

PINAL+COUNTY
wide open opportunity

# STATE OF ARIZONA PINAL COUNTY POLITICAL COMMITTEE CAMPAIGN FINANCE REPORT

FOR OFFICE USE ONLY

## RECEIVED

FEB 02 2017

PINAL COUNTY SCHOOL OFFICE

3. ID#

20100001CSS

|  | dress Jarcopa 85138 (509) 5 Zip Code  posoring Organization (if applicable)  ne of Candidate and Office Sought (if applicable) |                |
|--|--|----------------|
| Full Name of Committee 40885 W Brandt Dr   | · · · · · · · · · · · · · · · · · · ·  |                |
| Address  |  |                |
| The second secon | 85138  | (509) 520-1141 |
| City   | Zip Code   | Phone          |
|  |  |                |
| Sponsoring Organization (if app  |  |                |
| Name of Candidate and Office S   | Sought (if applicable)   |                |
| Email Address  |  | Fax#           |

| Reporting Period (Please Check Appropriate Box)           | Duo Patura                        |
|---|-----------------------------------|
| JANUARY 31ST REPORT -                                     | Due Between                       |
| For Period of November 2015 through December 31, 2018     | Jan. 1, 2018 and Jan. 31, 2018    |
| JUNE 30TH REPORT -  |                                   |
| For Period of January 1, 2016 through May 31, 2016        | June 1, 2016 and June 30, 2016    |
| PRE-PRIMARY ELECTION REPORT -                             |                                   |
| For Period of June 1, 2016 through August 18, 2016        | Aug. 19, 2016 and Aug. 26, 2016   |
| POST-PRIMARY ELECTION REPORT -                            |                                   |
| For Period of August 19, 2016 through September 19, 2016  | Sept. 20, 2016 and Sept. 29, 2016 |
| PRE-GENERAL ELECTION REPORT -                             |                                   |
| For Period of September 20, 2016 through October 27, 2016 | Oct. 28, 2016 and Nov. 4, 2016    |
| 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                             |
|------|--|--------------------------------------|--------------------------------------|
| 5a   | Total Surplus from Previous Campaign (or at time Statement of<br>Organization was filed for the new committee)   | ioral Tills (Asporting Period        | Election Period Total to Date 450.03 |
| 5b   | Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)   | 143.35                               |                                      |
| 5c   | Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)   | 16.65                                | 14,612.97                            |
| 5d   | Subtotal (add lines b and c for column A and add lines a and c for column B)   | 160.00                               | 15,063.00                            |
|      | Total Debts and Obligations from Previous Campalgn 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)   | 160.00                               | 15,063.00                            |
| 7.   | Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)  | 0.00                                 | 0.00                                 |

## DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

| P | Δ | G | F | 1 |
|---|---|---|---|---|
|   |   |   |   |   |

1. Committee Name Vote Yes, Maricopa

2. ID # 20100001CSS

|     | RECEIPTS   | Column A<br>This Period | Column B Campaign to Date |
|-----|--|-------------------------|---------------------------|
| 4.  | Contributions other than loans and in-kind:                                |                         |                           |
| (a) | Individuals - more than \$25 (Total from Schedule A)                       |                         | \$12,629.00               |
| (b) | Individuals - aggregate \$25 or less (Total from Schedule A-1)             | \$16.65                 | \$1,683.97                |
| (c) | Political Committees (Total from Schedule B)                               |                         |                           |
| (d) | Subtotal Contributions [add 4(a), 4(b), and 4(c)]                          | \$0.00                  | \$14,312.97               |
| (e) | Refund of contributions (Total from Schedule F-2)                          |                         |                           |
| (f) | Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)] | \$16.65                 | \$14,312.97               |
| 5.  | (a) Loans made or guaranteed by candidate (Total from Schedule C)          |                         |                           |
|     | (b) All other loans (Total from Schedule C-1)                              |                         | \$300.00                  |
|     | (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]                                  | \$16.65                 | \$14,612.97               |

#### **DISBURSEMENTS**

| 9. | Expenditures for operating expenses | (Total from Schedule D | ١ |
|----|-------------------------------------|------------------------|---|
|----|-------------------------------------|------------------------|---|

- 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)

| \$14,763.00 |
|-------------|
|             |
|             |
|             |
|             |
| \$300.00    |
|             |
|             |
|             |
| \$15,063.00 |
|             |
| \$15,063.00 |
|             |
|             |

| 20. I certify, under penalty of perjury, that I have examined the contents of this camp | paign finance report and to the best of my knowledge and belief it is true |
|---|--|
| and complete.  Aron Rausch  | ,                                    |
|   |  |
| Type or Print Name of Treasurer   | <del>-</del>   |
|   | 1/31/2017  |
| Signature of Treasurer or Candidate or Designating Individual                           | Date   |
|   |  |

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

SCHEDULE A

|    | 1. Committee Name      | Vole  | Yes, N                                 |                                    | •    |                  | 2. ID#<br>20100                   | 00 1655   |
|----|------------------------|---|--|------------------------------------|------|------------------|-----------------------------------|---|
|    | 3. Report covering pe  | eriod from                                    | 0 29.                                  | 2016                               | thru | Dec 3            | 1,2016                            |   |
| 4. |                        | CONTRIB<br>ESS, OCCUPATION AN                 | <del>-</del>                           | F CONTRIBUTO                       | OR   | DATE<br>RECEIVED | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE<br>TOTAL THIS<br>CAMPAIGN TO<br>DATE |
| a  | Name<br>Street Address |   | W                                      |                                    |      |                  |                                   |   |
|    | City                   | State   | ·                                      | Zip                                |      | į                |                                   |   |
|    | Occupation             | Employer                                      |  | <del></del>                        |      |                  |                                   |   |
| b  | Name                   |   |  |                                    |      |                  |                                   |   |
|    | Street Address         |   |  | ·**                                |      |                  |                                   |   |
|    | City                   | State   |  | Zip                                |      |                  |                                   |   |
| c  | Occupation             | Employer                                      |  |                                    |      |                  |                                   |   |
| C  | Name<br>Street Address | ······································        |  |                                    |      |                  |                                   |   |
|    | City                   | Chil  | <del></del>                            |                                    |      |                  |                                   |   |
|    |                        | State   |  | Zip                                |      |                  |                                   |   |
|    | Occupation             | Employer                                      |  |                                    |      |                  |                                   |   |
| ď  | Name                   |   |  |                                    |      |                  |                                   | - <del> </del>                                  |
|    | Street Address         |   |  |                                    |      |                  |                                   |   |
|    | City                   | State   |  | Zip                                |      |                  |                                   |   |
|    | Occupation             | Employer                                      |  |                                    |      |                  |                                   |   |
| е  | Name                   |   |  |                                    |      |                  |                                   |   |
|    | Street Address         |   |  |                                    |      |                  | 1                                 |   |
|    | City                   | State   |  | Zip                                |      |                  |                                   |   |
|    | Occupation             | Employer                                      |  |                                    |      |                  |                                   |   |
| 5  |                        | ENTER TOTAL ONL<br>[Transfer total to Detaile | Y IF LAST PAGE OI<br>d Summary Page, L | F SCHEDULE A<br>ine 4(a), Column A | \]   |                  | f                                 | 12,629.00                                       |

\*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.

Schedule A Page \_\_\_\_\_ of \_\_\_\_

| CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*              | SCHEDULE A-1         |
|---|----------------------|
| 1. Committee Name Voice Yes, Maricopa                         | 2.1D#<br>20100001C55 |
| 3. Report covering period from Nov 29, 2016 thru Dec 31, 2016 |                      |
| 4. Aggregate Total of Contributions as for                    | _                    |

#### 4. Aggregate Total of Contributions of \$25 or less

| DESCRIPTIO  | N         | AMOUNT RECEIVED THIS PERIOD   | CUMULATIVE TOTAL THIS<br>CAMPAIGN TO DATE |
|---|-----------|---|---|
| Misc  |           | \$ 16.65  | \$1,683,47                                |
|   |           |   |   |
|   |           |   |   |
|   |           |   |   |
|   |           |   |   |
|   |           |   |   |
| 5. TOTAL THIS PERIOD [Transfer total to<br>Detailed Summary Page, Line 4(b) Column A] | 11. 65 to | 6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer otal to Detailed Summary Page, line 4(b), Column B] | \$ 1,683.47                               |

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.

## OTHER LOANS

SCHEDULE C-1

| OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSES OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR  A NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  Description  D NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  Description  C NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  Description  C NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  Description  C NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  Description  C NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address  City, State, Zip  NAME OF PERSON OR GUARANTOR OF LOAN  Street Address  City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description  | OTHER LOANS  |                     | S0             | CHEDULE C                                       |
|--|--|---------------------|----------------|---|
| 3. Report covering period from ALL OTHER LOANS  ALL OTHER LOANS  WAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, IDFAND ADDRESS) OF THE POLITICAL COMMITTEE OF LOAN, AND ADDRESS OR GUARANTOR OF THE POLITICAL COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  RAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  RAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  RAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address City, State, Zip Description  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address City, State, Zip Description  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE SCHEDULE CALL MAKEN  ENTER TOTAL ONLY IF LAST PAGE DE | 1. Committee Name Vote Yes Marico  | OG                  | 2. ID#<br>2010 | 0000168   |
| NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  Street Address City, State, Zip Description  ENTER TOTAL DAILY IF LAST PAGE OF SCHEDNIS C. A. IN IDEA.   | 3. Report covering period from Now 2 G 20(6 thru   | Dec 30              | ~~             |   |
| STREET ADDRESS OR GUARANTOR OF LOAN  D NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  STREET ADDRESS OR GUARANTOR OF LOAN  STREET ADRESS OR GUARANTOR OF LOAN  STREET ADDRESS OR GUARANTOR OF LOAN | NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR  4. GUARANTOR OF LOAN |                     |                | CUMULATIVE<br>TOTAL THIS<br>CAMPAIGN<br>TO DATE |
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| Street Address  City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description  I 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  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE CALUS Instrument Colors.  |  |                     |                |   |
| City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description  I 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  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE CALIFFORM AND ID#   | c NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  |                     |                |   |
| NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description  I 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  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE CALIFFRATOR OF LOAN   | Street Address   |                     |                |   |
| Street Address  City, State, Zip  Description  I 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   | City, State, Zip   |                     |                |   |
| City, State, Zip  Description  I 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  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE CALIFFORM AND ID#  | NAME OF ENDORSER OR GUARANTOR OF LOAN  |                     |                |   |
| Description  I 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  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C. 1 (if lock page of Schedule O | Street Address   |                     |                |   |
| 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  | City, State, Zip   |                     |                |   |
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| Street Address  City, State, Zip  NAME OF ENDORSER OR GUARANTOR OF LOAN  Street Address  City, State, Zip  Description  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE CALIFICATION AND ADDRESS OF SCHEDU | NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#  |                     |                |   |
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| Street Address  City, State, Zip  Description  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE CALIFFORM OF Schedule Control of Sche |  |                     |                |   |
| Description  Description  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE CALIFFORM OF Schedule Control of Sched | INAMIE OF ENDORSER OR GUARANTOR OF LOAN  |                     |                |   |
| Description  ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C 1 If lost page of Schedul. C 1.   | Street Address   |                     |                |   |
| ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C 1 IM lost page of Schedul. C 1.  | City, State, Zip   |                     |                |   |
| ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total  | Description  |                     |                |   |
| to the first of th | 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule (   | C-1, transfer total |                |   |

#### **EXPENDITURES FOR OPERATING EXPENSES\*** SCHEDULE D 2. ID# 1. Committee Name 20100001655 Dec 31 3. Report covering period from DATE **EXPENDITURES** AMOUNT **EXPENDITURE** OF THE NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE MADE **EXPENDITURE** Name Street Address Flintlock CI 160,00 Description of Items or Services, Purchased Name Street Address City State Description of Items or Services Purchased Name Street Address City State Zip Description of Items or Services Purchased Name Street Address City State Zip Description of Items or Services Purchased Name Street Address City State Zip Description of Items or Services Purchased Name Street Address City State Zip Description of Items or Services Purchased

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed

Summary Page Line 9, Column Al

Schedule D Page revised 12/2015

6160.00

#### REPAYMENT OF OTHER LOANS

**SCHEDULE D-5** 

|    | 1. Committee Name Vote Yes, Maricopa  3. Report covering period from Nov 29, 2016 thru Dec.               | 2. ID#<br>20\ (             | ocolcss                    |
|----|---|-----------------------------|----------------------------|
|    | 3. Report covering period from Nov 29, 2016 thru Nec  | 31,2016                     |                            |
| 4. | NAME AND ADDRESS OF INDIVIDUAL (OR NAME ID# AND ADDRESS OF THE DOLUTION                                   | DATE<br>REPAYMENT           | AMOUNT OF THE<br>REPAYMENT |
| а  | Name and ID Number  | AL MADE                     | NCFATMENT                  |
|    | Street Address  City State Zip  |                             |                            |
| b  | Name and ID Number  |                             |                            |
|    | Street Address  |                             |                            |
| C  | City State Zip  Name and ID Number  |                             |                            |
|    | Street Address  |                             |                            |
|    | City State Zip  |                             |                            |
| d  | Name and ID Number Street Address   |                             |                            |
|    | City State Zip  |                             |                            |
| 9  | Name and ID Number  |                             |                            |
|    | Street Address  City State  |                             |                            |
|    | Name and ID Number  |                             |                            |
|    | Street Address  |                             |                            |
|    | City State Zip  | _                           |                            |
| 5  | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [if last page of scheduTransfer total to Detailed Summary I | Page, Line 13(b), Column A] | 300.0                      |

Schedule D-5 Page \_\_\_\_\_ of \_\_\_\_\_ revised 12/2015