



PINAL COUNTY  
wide open opportunity

STATE OF ARIZONA  
PINAL COUNTY  
POLITICAL COMMITTEE  
CAMPAIGN FINANCE REPORT

FOR OFFICE USE ONLY

RECEIVED

AUG 29 REC'D

PINAL COUNTY  
RECORDER'S OFFICE

1. FRIENDS of PETE Rios  
Full Name of Committee  
9620 N. MALPAIS DUDLEYVILLE HAYDEN AZ. 85135  
Address  
HAYDEN AZ. 85135 520 840-539  
City Zip Code Phone

3. ID#

C 2008 0205

2. NA  
Sponsoring Organization (if applicable)  
PETE RIOS PINAL CNTY SUPERVISOR D-1  
Name of Candidate and Office Sought (if applicable)  
hioded@aol.com  
Email Address Fax #

| 4. Reporting Period (Please Check Appropriate Box) |   | Due Between                       |
|--|---|-----------------------------------|
| a  | <input type="checkbox"/> JANUARY 31ST REPORT -<br>For Period of November 25, 2014 through December 31, 2015             | Jan. 1, 2016 and Feb. 1, 2016     |
| b  | <input type="checkbox"/> JUNE 30TH REPORT -<br>For Period of January 1, 2016 through May 31, 2016                       | June 1, 2016 and June 30, 2016    |
| c  | <input checked="" type="checkbox"/> PRE-PRIMARY ELECTION REPORT -<br>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 -<br>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 -<br>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 -<br>For Period of October 28, 2016 through November 28, 2016     | Nov. 29, 2016 and Dec. 8, 2016    |

| 5. | Summary  | Column A<br>Total This Reporting Period | Column B<br>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)   | 14,237                                  |   |
| 5c | Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)   | 2450                                    | 18550                                     |
| 5d | Subtotal (add lines b and c for column A and add lines a and c for column B)   | 0.00 16687                              | 0.00 18964                                |
| 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)   | 1811                                    | 4088                                      |
| 7. | Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)  | 14876                                   | 14876                                     |

**DETAILED SUMMARY PAGE OF  
RECEIPTS AND DISBURSEMENTS**

1. Committee Name FRIENDS of PETE RIOS  
 3. Report covering period of 6-1-16 — 8-18-16

2. ID #  
C26080205

**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)
- 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)
- 8. Total Receipts [add 4(f), 5(c), 6, and 7]

| Column A<br>This Period | Column B<br>Campaign to Date |
|-------------------------|------------------------------|
| 2450                    | 18550                        |
| -                       | -                            |
| -                       | -                            |
| 2450                    | 18550                        |
| -                       | -                            |
| 2450                    | 18550                        |
| -                       | -                            |
| -                       | -                            |
| -                       | -                            |
| -                       | -                            |
| -                       | -                            |
| 2450                    | 18550                        |

**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)

|      |      |
|------|------|
| 1811 | 4088 |
| -    |      |
| -    |      |
| -    |      |
| -    |      |
| -    |      |
| -    |      |
| -    |      |
| -    |      |
| -    |      |
| 1811 | 4088 |
| -    | -    |
| 1811 | 4088 |
| -    |      |

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

8-27-16

Signature of Treasurer or Candidate or Designating Individual

Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS\*

SCHEDULE A

1. Committee Name Friends of Pete Rios

2. ID# C20080205

3. Report covering period from 6-1-16 thru 8-18-16

| 4. | CONTRIBUTIONS   |  |     | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|----|---|--|-----|---------------|-----------------------------|--|
|    | NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR   |  |     |               |                             |  |
| a  | Name  | JOE RIOS JR.                               |     | 8-6-16        | 200 <sup>00</sup>           | 200 <sup>00</sup>                      |
|    | Street Address  | 7152 W. ROANOKE AVE                        |     |               |                             |  |
|    | City  | State                                      | Zip |               |                             |  |
|    | Occupation  | Employer                                   |     |               |                             |  |
|    |   | PHX. AZ. 85035                             |     |               |                             |  |
|    |   | AUTO SUPPLIES-TOOLS SELF EMPLOYED          |     |               |                             |  |
| b  | Name  | JOHN TAMARON                               |     | 8-13-16       | 100 <sup>00</sup>           | 100 <sup>00</sup>                      |
|    | Street Address  | W.S. 60                                    |     |               |                             |  |
|    | City  | State                                      | Zip |               |                             |  |
|    | Occupation  | Employer                                   |     |               |                             |  |
|    |   | SUPERIOR AZ                                |     |               |                             |  |
|    |   | BUSINESS OWNER SELF-EMPLOY                 |     |               |                             |  |
| c  | Name  | C. BANNON CANADA PARTNERS                  |     | 6-12-16       | 600 <sup>00</sup>           | 600 <sup>00</sup>                      |
|    | Street Address  | 201 MAIN ST. SUITE 2700                    |     |               |                             |  |
|    | City  | State                                      | Zip |               |                             |  |
|    | Occupation  | Employer                                   |     |               |                             |  |
|    |   | FORT WORTH TX. 76102                       |     |               |                             |  |
|    |   | ADMIN CANADA PARTNERS                      |     |               |                             |  |
| d  | Name  | C.R. EDEN                                  |     | 6-27-16       | 100 <sup>00</sup>           | 100 <sup>00</sup>                      |
|    | Street Address  | 81 W. VIRGINIA AVE                         |     |               |                             |  |
|    | City  | State                                      | Zip |               |                             |  |
|    | Occupation  | Employer                                   |     |               |                             |  |
|    |   | PHX. AZ. 85003                             |     |               |                             |  |
|    |   | RETIRED                                    |     |               |                             |  |
| e  | Name  | VICTORIA PEACEY                            |     | 7-7-16        | 150 <sup>00</sup>           | 150 <sup>00</sup>                      |
|    | Street Address  | 9007 E CANYON CREEK DR.                    |     |               |                             |  |
|    | City  | State                                      | Zip |               |                             |  |
|    | Occupation  | Employer                                   |     |               |                             |  |
|    |   | Gold CANYON AZ. 85118                      |     |               |                             |  |
|    |   | COMMUNITY ADMINISTRATOR RESOLUTION CARRIER |     |               |                             |  |
| 5  | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A<br>[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 more than \$25 - from INDIVIDUALS\*

SCHEDULE A

1. Committee Name Friends of Pete Rios 2. ID# 2008 0205  
 3. Report covering period from 6-1-16 thru 8-18-16

| 4. | CONTRIBUTIONS   |                          |     | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|----|---|--------------------------|-----|---------------|-----------------------------|--|
|    | NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR   |                          |     |               |                             |  |
| a  | Name  | SEAN DUGAN               |     | 7-12-16       | 300 <sup>00</sup>           | 300 <sup>00</sup>                      |
|    | Street Address  | 2734 E KORTSEN RD        |     |               |                             |  |
|    | City  | State                    | Zip |               |                             |  |
|    | Occupation  | Employer                 |     |               |                             |  |
|    |   | FARMER - SELF EMPLOY     |     |               |                             |  |
| b  | Name  | E.J. ROBSON              |     | 6-21-16       | 1000 <sup>00</sup>          | 1000 <sup>00</sup>                     |
|    | Street Address  | 9532 E. RIGGS RD         |     |               |                             |  |
|    | City  | State                    | Zip |               |                             |  |
|    | Occupation  | Employer                 |     |               |                             |  |
|    |   | OWNER ROBSON COMMUNITIES |     |               |                             |  |
| 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<br>[Transfer total to Detailed Summary Page, Line 4(a), Column A] |                          |     |               | 2450 <sup>00</sup>          | 2450 <sup>00</sup>                     |

\*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# C2008 0205

3. Report covering period from 6-1-16 thru 8-18-16

| EXPENDITURES  |   | DATE EXPENDITURE MADE           | AMOUNT OF THE EXPENDITURE |
|---|---|---------------------------------|---------------------------|
| NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE  |   |                                 |                           |
| a   | Name<br><u>CASA GRANDE VALLEY PAPERS INC.</u><br>Street Address<br><u>200 W. 2ND ST</u><br>City<br><u>CASA GRANDE</u> State <u>AZ</u> Zip <u>85122</u><br>Description of Items or Services Purchased<br><u>POLITICAL NEWSPAPER ADS</u>                      | <u>8-12-16</u>                  | <u>291.98</u>             |
| b   | Name<br><u>ANGIE HUERTA</u><br>Street Address<br><u>BOX</u><br>City<br><u>MAMMOTH</u> State <u>AZ</u> Zip <u>85618</u><br>Description of Items or Services Purchased<br><u>EXTRA NOM. PETITION SIGS.</u>  | <u>6-17-16</u>                  | <u>40.<sup>00</sup></u>   |
| c   | Name<br><u>THOMPSON, MONTGOMERY &amp; DE ROSE</u><br>Street Address<br><u>102 N. BROAD ST</u><br>City<br><u>GLOBE</u> State <u>AZ</u> Zip <u>85502</u><br>Description of Items or Services Purchased<br><u>DEPOSIT LEGAL FEES: JONES CHALLENGE PETITION</u> | <u>6-4-16</u>                   | <u>1000.<sup>00</sup></u> |
| d   | Name<br><u>PINAL DEM. PARTY</u><br>Street Address<br><u>THE PROPERTY</u><br>City<br><u>CASA GRANDE</u> State <u>AZ</u> Zip <u>85122</u><br>Description of Items or Services Purchased<br><u>DONATION DEM. ANNUAL DINNER</u>                                 | <u>7-16-16</u>                  | <u>50.<sup>00</sup></u>   |
| e   | Name<br><u>LION'S CLUB</u><br>Street Address<br><u>MAIN ST</u><br>City<br><u>MAMMOTH</u> State <u>AZ</u> Zip <u>85618</u><br>Description of Items or Services Purchased<br><u>DONATION MEAT RAFFLE</u>  | <u>8-13-16</u>                  | <u>10.<sup>00</sup></u>   |
| f   | Name<br><u>VARIOUS GAS STATIONS SD-1</u><br>Street Address<br><u>COOLIDGE, MAMM., SUPERIOR, FLORENCE ETC.</u><br>City<br><u>S.D. 1</u> State <u>AZ</u> Zip <u>85000</u><br>Description of Items or Services Purchased<br><u>CAMPAIGN SIGNS, MTGS.</u>       | <u>6-1-16</u><br><u>8-18-16</u> | <u>246.<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 0208

3. Report covering period from 6-1-16 thru 8-18-16

| EXPENDITURES  |  |                                      |                    | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|---|--|--------------------------------------|--------------------|-----------------------|---------------------------|
| NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE  |  |                                      |                    |                       |                           |
| a   | Name                                       | FAST FOOD & RESTAURANTS SD-1         |                    | 6-1-16                | 75 <sup>00</sup>          |
|   | Street Address                             | COOLIDGE, SUPERIOR, FLORENCE MAIN EX |                    | -                     |                           |
|   | City                                       | SD.-1                                | State AZ Zip 85000 | 8-18-16               |                           |
|   | Description of Items or Services Purchased | FOOD-SODA-H <sub>2</sub> O           |                    |                       |                           |
| b   | Name                                       | TRACTOR SUPPLY CO.                   |                    | 7-29-16               | 21. <sup>25</sup>         |
|   | Street Address                             | 10545 E. MAIN ST                     |                    |                       |                           |
|   | City                                       | MESA                                 | State AZ Zip 85120 |                       |                           |
|   | Description of Items or Services Purchased | WORK GLOVES-POUNDING T-POSTS         |                    |                       |                           |
| c   | Name                                       | WALMART                              |                    | 7-14-16               | 75. <sup>57</sup>         |
|   | Street Address                             | 1606 So. SIGNAL Butte                |                    |                       |                           |
|   | City                                       | MESA                                 | State AZ Zip 85209 |                       |                           |
|   | Description of Items or Services Purchased |                                      |                    |                       |                           |
| d   | Name                                       | USPS                                 |                    | 6-20-16               | 1. <sup>15</sup>          |
|   | Street Address                             | 151 W. SUPERSTITION BLVD             |                    |                       |                           |
|   | City                                       | Av                                   | State AZ Zip 85119 |                       |                           |
|   | Description of Items or Services Purchased | POSTAGE CENT. mail                   |                    |                       |                           |
| 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] |  |                                      |                    |                       | 1,811. <sup>00</sup>      |