—
1286 ⁰⁰	—
1286 ⁰⁰	—
0	—
1286 ⁰⁰	—
—	—
—	—
—	—
—	—
—	—
1286 ⁰⁰	—

DISBURSEMENTS

9. Expenditures for operating expenses (Total from Schedule D)
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) *Signs (P.C.R.C.)*
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)

113341	
113341	
15383	
—	
—	
—	
—	
—	
1286 ⁰⁰	
—	
—	
2573 ²⁴	2573 ²⁴
15383	

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.

John R. Peter
Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

Date *11/2/2012*

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name (~~P.O. # 800~~)

2. ID#

3. Report covering period from _____ thru _____

	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4.	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR			
a	Name <u>P.C.R.C. (Signs)</u> Street Address _____ City _____ State _____ Zip _____ Occupation _____ Employer _____	<u>Oct 6th</u>	<u>\$1286.00</u>	<u>\$1286.00</u>
b	Name _____ Street Address _____ City _____ State _____ Zip _____ Occupation _____ Employer _____			
c	Name _____ Street Address _____ City _____ State _____ Zip _____ Occupation _____ Employer _____			
d	Name _____ Street Address _____ City _____ State _____ Zip _____ Occupation _____ Employer _____			
e	Name _____ Street Address _____ City _____ State _____ Zip _____ Occupation _____ Employer _____			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]			

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

4. 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) Column A]		6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]

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

SCHEDULE B

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE				
IDENTITY OF CONTRIBUTOR AND DATE RECEIVED							
4.							
a	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">ID#</td> <td>NAME, ADDRESS, CITY, STATE AND ZIP</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID#	NAME, ADDRESS, CITY, STATE AND ZIP	DATE RECEIVED		<div style="font-size: 2em; font-family: cursive;">1286⁰⁰-</div>	
ID#	NAME, ADDRESS, CITY, STATE AND ZIP						
DATE RECEIVED							
b	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>ID#</td> <td>NAME, ADDRESS, CITY, STATE AND ZIP</td> </tr> <tr> <td>DATE RECEIVED</td> <td></td> </tr> </table>	ID#	NAME, ADDRESS, CITY, STATE AND ZIP	DATE RECEIVED		<div style="font-size: 2em; font-family: cursive;">0</div>	
ID#	NAME, ADDRESS, CITY, STATE AND ZIP						
DATE RECEIVED							
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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

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

LOANS MADE OR GUARANTEED BY CANDIDATE				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, FROM WHOM RECEIVED						
4.	NAME, ADDRESS, FROM WHOM RECEIVED					
4a	Last	First	Initial			
	Street Address					
	City	State	Zip			
	Description					
b	Last	First	Initial			
	Street Address					
	City	State	Zip			
	Description					
c	Last	First	Initial			
	Street Address					
	City	State	Zip			
	Description					
d	Last	First	Initial			
	Street Address					
	City	State	Zip			
	Description					
e	Last	First	Initial			
	Street Address					
	City	State	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]					

OTHER LOANS

SCHEDULE C-1

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

ALL OTHER LOANS		DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4.	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN			
a	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
b	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
c	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
d	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	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(b), Column A]

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name COMMITTEE TO ELECT STEVEN BOYD

2. ID#

3. Report covering period from _____ thru _____

	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4.	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
a	Name <u>Misc - Food</u> Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____	\$ 64.31	\$ 64.31
b	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
c	Name <u>MISC.</u> Street Address <u>GAS FOOD</u> City _____ State _____ Zip _____ Description of Items or Services Purchased _____	153.83	153.83
d	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
e	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
f	Name _____ Street Address _____ City _____ State _____ 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 Detailed Summary Page Line 9, Column A]		

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name COMMITTEE TO ELECT STEVEN BOYD

2. ID# _____

3. Report covering period from _____ thru _____

INDEPENDENT EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE	
4. IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED				
a Name <u>GAS, Food</u>		15383 9/28-10/22	15383	
Street Address _____				
City _____	State _____			Zip _____
Purpose and Description of Purchase _____				Benefited <input type="checkbox"/> Opposed <input type="checkbox"/>
Candidate _____	Office Sought _____			Year of Election _____
b Name _____				
Street Address _____				
City _____	State _____	Zip _____		
Purpose and Description of Purchase _____		Benefited <input type="checkbox"/> Opposed <input type="checkbox"/>		
Candidate _____	Office Sought _____	Year of Election _____		
c Name _____				
Street Address _____				
City _____	State _____	Zip _____		
Purpose and Description of Purchase _____		Benefited <input type="checkbox"/> Opposed <input type="checkbox"/>		
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]			15383	

* 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

1. Committee Name _____

2. ID#

3. Report covering period from _____ thru _____

4.	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF LOAN									
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE												
a	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">Committee Name</td> <td style="padding: 2px;">ID#</td> </tr> <tr> <td colspan="3" style="padding: 2px;">Address</td> </tr> <tr> <td style="padding: 2px;">City</td> <td style="padding: 2px;">State</td> <td style="padding: 2px;">Zip</td> </tr> </table>	Committee Name		ID#	Address			City	State	Zip		
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Address												
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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]											

OFFSETS TO OPERATING EXPENSES*

SCHEDULE D-3

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

4.	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			
a	Name <i>Victory Party</i> Street Address _____ City _____ State _____ Zip _____ Description of Refund _____	<i>6431</i>	<i>6431</i>
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]		<i>0</i>

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

4.	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
a	Name Street Address City State Zip		
b	Name Street Address City State Zip		
c	Name Street Address City State Zip		
d	Name Street Address City State Zip		
e	Name Street Address City State Zip		
f	Name Street Address City State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [if last page of Schedule D-4, transfer total to Detailed Summary Page, Line 13(a), Column A]		

REPAYMENT OF OTHER LOANS

SCHEDULE D-5

1. Committee Name _____

2. ID#

3. Report covering period from _____ thru _____

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		
a	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City State Zip</div>		
b	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City State Zip</div>		
c	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City State Zip</div>		
d	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City State Zip</div>		
e	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City State Zip</div>		
f	<div style="border-bottom: 1px solid black; padding: 2px;">Name and ID Number</div> <div style="border-bottom: 1px solid black; padding: 2px;">Street Address</div> <div style="border-bottom: 1px solid black; padding: 2px;">City State Zip</div>		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [If last page of scheduTransfer total to Detailed Summary Page, Line 13(b), Column A]		

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

2. ID#

1. Committee Name _____

3. Report covering period from _____ thru _____

4.	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER WAS MADE	AMOUNT OF THE TRANSFER
	NAME, ADDRESS AND ID# TO WHOM TRANSFER (DISBURSEMENT) WAS MADE		
a	Name and ID Number		
	Street Address		
	City State Zip		
b	Name and ID Number		
	Street Address		
	City State Zip		
c	Name and ID Number		
	Street Address		
	City State Zip		
d	Name and ID Number		
	Street Address		
	City State Zip		
e	Name and ID Number		
	Street Address		
	City State Zip		
f	Name and ID Number		
	Street Address		
	City State Zip		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		