



STATE OF ARIZONA
COMMITTEE CAMPAIGN
FINANCE REPORT

COMMITTEE ID NUMBER
CC2019-01

RECEIVED
OCT 05 2020
BY:

COMMITTEE INFORMATION (required):

Committee Information: Committee Name: Gerry Friedel

CANDIDATE INFORMATION (only if filing as a candidate committee):

Office Sought: Statewide Office: _____ State Legislature: _____
 County Office: _____ City/Town Office: Town Council

Cumulative Report:

Check here if this is the candidate committee's first, cumulative report for the election cycle. Also select appropriate Reporting Period below.
 Cumulative reporting period start date (which supersedes the start date for the Reporting Period selected below): _____

REPORTING PERIOD (check one):

REPORTING PERIOD	REPORT DUE
2018 4 th Quarter Report: October 21, 2018 to December 31, 2018	January 1, 2019 to January 15, 2019
2019 March Pre-Election Report (Local Only): January 1, 2019 to February 23, 2019	February 24, 2019 to March 4, 2019*
2019 1 st Quarter Report (Local Only): February 24, 2019 to March 31, 2019	April 1, 2019 to April 15, 2019
2019 1 st Quarter Report: January 1, 2019 to March 31, 2019	April 1, 2019 to April 15, 2019
2019 May Pre-Election Report (Local Only): April 1, 2019 to May 4, 2019	May 5, 2019 to May 13, 2019*
2019 2 nd Quarter Report (Local Only): May 5, 2019 to June 30, 2019	July 1, 2019 to July 15, 2019
2019 2 nd Quarter Report: April 1, 2019 to June 30, 2019	July 1, 2019 to July 15, 2019
2019 August Pre-Election Report (Local Only): July 1, 2019 to August 10, 2019	August 11, 2019 to August 19, 2019*
2019 3 rd Quarter Report (Local Only): August 11, 2019 to September 30, 2019	October 1, 2019 to October 15, 2019
2019 3 rd Quarter Report: July 1, 2019 to September 30, 2019	October 1, 2019 to October 15, 2019
2019 October Pre-Election Report (Local Only): October 1, 2019 to October 19, 2019	October 20, 2019 to October 28, 2019*
2019 4 th Quarter Report (Local Only): October 20, 2019 to December 31, 2019	January 1, 2020 to January 15, 2020
2019 4 th Quarter Report: October 1, 2019 to December 31, 2019	January 1, 2020 to January 15, 2020
2020 March Pre-Election Report (Local Only): January 1, 2020 to February 22, 2020	February 23, 2020 to March 2, 2020*
2020 1 st Quarter Report (Local Only): February 23, 2020 to March 31, 2020	April 1, 2020 to April 15, 2020
2020 1 st Quarter Report: January 1, 2020 to March 31, 2020	April 1, 2020 to April 15, 2020
2020 May Pre-Election Report (Local Only): April 1, 2020 to May 2, 2020	May 3, 2020 to May 11, 2020*
2020 2 nd Quarter Report (Local Only): May 3, 2020 to June 30, 2020	July 1, 2020 to July 15, 2020
2020 2 nd Quarter Report: April 1, 2020 to June 30, 2020	July 1, 2020 to July 15, 2020
2020 July Pre-Election Report: July 1, 2020 to July 18, 2020	July 19, 2020 to July 27, 2020*
<input checked="" type="checkbox"/> 2020 3 rd Quarter Report: July 19, 2020 to September 30, 2020	October 1, 2020 to October 15, 2020
2020 October Pre-Election Report: October 1, 2020 to October 17, 2020	October 18, 2020 to October 26, 2020*
2020 4 th Quarter Report: October 18, 2020 to December 31, 2020	January 1, 2021 to January 15, 2021
Final Campaign Finance Report Prior to Committee Termination	End of Previous Period through Today's Date

*Reporting deadline extended to next business day A.R.S. §§ 1-243(A) and 1-303

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	679.72	
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)		3,090.00
(c) - Total disbursements (from "Summary of Disbursements," line 18 (cash column) for this reporting period)	679.72	3,090.00
(d) = Balance at close of reporting period	0.00	

Check here if no financial activity during the reporting period. Lines (a)-(d) still must be completed, but only this cover page need be filed.

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity. All reports are deemed to be filed under penalty of perjury by the committee treasurer (all committees) and candidate (candidate committees only).
 Arizona Secretary of State Revision 12/12/19 (fillable format)



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Under A.R.S. § 16-926(B)(5), a campaign finance report must be certified by the committee treasurer under penalty of perjury that the contents of the report are true and correct.

By filing this report, you certify that, under penalty of perjury, you have examined the contents of this report, and the contents are true and correct.

Teri Mefford
Printed Name of Committee Treasurer

Teri Mefford
Signature of Committee Treasurer

10/1/2020
Date



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SUMMARY OF DISBURSEMENTS (Schedule B):

Disbursements	Cash	Equity
1. Disbursements for Operating Expenses	5.00	
2. Contributions Made		
(a) Candidate Committees		
(b) Political Action Committees		
(c) Political Parties		
(d) Partnerships		
(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
(f) Labor Organizations (PAC & Political Parties Only)		
(g) Monetary Contributions Subtotal (add 2(a) through 2(f))		
(h) Contribution Refunds Provided to the Reporting Committee		
(i) Monetary Contributions Total (subtract 2(h) from 2(g))		
3. Loans		
(a) Loans Made		
(b) Loan Guarantees Made		
(c) Forgiveness on Loans Made		
(d) Repayment of Loans Received	500.00	
(e) Accrued Interest on Loans Received		
(f) Total Loans (cash: add 3(a), 3(d) & 3(e); equity: add 2(b) & 2(c))		
4. Rebates and Refunds Made (Non-Contributions)		
5. Value of In-Kind Contributions Provided		
(a) Candidate Committees		
(b) Political Action Committees		
(c) Political Parties		
(d) Partnerships		
(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)		
(f) Labor Organizations (PAC & Political Parties Only)		
(j) Contributions Subtotal (add 5(a) through 5(f))		
6. Independent Expenditures Made		
7. Ballot Measure Expenditures Made		
8. Recall Expenditures Made		
9. Support Provided to Party Nominees (Political Parties Only)		
10. Joint Fundraising / Shared Expense Payments Made		
11. Reimbursements Made		
12. Outstanding Accounts Payable / Debts Owed by Committee		
13. Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable)		
14. Miscellaneous Disbursements	174.72	
15. Aggregate of Disbursements - \$250 or Less		
16. Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 13-15; equity: add 3(f), 5(j), & 12-15)	679.72	



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DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

Recipient Information				Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1		Name: Mid First Bank Disbursement Date: 7/31/20 Street Address: 13771 Fountain Hills Blvd, Ste 115		5.00	5.00	40.00
City: Fountain Hills State: AZ ZIP: 85268		Type of Operating Expense Paid: Checking Acct Fee Non-Electoral Purpose? (PACs and Political Parties Only): <input type="checkbox"/>				
2		Name: _____ Disbursement Date: _____ Street Address: _____ City: _____ State: _____ ZIP: _____ Type of Operating Expense Paid: _____ Non-Electoral Purpose? (PACs and Political Parties Only): <input type="checkbox"/>		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
3		Name: _____ Disbursement Date: _____ Street Address: _____ City: _____ State: _____ ZIP: _____ Type of Operating Expense Paid: _____ Non-Electoral Purpose? (PACs and Political Parties Only): <input type="checkbox"/>		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
4		Name: _____ Disbursement Date: _____ Street Address: _____ City: _____ State: _____ ZIP: _____ Type of Operating Expense Paid: _____ Non-Electoral Purpose? (PACs and Political Parties Only): <input type="checkbox"/>		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
5		Name: _____ Disbursement Date: _____ Street Address: _____ City: _____ State: _____ ZIP: _____ Type of Operating Expense Paid: _____ Non-Electoral Purpose? (PACs and Political Parties Only): <input type="checkbox"/>		<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
Enter total only if last page of schedule <small>(Transfer the total disbursed this period to "Summary of Disbursements," line 1)</small>					5.00	40.00



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REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

Lender Information				Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Lender Name Barbara Friedel		Date Repayment Made 8/16/20	500.00	500.00	500.00
	Street Address 15244 N Alvarado Pl					
	City Fountain Hills	State AZ	ZIP 85268			
	Original Amount Borrowed 500.00	Amount Still Outstanding 0.00				
2	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
3	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
4	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
5	Lender Name		Date Repayment Made			
	Street Address					
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
Enter total only if last page of schedule <small>(transfer the total disbursed this period to "Summary of Disbursements" line 3(d))</small>				500.00	500.00	



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MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

Recipient Information				Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
1	Name Extended Hands Foods Bank			174.72 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Credit	174.72	174.72
	Street Address 16548 E Laser Dr #6					
	City Fountain Hills	AZ	ZIP 85268			
	Disbursement Type Charitable Contribu		Disbursement Date 8/16/20			
2	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
3	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
4	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City		ZIP			
	Disbursement Type		Disbursement Date			
5	Name			<input type="checkbox"/> Cash <input type="checkbox"/> Credit		
	Street Address					
	City	State	ZIP			
	Disbursement Type		Disbursement Date			
Enter total only if last page of schedule					174.72	174.72
<small>Transfer the total disbursed this period to "Summary of Disbursements," line 12i.</small>						