

POLITICAL COMMITTEE
CITY/TOWN OF
CAMPAIGN FINANCE REPORT
2014 August/November Regular Election

FOR OFFICE USE ONLY

RECEIVED

SEP 29 2015

CITY OF CHANDLER
 CITY CLERK

1. Friends of Bob Ceccameo
 Full Name of Committee
2131 W. Maplewood St.
 Address
Chandler 85286 Maricopa 4808120685
 City ZIP Code County Phone

2. _____
 Sponsoring Organization of Candidate and office

 Name of Candidate and Office Sought (if applicable)
ORopu@cox.net
 E-Mail Address Fax #

3A. ID# COS-12

Primary

General

4 REPORTING PERIOD (Please check appropriate box) **DUE BETWEEN**

- January 31 Report - For Period of _____ * thru December 31, 2013 January 1, 2014 and January 31, 2014
- June 30 Report - For Period of January 1 2014 thru May 31, 2014 June 1, 2014 and June 30, 2014
- Pre-Primary Election Report - For Period of June 1, 2014 thru August 14, 2014 August 15, 2014 and August 22, 2014
- Post-Primary Election Report - For Period of August 15, 2014 thru September 15, 2014 September 16, 2014 and September 25, 2014
- Pre-General Election Report - For Period of September 16, 2014 thru October 23, 2014 October 24, 2014 and October 31, 2014
- Post-General Election Report - For Period of October 24, 2014 thru November 24, 2014 November 25, 2014 and December 4, 2014
- **January 31, Report - For Period of November 25, 2014 thru December 31, 2015 January 1, 2016 and January 31, 2016

5 SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)	- 0 -	- 0 -
5b Cash on Hand at the Beginning of this Reporting Period	500.63	- 0 -
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	0	- 0 -
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	500.63	- 0 -
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]	0	- 0 -
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	500.63	0
7 Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	0	0

*Insert date which is 21 days after date of last election (A.R.S. §16-913)
 **Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1 Committee Name: Friends of Bob Caccamo
 3 Report covering period from Final / Close out

2 ID#

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4 Contributions other than loans and in-kind	0	0
(a) Individuals - more than \$50 (Total from Schedule A)	0	0
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	0	0
(c) Political Committees (Total from Schedule B)	0	0
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	0	0
(e) Refund of contributions (Total from Schedule F-2)	0	0
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	0	0
5 (a) Loans made or guaranteed by candidate (Total from Schedule C)	0	0
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total Loans [add 5(a) and 5(b)]	0	0
6 In-kind contributions (Total from Schedule E)	0	0
7 Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	0
8 Total Receipts [add 4(f), 5(c), 6, and 7]		0
DISBURSEMENTS		
9 Expenditures for operating expenses (Total from Schedule D)	0	0
10 Independent Expenditures (Total from Schedule D-1)	0	0
11 Value of In-kind expenditures (Total from Schedule E)	0	0
12 Loans made by reporting committee (Total from Schedule D-2)	0	0
13 (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	0
(b) Repayment of all other loans (Total from Schedule D-5)	0	0
(c) Total Loan Repayments [add 13(a) and 13(b)]	0	0
14 Transfers to other political committees (Total from Schedule D-6)	0	0
15 Any other disbursement (Total from Schedule D-7)	500.63	0
16 Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	500.63	0
17 Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	0
18 Total disbursements [subtract line 17 from line 16]	500.63	0
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0	0

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

Robert Caccamo
 Type or Print Name of Treasurer

Robert Caccamo
 Signature of Treasurer or Candidate or Designating Individual

4/29/15
 Date

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2 ID #

1 Committee Name _____

3 Report covering period from _____ thru _____

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE											
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR														
4a	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">LAST</td> <td style="width:33%;">FIRST</td> <td style="width:33%;">MI</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> </table>	LAST	FIRST	MI	STREET ADDRESS			CITY	STATE	ZIP	OCCUPATION	EMPLOYER			
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5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A transfer total to Detailed Summary Page Line 4(z), Column A]														

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1

ANY OTHER DISBURSEMENT

SCHEDULE D-7

2 ID#	105-12
<input type="checkbox"/>	Primary
<input type="checkbox"/>	General

1 Committee Name Friends of Bob Cascone

3 Report covering period from Jan 31 2015 thru May 1, 2015

4	ANY OTHER DISBURSEMENTS	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE, DESCRIPTION			
4a	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>St. Francis Preparatory School</u> <u>6100 Francis Lewis Blvd.</u> <u>Fresh Meadows N.Y. 11365 718-423-8810</u></p> <p>DESCRIPTION</p>		500.63
4b	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		
4c	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		
4d	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		
4e	<p>NAME, ADDRESS, CITY, STATE, ZIP AND ID#</p> <p>DESCRIPTION</p>		

\$500.63

5 ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 (Transfer total to Detailed Summary Page Line 15 Column A)