POLITICAL COMMITTEE

CITY/TOWN OF CAREFREE

CAMPAIGN FINANCE REPORT

2013 March/May Regular Election

FOR OFFICE USE ONLY

RECEIVED MAR - 6 2013 Town of Carefree

1. Les Peterson for Carefree Town Council Committee
Full Name of Committee

2045 Smoketree Dr PO Box 3434
Address

Carefree, AZ 85377 Maricopa 480 595-1838
City ZIP Code County Phone

2. Les Peterson - Carefree Town Council
Sponsoring Organization or Candidate and office

Les Peterson - Carefree Town Council
Name of Candidate and Office Sought (if applicable)

PigsAgesAz@cox.net 480 595-1206
E-Mail Address Fax #

3A. ID# TC 2013 - 08

4. REPORTING PERIOD (Please check appropriate box) — DUE BETWEEN

- [ ] January 31 Report - For Period of 1/1/13 * thru December 31, 2012 ..... January 1, 2013 and January 31, 2013
- [x] Pre-Primary Election Report - For Period of January 1, 2013 thru February 28, 2013 ..... March 1, 2013 and March 8, 2013
- [ ] Post-Primary Election Report - For Period of March 1, 2013 thru April 1, 2013 ..... April 2, 2013 and April 11, 2013
- [ ] Pre-General Election Report - For Period of April 2, 2013 thru May 9, 2013 ..... May 10, 2013 and May 17, 2013
- [ ] Post-General Election Report - For Period of May 10, 2013 thru June 10, 2013 ..... June 11, 2013 and June 20, 2013
- [ ] **January 31 Report - For Period of June 11, 2013 thru December 31, 2014 ..... January 1, 2015 and January 31, 2015

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
5b Cash on Hand at the Beginning of this Reporting Period	0	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	4325.00	4325.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	4,325.00	4325.00
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
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	3971.39	3971.39
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	353.61	353.61

*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 of $50 or less - AGGREGATE TOTAL*

SCHEDULE **A-1**

1. Committee Name Les Peterson for Cave Creek Town Council / Comm

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4. **Aggregate Total of Contributions of $50 or less**

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
one $25.00 contribution included in overall contributions		
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]		6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]

*If contributions of $50 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE **B**

1. Committee Name Les Peterson for Carefree Town Council/Clerk

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

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 None		
	DATE RECEIVED			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
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]*			

CANDIDATE LOANS

SCHEDULE **C**

1.	Committee Name Les Peterson for Charles Boone County Comm	2. ID #
3.	Report covering period from 1/1/13 thru 2/28/13	

4.	LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS FROM WHOM RECEIVED	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP None			
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]			

OTHER LOANS

SCHEDULE **C1**

1. Committee Name Les Peterson for Carefree Town Council / Cam

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	ALL OTHER LOANS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# None			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A]			

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE **D**

1. Committee Name Les Peterson for Carefree Town Council/Clerk

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	EXPENDITURES NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP None DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
b.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
c.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	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]*		

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

INDEPENDENT EXPENDITURES*

SCHEDULE **D-1**

1. Committee Name Les Peterson for Carefree Town Council Comm

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	INDEPENDENT EXPENDITURES IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Please see separate Recap PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ☐ Opposed ☐ CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ☐ Opposed ☐ CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP PURPOSE AND DESCRIPTION OF PURCHASE Benefitted ☐ Opposed ☐ CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 *[If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]*		3971.39

*SEE A.R.S. § 16-901(14).

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT
Les and Mary Peterson - Retired - $500.00 in Total John and Pat Herron - Retired - $500.00 in Total	

Schedule D-1 Page___of___

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE **D-2**

1. Committee Name Les Peterson for Carefree Town Council Comm

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	LOANS MADE BY THE REPORTING COMMITTEE NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE	DATE LOAN MADE	AMOUNT OF THE LOAN
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID# None		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 *[Transfer total to Detail Summary Page Line 12, Column A]*		

OFFSETS TO OPERATING EXPENSES *

SCHEDULE **D-3**

1. Committee Name Les Peterson for Carefree Town Council Campaign

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

	REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	DATE REFUND RECEIVED	AMOUNT OF THE REFUND
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP None DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 *[If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A]*		

* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE **D-4**

1. Committee Name Les Peterson for Carefree Town Council Comm

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP NA		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]		

REPAYMENT OF ALL OTHER LOANS

SCHEDULE **D-5**

1. Committee Name Les Peterson for Carefree Town Council Campaign

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	REPAYMENT OF ALL OTHER LOANS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE **D-6**

1. Committee Name Les Peterson for Carefree Town Council Comm

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	TRANSFERS MADE BY THE REPORTING COMMITTEE NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]

ANY OTHER DISBURSEMENT

SCHEDULE **D-7**

1. Committee Name Les Peterson for Carefree Town Council Campaign

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

	ANY OTHER DISBURSEMENTS NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 *[Transfer total to Detailed Summary Page Line 15 Column A]*

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE **E**

1. Committee Name Les Peterson for Carefree Town Council Comm

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN			
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION ☐ EXPENDITURE ☐ None		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION ☐ EXPENDITURE ☐		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION ☐ EXPENDITURE ☐		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION ☐ EXPENDITURE ☐		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E *[If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]*			
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E *[If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]*			

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE **F-1**

1. Committee Name Les Peterson for Carefree Town Council Cmte

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF RECEIPT		
f.	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*

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE **F-2**

2. ID #

1. Committee Name Les Peterson for Care Free Town Council Com

3. Report covering period from 1/1/13 thru 2/28/13

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	DATE REFUND MADE	AMOUNT OF THE REFUND
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# None DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 *[If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]*

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE **F-3**

1. Committee Name Les Peterson for Crestree Town Council Comm

2. ID #

3. Report covering period from 1/1/13 thru 2/28/13

4	DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	None			
	DESCRIPTION OF DEBT				
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 *[Transfer total to Detail Summary Page Line 19, Column A]*				

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714963147084	$35.49
Plstc Adjustable Display E	
SubTotal	$70.98
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TOTAL	$77.33
MasterCard	$77.33
Card number: XXXXXXXXXXXX3894	
Authorization 85569Z	

MaxPerks Number XXXXX4139

MaxPerks Qualified Purchase Balance as of (1/14/2013): $37.99

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EDDM Postage	QTY 2746		
Reg Unit Price	$ 0.145		
002 039009 (024)		T1	$ 851.26
EDDM Print	QTY 2746		
Reg Unit Price	$ 0.31		
004 500451 (024)		T1	$ 40.00
CUSTOM PRINT	QTY 200		
Reg Unit Price	$ 0.20		
		SubTotal	$1289.43
		TAX (T1)	$ 91.81
		Total	$1381.24
		Check	$1381.24

Receipt ID 82813898984906555559 5692 Items
CSH: MICHAEL Tran: 7348 Reg: 002

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EDDM Postage	QTY 2746		
Reg Unit Price	$ 0.145		
003 039009 (024)		T1	$ 851.26
EDDM Print	QTY 2746		
Reg Unit Price	$ 0.31		
		SubTotal	$1249.43
		TAX (T1)	$ 87.69
		Total	$1337.12
		Check	$1337.12

Receipt ID 82813898974014555559 5492 Items
CSH: MICHAEL Tran: 7467 Reg: 002

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		SubTotal	$ 185.25
		Total	$ 185.25
		Check	$ 185.25

t ID 82813898074437883619 247 Items
LLY Tran: 7715 Reg: 002

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Deal 223770298 Savings	($37.99)
YOU PAY	$0.00
808736403962	$37.99
BrochPpr 48lb Glsy IJ 150c	
Deal 223770298	
TOTAL SAVINGS	($37.99)

SubTotal	$37.99
Tax 8.950%	$3.41
TOTAL	$41.40
AMEX	$41.40

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Authorization 615062

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MEMBER #111758623625

	554490	WET/DRY VAC	29.99 A
E	633562	KS STWD TOM	5.99 C
	531445	TIDE H/E 170	19.95 A
	210000068226	CPN/TIDE	2.50-
F	536873	BIOTRUE 2X16	19.49 A
	F10000068322	CPN/536873	5.00-
E	690793	VEGGIE MUFFIN	9.99 C
E	962005	HLTHY CHOICE	10.69 C
	E10000068532	CPN/962005	3.00-
F	512396	BOSTON MULTI	21.49 A
	F10000068320	CPN/512396	5.00-
E	676010	MUCNX FASTMX	21.99 A
	33724	GROUND BEEF	19.08 C
	562775	2SPEED BLEND	29.89 A
	210000068859	CPN/562775	10.00-
	503636	KS PAPER 4X6	14.49 A
	503636	KS PAPER 4X6	14.49 A
E	427381	KS ORG EGGS	7.59 C

	SUBTOTAL	199.62
A	8.95% TAX	15.37
C	1.65% TAX	.88
	TOTAL	215.87
VF	American Express	

XXXXXXXXXXXX1009
01/13/13 13:46 SWIPED
Seq#: 002614 App#: 527246
American Express Resp: AA
Tran ID#: 301340055000
Merchant ID 99042711

APPROVED - PURCHASE
AMOUNT: $215.87

0427 015 0000000040 0017

CHANGE	.00
COUPONS TENDERED	25.50

TOTAL NUMBER OF ITEMS SOLD = 13

FSA N/TAX AMT (F)	30.98
FSA TAX	3.67
FSA TOTAL	34.65

CASHIER: JEFF K. REG# 15
[redacted]: 13:47 0427 15 0017 40

THANK YOU!
PLEASE COME AGAIN

THE ARIZONA REPUBLIC

azcentral.com

A GANNETT NEWSPAPER

ADVERTISING BILLING INVOICE

Date	Page
03/02/13	1

Sales Representative: Caroline Silverstein (602) 444-8204

Customer Accounting: Kimberly Bickford (602) 444-8564

LES PETERSON
PO BOX 3434
CAREFREE, AZ US 85377

Billing Acct #
10019858

Billing Period
Start Date to 02/28/13

Payment Due Date
03/12/13

C NONE853770000

BILLING ACTIVITY # 18831987	
Previous Billing Balance	$0.00
Applied Payments	($343.00)
Current Credits/Adjustments	$0.00
Current Invoices	$343.00

Current Balance		Past Due Balance		Ending Billing Balance
$0.00	+	$0.00	=	$0.00

Unapplied Payments		Disputed Balance		Deductions
$0.00	+	$0.00	=	$0.00

Total Due
$0.00

TO ENSURE PROPER CREDIT RETURN BOTTOM PORTION OF THIS BILL WITH YOUR PAYMENT

Billed Account Name
LES PETERSON

Account Number	Billing #
10019858	18831987

Please Mail Your Payment To

The Arizona Republic
PO Box 677595
Dallas, TX 75267-7595

Billing Date
03/02/13

Payment Due Date
03/12/13

☐ **Partial or Disputed Payment (Enter comments below.)**
All claims of error in billing/advertising must be submitted in writing within 60 days or be deemed waived.
Invoice Ref #.

Kimberly Bickford

Total Amount Due
$0.00

Amount Paid $ _____
if different

1000000000000001883198700001001985800000000005

THE ARIZONA REPUBLIC - Advertising Billing Invoice

Billed Account Name	Billed Acct #	Billing Period	Billing #	Billing Date	Page
LES PETERSON	10019858	Start Date to 02/28/13	18831987	03/02/13	2

PREVIOUS STATEMENT BALANCE 0.00

APPLIED PAYMENTS

Ref#	Applied Date	Description	Payment Type	Payment Date	Applied Amt	Amt
8481790-5	02/24	Applied Payment	Credit Card: Les Peterso	02/13		(343.00)

Total Applied Payments (343.00)

CURRENT CREDITS/ADJUSTMENTS

Ref#	Date	Description	Amt

Total Adjustments 0.00

UNAPPLIED PAYMENTS

Ref#	Description	Payment Type	Payment Date	Amt

Total Unapplied Payments 0.00

CURRENT INVOICES

Inv#	Order # / Pub Date	Description	Units	Times Run	Billed Units	Rate	Gross Amt	Net Amt
R5179620780101	7962078	**1/4 page color zone 8**	Column Inch					171.50
	02/20	Zone 8 N Scotts - Zn Display 2 Day - Daily	1/4 pg	1	9.8760	15.6440	154.50	
	02/20	Color Charge		1	9.88	1.72	17.00	
R5479620780101	7962078	**1/4 page color zone 8**	Column Inch					171.50
	02/23	Zone 8 N Scotts - Zn Display 2 Day - Weekend	1/4 pg	1	9.8760	15.6440	154.50	
	02/23	Color Charge		1	9.88	1.72	17.00	

Total Current Invoice Charges 343.00

Card ending in 3894

Sale Date	Description	Amount
03/03/2013	LOWES #01157* PRESCOTT AZ	$90.30
03/02/2013	THE HOME DEPOT 452 PRESCOTT AZ	$66.99
02/28/2013	Z'S ASIAN FUSION CAVE CREEK AZ	$31.45
02/28/2013	AIRPARK CONSIGNMENT SCOTTSDALE AZ	$87.16
02/27/2013	BB *AZ Musicfest 480-488-0806 CA	$185.00
02/26/2013	CIBO E VINO SCOTTSDALE AZ	$12.35
02/21/2013	TARGET 00013276 SCOTTSDALE AZ	$8.00
02/21/2013	SAFEWAY FUEL 10018497 SCOTTSDALE AZ	$40.69
02/17/2013	ARABIAN HORSE ASSOC SCOTTSDALE AZ	$14.00
02/15/2013	ARIZONA SCIENCE CENTER PHOENIX AZ	$22.00
02/13/2013	USPS 0363680181 QQQ CAREFREE AZ	$6.88
02/13/2013	AZ REPUBLIC CLASSIFIED 6024448561 AZ	$343.00
02/13/2013	CITY SUN TIMES PARADISE VALL AZ	$507.38
02/11/2013	TARGET 00013276 SCOTTSDALE AZ	$17.62
02/11/2013	MARK J LEWIS MD PLC SCOTTSDALE AZ	$60.00
02/09/2013	Z'S ASIAN FUSION CAVE CREEK AZ	$31.45
02/05/2013	SWEET TOMATOES 35 Q14 SCOTTSDALE AZ	$18.94

Print This Page

Request an Annual Account Summary

To help with your personal financial planning and record keeping, request an Annual Account Summary. It recaps your Citi card spending by month and category. (Available as a PDF only). You are able to make requests until October 31 of each calendar year.

Available Summary:

2012 Request

If your email address is not current Please update it before submitting your request.

CONTRIBUTIONS more than $50 - from INDIVIDUALS*

SCHEDULE **A**

1. Committee Name Les Peterson for Carefree Town Council Committee

2. ID #

3. Report covering period from _____ thru _____

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST: Peterson FIRST: Lester and Mary MI: G STREET ADDRESS: 2045 Smoketree Dr PO Box 3434 CITY: Carefree STATE: AZ ZIP: 85377 OCCUPATION: Retired EMPLOYER: NA	1/22/13	$500.00 ($250.00 each)	500.00
b.	LAST: Kreinheder Family Trust FIRST: Millard Kreinheder MI: STREET ADDRESS: PO Box 3678 CITY: Carefree STATE: AZ ZIP: 85377 OCCUPATION: Retired EMPLOYER: NA	1/22/13	100.00	600.00
c.	LAST: Geldermann FIRST: Thomas MI: STREET ADDRESS: 1605 Quartz Valley Drive CITY: Scottsdale STATE: AZ ZIP: 85266 OCCUPATION: Retired EMPLOYER: NA	1/22/13	100.00	700.00
d.	LAST: Crowley FIRST: Thomas MI: R STREET ADDRESS: 1606 Quartz Valley Drive CITY: Scottsdale STATE: AZ ZIP: 85266 OCCUPATION: Retired EMPLOYER: NA	1/22/13	50.00	750.00
e.	LAST: Stern FIRST: William MI: B STREET ADDRESS: 3038 Ironwood Road CITY: Carefree STATE: AZ ZIP: 85377 OCCUPATION: Retired EMPLOYER: NA	1/22/13	100.00	850.00
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**

1. Committee Name Les Peterson for Carefree Town Council Committee

2. ID #

3. Report covering period from _____ thru _____

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST Gilford FIRST Richard MI I STREET ADDRESS 1704 Staghorn CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	950.00
b.	LAST Volb FIRST Norman MI STREET ADDRESS 2025 Smoketree CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,050.00
c.	LAST Schneider FIRST Paul MI E STREET ADDRESS 1160 Beavertail CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,150.00
d.	LAST Wolff FIRST Robert MI M STREET ADDRESS 7416 E Arroyo Hondo CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,250.00
e.	LAST Moore FIRST Herbert MI F STREET ADDRESS PO Box 3452 CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,350.00
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**

1. Committee Name Les Peterson for Carefree Town Council Committee

2. ID #

3. Report covering period from _____ thru _____

4	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST Rothschild FIRST Robert MI S STREET ADDRESS 3207 E Arroyo Seco CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,450.00
b.	LAST Burman FIRST Marshall MI L STREET ADDRESS 3109 Arroyo Hondo CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,550.00
c.	LAST Dille FIRST John MI F STREET ADDRESS 1807 Eagle Claw CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,650.00
d.	LAST Johnson FIRST Garrett MI B STREET ADDRESS 34333 N Ironwood Road CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,750.00
e.	LAST Croisant FIRST Eugene MI STREET ADDRESS 3061 Ironwood Rd CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,850.00
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**

1. Committee Name Les Peterson for Carefree Town Council Committee

2. ID #

3. Report covering period from _____ thru _____

	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST Mayer FIRST William MI L STREET ADDRESS 7517 E Club Villa Circle CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	1,950.00
b.	LAST Barton FIRST Jerome MI STREET ADDRESS 7670 E Old Point Trail CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	2,050.00
c.	LAST Donnelley III FIRST Richard MI R STREET ADDRESS 34419 N Ironwood CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	1/23/13	100.00	2,150.00
d.	LAST Reed FIRST James MI M STREET ADDRESS 34908 N Indian Camp Trail CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	1/24/13	100.00	2,250.00
e.	LAST Fox FIRST Herb MI A STREET ADDRESS 7514 E High Point Drive CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	1/25/13	250.00	$2,500.00
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**

1. Committee Name: Les Peterson for Carefree Town Council Committee

2. ID #

3. Report covering period from _____ thru _____

	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST: Vickery FIRST: William MI: C STREET ADDRESS: 901 Powell St Apt 14 CITY: San Francisco STATE: CA ZIP: 94108 OCCUPATION: Retired EMPLOYER: NA	1/27/13	100.00	2,600.00
b.	LAST: Reisman FIRST: Bert MI: STREET ADDRESS: 7735 E Old Paint Trail CITY: Scottsdale STATE: AZ ZIP: 85266 OCCUPATION: Retired EMPLOYER: NA	1/28/13	100.00	2,700.00
c.	LAST: Rogers FIRST: Stewart MI: N STREET ADDRESS: 1717 Staghorn Lane CITY: Carefree STATE: AZ ZIP: 85377 OCCUPATION: Retired EMPLOYER: NA	1/30/13	100.00	2,800.00
d.	LAST: Whitmer FIRST: James MI: P STREET ADDRESS: PO Box 5071 CITY: Carefree STATE: AZ ZIP: 85377 OCCUPATION: Retired EMPLOYER: NA	1/30/13	200.00	3,000.00
e.	LAST: Gauss FIRST: Carl MI: STREET ADDRESS: 7326 E Whitethorn Circle CITY: Scottsdale STATE: AZ ZIP: 85266 OCCUPATION: Retired EMPLOYER: NA	1/31/13	100.00	3,100.00
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**

1. Committee Name Les Peterson for Carefree Town Council / Committee

2. ID #

3. Report covering period from _____ thru _____

	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST Herron FIRST John and Pat MI S STREET ADDRESS 4000 La Ultima Piedra Dr CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	2/2/13	500.00	3,600.00
b.	LAST Rasmussen FIRST Robert MI J STREET ADDRESS 1803 Eagle Claw Drive CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	2/2/13	100.00	3,700.00
c.	LAST Korybalski FIRST Michael MI E STREET ADDRESS 7500 E Boulders Parkway #23 CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	2/2/13	100.00	3,800.00
d.	LAST Ressique FIRST Richard MI STREET ADDRESS 34149 N Boulders Parkway CITY Scottsdale STATE AZ ZIP 85266 OCCUPATION Retired EMPLOYER NA	2/11/13	25.00	3,825.00
e.	LAST Szindat FIRST Donald MI STREET ADDRESS PO Box 2508 CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	2/11/13	250.00	4,075.00
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**

1. Committee Name Les Peterson for Carefree Town Council Committee

2. ID #

3. Report covering period from _____ thru _____

#	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	LAST Graham FIRST William MI W STREET ADDRESS PO Box 6167 CITY Carefree STATE AZ ZIP 85377 OCCUPATION Retired EMPLOYER NA	2/12/13	150.00	4,225.00
b.	LAST Lausman FIRST Herb MI S STREET ADDRESS 23005 N 74th St #1119 CITY Scottsdale STATE AZ ZIP 85255 OCCUPATION Retired EMPLOYER NA	2/13/13	100.00	4,325.00
c.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
d.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
e.	LAST FIRST MI STREET ADDRESS CITY STATE ZIP OCCUPATION EMPLOYER			
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.

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

1. Committee Name: Les Peterson for Carefree Town Council / Council

2. ID#

3. Report covering period from _____ Thru _____

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind: See the attached		
(a) Individuals - more than $50 (Total from Schedule A)		
(b) Individuals - aggregate $50 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]		
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)		

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.

Les Peterson

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

3/6/13

Date

Les Peterson Campaign Contributions and Expenditures Recap

Contributions

Total through 2/28/13	**$4,325.00**

Expenditures

Two Direct mailings to Carefree P.O. Boxes, plus 1,000 printed handouts and three posters	$1,381.24 1,337.12
Two easels for use at Post Office	77.33
One Direct mailing to Scottsdale and Cave Creek addresses	185.25
Web-site related fees	50.00
Supplies	57.44
Thank you cards, including postage	32.63
Scottsdale Republic Media	343.00
City Sun times Media	507.38
	Total **$3,971.39**

Remaining and unspent as of 2/28/13	**$353.61**