

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

FOR OFFICE USE ONLY

RECEIVED

AUG 22 2014

CITY OF CHANDLER
 CITY CLERK

1. Re-Elect Tibshraeny Mayor 2014
 Full Name of Committee
2158 E. Teakwood Place
 Address
Chandler 85249 Maricopa (480) 821-8947
 City ZIP Code County Phone

2. _____
 Sponsoring Organization or Candidate and office
Jay Tibshraeny Mayor
 Name of Candidate and Office Sought (if applicable)

 E-Mail Address Fax #

3A. ID# M13-01

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)		213,033.81
5b Cash on Hand at the Beginning of this Reporting Period	240,878.75	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	8,998.92	41,314.48
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	249,877.67	254,348.29
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)	8,368.41	12,839.03
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	241,509.26	241,509.26

*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.

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID# M13-01	
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Re-Elect Tibshraeny Mayor 2014

3. Report covering period from 6/1/14 thru 8/14/14

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																												
4a.	<table border="0"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Robson</td> <td>Edward</td> <td>J</td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">9532 E. Riggs Rd.</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Sun Lakes</td> <td>AZ</td> <td>85248</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Chairman</td> <td colspan="2">Robson Communities, Inc.</td> </tr> </table>	LAST	FIRST	MI	Robson	Edward	J	STREET ADDRESS			9532 E. Riggs Rd.			CITY	STATE	ZIP	Sun Lakes	AZ	85248	OCCUPATION	EMPLOYER		Chairman	Robson Communities, Inc.		6/2/14	1,000.00	
LAST	FIRST	MI																										
Robson	Edward	J																										
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LAST	FIRST	MI																										
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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.

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID# M13-01	
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Re-Elect Tibshraeny Mayor 2014

3. Report covering period from 6/1/14 thru 8/14/14

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
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LAST	FIRST	MI																										
McCoy	D.P.																											
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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]		3,800.00																									

*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.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID#	M13-01
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Re-Elect Tibshraeny Mayor 2014

3. Report covering period from 6/1/14 thru 8/14/14

4	CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
4a	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	2,000.00	
	DATE RECEIVED			
		UFCW Local 99, PAC 2401 N. Central Ave., 2nd Floor Phoenix, AZ 85004		
	6/26/14			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	400.00	
	DATE RECEIVED			
	01206	SRP Political Involvement Committee P.O. Box 52025 Phoenix, AZ 85072		
	7/2/14			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	250.00	
	DATE RECEIVED			
	201200367	Cox Arizona Political Action Committee 1550 W. Deer Valley Rd. Phoenix, AZ 85027		
	7/8/14			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	500.00	
	DATE RECEIVED			
		Air Products Political Alliance P.O. Box 441 Trexlerstown, PA 18087		
	7/30/14			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	500.00	
	DATE RECEIVED			
		Sedona-Verde Valley Firefighters Assoc. PAC P.O. Box 10422 Sedona, AZ 86339		
	8/7/14			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	500.00	
	DATE RECEIVED			
		United Mesa Firefighters PAC P.O. Box 848 Mesa, AZ 85211		
	8/7/14			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	500.00	
	DATE RECEIVED			
		United Phoenix Firefighters, Peoria Chapter PAC 61 E. Columbus Ave., Ste.200 Phoenix, AZ 85012		
	8/7/14			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP	500.00	
	DATE RECEIVED			
		Arizona Multihousing Association PAC 818 N. First St. Phoenix, AZ 85004		
	8/7/14			
i.	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]		5,150.00	

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#	M13-01
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Re-Elect Tibshraeny Mayor 2014

3. Report covering period from 6/1/14 thru 8/14/14

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Best Buy 1455 W. Southern Ave. Mesa, AZ 85202 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Telecommunications	6/3/14	63.00
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Best Buy 1455 W. Southern Ave. Mesa, AZ 85202 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Office Supplies	6/6/14	48.61
4c.	NAME, ADDRESS, CITY, STATE AND ZIP U S Postmaster DESCRIPTION OF ITEMS OR SERVICES PURCHASED Postage	6/24/14	147.00
4d.	NAME, ADDRESS, CITY, STATE AND ZIP Verizon Wireless P.O. Box 4005 Acworth, GA 30101 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Telecommunications	6/25/14	121.88
4e.	NAME, ADDRESS, CITY, STATE AND ZIP Michael Alyn 4217 N. 15th Drive Phoenix, AZ 85015 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Information Technology Services	7/9/14	400.00
4f.	NAME, ADDRESS, CITY, STATE AND ZIP Chase Card Services P.O. Box 94014 Palatine, IL 60094 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Volunteer Food & Refreshments	7/10/14	352.30
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#	M13-01
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Re-Elect Tibshraeny Mayor 2014

3. Report covering period from 6/1/14 thru 8/14/14

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Coleman Dahm & Associates 4715 N. 32nd Street Phoenix, AZ 85018 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Mailing Services	7/18/14	6,050.00
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Card Services P.O. Box 13337 Philadelphia, PA 19101 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Technology Accessory	7/28/14	1,185.62
4c.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	NAME, ADDRESS, CITY, STATE AND 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 Detail Summary Page Line 9, Column A]		8,368.41

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

2. ID#	M13-01
<input checked="" type="checkbox"/>	Primary
<input type="checkbox"/>	General

1. Committee Name Re-Elect Tibshraeny Mayor 2014

3. Report covering period from 6/1/14 thru 8/14/14

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# J.P. Morgan Chase Bank	6/1/14 to 8/14/14	48.92
	DESCRIPTION OF RECEIPT Interest		
4b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
4f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 (If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A)			48.92