



PINAL COUNTY  
wide open opportunity

STATE OF ARIZONA  
PINAL COUNTY  
POLITICAL COMMITTEE  
CAMPAIGN FINANCE REPORT

FOR OFFICE USE ONLY

RECEIVED

JUN 22 REC'D

PINAL COUNTY  
RECORDER'S OFFICE

1. FRIENDS of PETE RIOS  
Full Name of Committee  
9620 N. MALPAIS DR. P.O. BOX 451  
Address  
HAYDEN, AZ. 85135  
City Zip Code Phone  
840-520-5369

3. ID#

C 2008 0205

2. NA  
Sponsoring Organization (if applicable)  
PETE RIOS PINAL COUNTY SUPERVISOR DIST 1  
Name of Candidate and Office Sought (if applicable)  
riosped@aol.com  
Email Address Fax #

4. Reporting Period	(Please Check Appropriate Box)	Due Between
a	<input type="checkbox"/> JANUARY 31ST REPORT - For Period of November 25, 2014 through December 31, 2015	Jan. 1, 2016 and Feb. 1, 2016
b	<input checked="" type="checkbox"/> JUNE 30TH REPORT - For Period of January 1, 2016 through May 31, 2016	June 1, 2016 and June 30, 2016
c	<input type="checkbox"/> PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2016 through August 18, 2016	Aug. 19, 2016 and Aug. 26, 2016
d	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT - For Period of August 19, 2016 through September 19, 2016	Sept. 20, 2016 and Sept. 29, 2016
e	<input type="checkbox"/> PRE-GENERAL ELECTION REPORT - For Period of September 20, 2016 through October 27, 2016	Oct. 28, 2016 and Nov. 4, 2016
f	<input type="checkbox"/> POST-GENERAL ELECTION REPORT - For Period of October 28, 2016 through November 28, 2016	Nov. 29, 2016 and Dec. 8, 2016

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)		414
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	11 157	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	4345	16,514
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	0.00 15502	0.00 16514
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)	1265	2277
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	14237	14237

**DETAILED SUMMARY PAGE OF  
RECEIPTS AND DISBURSEMENTS**

1. Committee Name FRIENDS of PETE RIOS  
 3. Report covering period of 1-1-16 - 5-31-16

2. ID #  
C 2008 0205

**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)	4345	16100
(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)]	4345	16100
(e) Refund of contributions (Total from Schedule F-2)	-	-
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	4345	16100
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)	-	-
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	-	-
8. Total Receipts [add 4(f), 5(c), 6, and 7]	4345	16100

**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)
- 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)

1265	2277
-	-
-	-
-	-
-	-
-	-
-	-
-	-
-	-
1265	2277
-	-
1265	2277
-	-

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.

PETE RIOS

Type or Print Name of Treasurer

Pete Rios Pete Rios 6-18-2016

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS\*

SCHEDULE A

1. Committee Name Friends of Pete Riis

2. ID# C-2008 0205

3. Report covering period from JAN 1, 2016 thru MAY 31, 2016

4. CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR				
a	Name <u>MARITA M. GONZALES</u> Street Address <u>501 W. LOVE RD</u> City State Zip <u>STV. AZ. 85143</u> Occupation Employer <u>RETIRED</u>	3-17-16	50 <sup>00</sup>	50 <sup>00</sup>
b	Name <u>Francisco Aguirre</u> Street Address <u>2338 W. Ironwood Ridge Dr</u> City State Zip <u>TUC. az. 85745</u> Occupation Employer <u>SOCIAL WORKER COUNSELOR SELF</u>	3-17-16	100 <sup>00</sup>	100 <sup>00</sup>
c	Name <u>Jessie Ann Ruiz</u> Street Address <u>BOX 145</u> City State Zip <u>Hayden az. 85735</u> Occupation Employer <u>LPN. Home Health Care</u>	3-17-16	75 <sup>00</sup>	75 <sup>00</sup>
d	Name <u>GEO JOHNSON</u> Street Address <u>6600 N. Inversadon Rd</u> City State Zip <u>Paradise Valley, AZ. 85238</u> Occupation Employer <u>OWNER JOHNSON UTILITIES</u>	3-17-16	1000 <sup>00</sup>	1000 <sup>00</sup>
e	Name <u>JENNY AVERY</u> Street Address <u>P.O. BOX KXX</u> City State Zip <u>Wm Korman AZ 85129</u> Occupation Employer <u>RETIRED</u>	3-17-16	20 <sup>00</sup>	20 <sup>00</sup>
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (Transfer total to Detailed Summary Page, Line 4(a), Column A)			1245

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

SCHEDULE A

1. Committee Name Friends of Pete Rios

2. ID# C 2008 0205

3. Report covering period from 1-1-16 thru 5-31-16

4.	CONTRIBUTIONS			DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR					
a	Name	JOE D. RIOS		3-18-16	100 <sup>00</sup>	100 <sup>00</sup>
	Street Address	GREENWICH Rd				
	City	State	Zip			
	Occupation	Employer				
		KEARNY, AZ 85137				
		RETIRED				
b	Name	JORDAN ROSE		3-12-16	1000 <sup>00</sup>	1000 <sup>00</sup>
	Street Address	5630 E. Naam Valley Dr				
	City	State	Zip			
	Occupation	Employer				
		Paradise Valley AZ 85253				
		ATT/MANAGER ROSE LAW GRP.				
c	Name	VIOLA A. RUBAL		1-28-16	50 <sup>00</sup>	50 <sup>00</sup>
	Street Address	1120 W. LOMITAS				
	City	State	Zip			
	Occupation	Employer				
		TUC. AZ. 85704				
		RETIRED TEACHER				
d	Name	ROBERTO REVELES		1-26-16	500 <sup>00</sup>	500 <sup>00</sup>
	Street Address	10904 E. Sleepy Hollow Trl				
	City	State	Zip			
	Occupation	Employer				
		Gold Canyon AZ. 85115				
		RETIRED ✓				
e	Name	ED ROBSON		3-23-16	500 <sup>00</sup>	500 <sup>00</sup>
	Street Address	9532 E Riggs Rd.				
	City	State	Zip			
	Occupation	Employer				
		SUN LAKES, AZ. 85248				
		OWNER ROBSON COMMUNITIES				
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]					2150

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

SCHEDULE A

1. Committee Name FRIENDS of PETE RIOS

2. ID# C2008-0205

3. Report covering period from 1-1-16 thru 5-31-16

4.	CONTRIBUTIONS			DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR					
a	Name <b>JAMES PEDERSON</b> Street Address <b>2415 E. CAMELBACK #1070</b> City <b>PHX</b> State <b>AZ.</b> Zip <b>85016</b> Occupation <b>OWNER</b> Employer <b>PEDERSON GROUP</b>			4-8-16	250 <sup>00</sup>	250 <sup>00</sup>
b	Name <b>GAIL GORDON</b> Street Address <b>10313 N. 50<sup>th</sup> ST</b> City <b>PARADISE VALLEY AZ.</b> State <b>AZ.</b> Zip <b>85253</b> Occupation <b>CONSULTANT</b> Employer <b>SELF</b>			4-8-16	100 <sup>00</sup>	100 <sup>00</sup>
c	Name <b>RON OBER</b> Street Address <b>10313 N. 50<sup>th</sup> ST</b> City <b>PARADISE VALLEY AZ</b> State <b>AZ</b> Zip <b>85253</b> Occupation <b>CONSULTANT</b> Employer <b>SELF</b>			4-8-16	100 <sup>00</sup>	100 <sup>00</sup>
d	Name <b>ED ROBSON</b> Street Address <b>9532 E RISS RD</b> City <b>SUN LAKES AZ.</b> State <b>AZ.</b> Zip <b>85248</b> Occupation <b>OWNER</b> Employer <b>ROBSON COMMUNITIES</b>			2-26-16	500 <sup>00</sup>	500 <sup>00</sup>
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]					4345

\*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.

EXPENDITURES FOR OPERATING EXPENSES\*

SCHEDULE D

1. Committee Name FRIENDS of Pete Rios

2. ID# C20080205

3. Report covering period from 1-1-16 thru 5-31-16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4. NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name <u>OFFICE DEPOT</u> Street Address <u>2950 W. APACHE TRL</u> City <u>AJ</u> State <u>AZ</u> Zip <u>85132</u> Description of Items or Services Purchased <u>INK CARTRIDGES</u>	4-11-16	64.34
b	Name <u>ORACLE COMMUNITY CEN.</u> Street Address <u>AMERICAN AVE</u> City <u>ORACLE</u> State <u>AZ.</u> Zip <u></u> Description of Items or Services Purchased <u>ENTRY OAK FESTIVAL PARADE</u>	4-12-16	25. <sup>00</sup>
c	Name <u>USPS</u> Street Address <u>301 GRIFFIN AV.</u> City <u>WINKELMAN</u> State <u>AZ</u> Zip <u>85192</u> Description of Items or Services Purchased <u>POSTAGE STAMPS</u>	4-19-16	94. <sup>00</sup>
d	Name <u>SAFEWAY</u> Street Address <u>3185 W. Apache TRL</u> City <u>AJ</u> State <u>AZ</u> Zip <u>85220</u> Description of Items or Services Purchased <u>3 GIFT CARDS AA. DAY</u>	4-26-16	57.90
e	Name <u>Home Depot</u> Street Address <u>1545 So Ciaman Rd.</u> City <u>Mesa</u> State <u>az.</u> Zip <u>85208</u> Description of Items or Services Purchased <u>ZIP TIES, FURNING STRIP, WIRE</u>	6-1-16	64.58
f	Name <u>WALMART</u> Street Address <u>1695 N. AZ. BLVD.</u> City <u>Coolidge</u> State <u>AZ</u> Zip <u>85128</u> Description of Items or Services Purchased <u>SUNSHIELD CLIP ON</u>	6-6-16	10.97
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]			

EXPENDITURES FOR OPERATING EXPENSES\*

SCHEDULE D

1. Committee Name Friends of Pete Rios

2. ID# C2008 0205

3. Report covering period from 1-1-16 thru 5-31-16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name <u>Walmart</u> Street Address <u>2555 N Apache Trl.</u> City <u>AJ</u> State <u>AZ</u> Zip <u>85220</u> Description of Items or Services Purchased <u>PARADE CANDY - OAKS FESTIVAL</u>	<u>4-6-16</u>	<u>10.24</u>
b	Name <u>ANTON SPORT</u> Street Address <u>905 N. Scotts. Rd.</u> City <u>Scotts.</u> State <u>AZ.</u> Zip <u>85281</u> Description of Items or Services Purchased <u>CAMPAIGN POLO SHIRTS (3)</u>	<u>3-17-16</u>	<u>107.47</u>
c	Name <u>Office Depot</u> Street Address <u>2950 W. Apache Trl</u> City <u>AJ</u> State <u>AZ</u> Zip <u>85132</u> Description of Items or Services Purchased <u>COPIES NOMINATING PETITIONS (Pic)</u>	<u>2-16-16</u>	<u>33.95</u>
d	Name <u>JOE RIOS</u> Street Address <u>GREENWICH RD.</u> City <u>LATEX RETURNED KEARNY</u> State <u>AZ</u> Zip Description of Items or Services Purchased <u>FOR PETITION SIGS SUPERIOR/Kearny</u>	<u>3-10-16</u>	<u>100.00</u>
e	Name <u>WALMART</u> Street Address <u>2555 W. Apache Trl.</u> City <u>AJ</u> State <u>AZ</u> Zip <u>85220</u> Description of Items or Services Purchased <u>CANDY PARADE COTTON FEST. Coolidge</u>	<u>3-4-16</u>	<u>60.14</u>
f	Name <u>CHASE BANK SERVICE FEE</u> Street Address <u>APACHE TRL</u> City <u>AJ</u> State <u>AZ</u> Zip <u>85120</u> Description of Items or Services Purchased <u>17 DOLLARS PER MONTH PAST... 15 MONTHS</u>	<u>5-31-16</u>	<u>255<sup>00</sup></u>
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]			

EXPENDITURES FOR OPERATING EXPENSES\*

SCHEDULE D

1. Committee Name Friends of Pete Rios

2. ID# C2008 0205

3. Report covering period from 1-1-16 thru 5-31-16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4. NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a	Name <u>TAGS RESTAURANT</u> Street Address <u>AZ. AVE</u> City <u>COOLIDGE</u> State <u>AZ</u> Zip _____ Description of Items or Services Purchased <u>BREAKFAST COTTON DAYS PARADE</u>	<u>3-5-16</u>	<u>20<sup>00</sup></u>
b	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
c	Name _____ Street Address _____ City _____ State _____ Zip _____ Description of Items or Services Purchased _____		
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]			<u>1265</u>