

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DEFENDARIZONA

ADDRESS (number and street)

6635 W. HAPPY VALLEY RD.

STE. A104, #198

Check if different  
than previously  
reported. (ACC)

GLENDALE

AZ

85310

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00668301

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

OTTENHOFF, BENJAMIN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

OTTENHOFF, BENJAMIN, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DEFENDARIZONA

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 04 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y 06 / 30 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2018		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	179040.70	
(c) Total Receipts (from Line 19) .....	1105000.00	1325000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1284040.70	1325000.00
7. Total Disbursements (from Line 31).....	143443.97	184403.27
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1140596.73	1140596.73
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**DEFENDARIZONA**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	8

<b>I. Receipts</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1105000.00	1325000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1105000.00	1325000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1105000.00	1325000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1105000.00	1325000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1105000.00	1325000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	143443.97	184403.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	143443.97	184403.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	143443.97	184403.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	143443.97	184403.27

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1105000.00	1325000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1105000.00	1325000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	143443.97	184403.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	143443.97	184403.27

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BLUE MAGNOLIA INVESTMENTS LLC**

Mailing Address 1209 ORANGE STREET

City  
WILIMINGTON

State  
DE

Zip Code  
19801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2018

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. VAN TUYL, LARRY, , MR.,**

Mailing Address 1209 ORANGE STREET

City  
WILIMINGTON

State  
DE

Zip Code  
19801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLUE MAGNOLIA INVESTMENTS LLC

Occupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2018

Transaction ID : SA11AI.4161.0

Amount of Each Receipt this Period

100000.00

☒ Memo Item  
ATTRIBUTION - BLUE MAGNOLIA INVESTMENTS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. CLICK, JIM, , ,**

Mailing Address 6403 E. MIRAMAR DR.

City  
TUCSON

State  
AZ

Zip Code  
85715

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JIM CLICK AUTOMOTIVE

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2018

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEFENDARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, JAMES, , ,

Mailing Address 100 GUEST STREET

City  
BRIGHTONState  
MAZip Code  
02135FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW BALANCEOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2018

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIAMOND, DONALD, R, ,

Mailing Address 2200 E. RIVER ROAD  
SUITE 115City  
TUCSONState  
AZZip Code  
85718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DIAMOND VENTURESOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2018

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUBROFF, CHARLES, , ,

Mailing Address 9616 EAST AW TILLINGHAST ROAD

City  
SCOTTSDALEState  
AZZip Code  
85262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAGAMORE CAPITAL LLCOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2018

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

85000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. HIGHWAY 76 LLC**

Mailing Address 1209 ORANGE STREET

City  
WILIMINGTON

State  
DE

Zip Code  
19801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. HITCHCOCK, FREDERICK, E, ,**

Mailing Address 9101 ALTA DR  
UNIT 1702

City  
LAS VEGAS

State  
NV

Zip Code  
89145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HITCHCOCK AUTOMOTIVE RESOURCES

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 05 / 2018

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. HOLLAND, HOMER, J, ,**

Mailing Address 8300 E. DIXILETA DRIVE  
UNIT 201

City  
SCOTTSDALE

State  
AZ

Zip Code  
85266

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOLLAND PARTNERS, INC.

Occupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2018

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

DEFENDARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KASSER, I, MICHAEL, ,

Mailing Address 3573 E. SUNRISE DRIVE  
 SUITE 225

City  
 TUCSON

State  
 AZ

Zip Code  
 85718

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 HOLUALOA ARIZONA, INC.

Occupation (for Individual)  
 PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2018

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOPEZ, HUMBERTO, S, ,

Mailing Address 3901 E. BROADWAY AVE

City  
 TUCSON

State  
 AZ

Zip Code  
 85711

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 HSL PROPERTIES

Occupation (for Individual)  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2018

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUEBKE, RICHARD, , ,

Mailing Address 6500 NORTH SAINT ANDREWS DRIVE

City  
 TUCSON

State  
 AZ

Zip Code  
 85718

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 PIMA MEDICAL INSTITUTE

Occupation (for Individual)  
 CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2018

Transaction ID : SA11AI.4154

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

75000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCLELLAND, W., KENT, ,**

Mailing Address 4750 N. 53RD STREET

City  
PHOENIX

State  
AZ

Zip Code  
85018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHAMROCK FOODS CO

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2018

Transaction ID : SA11AI.4162

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBERNDORF, WILLIAM, E, ,**

Mailing Address 101 WALNUT ST.

City

SAN FRANCISCO

State

CA

Zip Code

94118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OBERNDORF ENTERPRISES, LLC

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2018

Transaction ID : SA11AI.4156

Amount of Each Receipt this Period

150000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUTHERFORD, MICHAEL, , ,**

Mailing Address 173 CARL HAYDEN DRIVE

City

SIERRA VISTA

State

AZ

Zip Code

85635

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RUTHERFORD DIVERSIFIED INDUSTR

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2018

Transaction ID : SA11AI.4152

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

165000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SARVER, ROBERT, G, ,**

Mailing Address ONE E. WASHINGTON ST.  
STE. 1400

City  
PHOENIX

State  
AZ

Zip Code  
85004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTERN ALLIANCE BANK

Occupation (for Individual)  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 04 / 2018

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SERVICES GROUP OF AMERICA**

Mailing Address PO BOX 25109

City

SCOTTSDALE

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2018

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

75000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SICARI, JOE, , ,**

Mailing Address 25439 N 89TH STREET

City

SCOTTSDALE

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2018

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEFENDARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SILVERMAN, JEFFREY, , ,

Mailing Address 1445 16TH ST APT 1102

City  
MIAMI BEACH

State  
FL

Zip Code  
33139

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AGMAN PARTNERS

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2018

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEPHENS, WARREN, A, ,

Mailing Address 111 CENTER ST  
STE 200

City  
LITTLE ROCK

State  
AR

Zip Code  
72201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEPHENS, INC.

Occupation (for Individual)  
CHAIRMAN, PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2018

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SYMINGTON, FIFE, , , III

Mailing Address 10645 N TATUM BLVD  
200-514

City  
PHOENIX

State  
AZ

Zip Code  
85028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
ENTREPRENUER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2018

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

151000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEFENDARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VOCATIONAL TRAINING INSTITUTE, INC.**

Mailing Address 40 NORTH SWAN ROAD  
 STE 100

City  
 TUCSON

State  
 AZ

Zip Code  
 85711

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2018

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITEMAN, JEFF, , ,**

Mailing Address 1725 S. COUNTRY CLUB DR.

City  
 MESA

State  
 AZ

Zip Code  
 85210

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 EMPIRE SOUTHWEST

Occupation (for Individual)  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2018

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITEMAN, JEFF, , ,**

Mailing Address 1725 S. COUNTRY CLUB DR.

City  
 MESA

State  
 AZ

Zip Code  
 85210

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 EMPIRE SOUTHWEST

Occupation (for Individual)  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2018

Transaction ID : SA11AI.4151

Amount of Each Receipt this Period

75000.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

125000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 22  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

<b>A.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>WILSON, DAVID, , ,</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>06 / 06 / 2018</div> </div>	
Mailing Address 100 ROCKLEDGE RD		<b>Transaction ID : SA11AI.4167</b>	
City LAGUNA BEACH	State CA	Zip Code 92651	Amount of Each Receipt this Period <div>24000.00</div>
FEC ID number of contributing federal political committee. <div>C</div>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) TOYOTA OF ORANGE	Occupation (for Individual) CAR SALESMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>24000.00</div>		
<b>B.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address		Amount of Each Receipt this Period <div></div>	
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <div>C</div>			
Name of Employer (for Individual)	Occupation (for Individual)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div></div>		
<b>C.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address		Amount of Each Receipt this Period <div></div>	
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <div>C</div>			
Name of Employer (for Individual)	Occupation (for Individual)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <div></div>		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		<div>24000.00</div>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶		<div>1105000.00</div>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2018

FEC Identification Number

**C****Transaction ID : SB21B.4174**

Amount of Each Disbursement this Period

4000.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		13		2018

FEC Identification Number

**C****Transaction ID : SB21B.4176**

Amount of Each Disbursement this Period

4000.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2018

FEC Identification Number

**C****Transaction ID : SB21B.4177**

Amount of Each Disbursement this Period

200.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8201.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2018

FEC Identification Number

**C** **Transaction ID : SB21B.4180**

Amount of Each Disbursement this Period

 1000.30☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2018

FEC Identification Number

**C** **Transaction ID : SB21B.4185**

Amount of Each Disbursement this Period

 1000.30☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		01		2018

FEC Identification Number

**C** **Transaction ID : SB21B.4200**

Amount of Each Disbursement this Period

 1400.60☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 3401.20



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	06	/	2018

FEC Identification Number

**C****Transaction ID : SB21B.4201**

Amount of Each Disbursement this Period

960.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	11	/	2018

FEC Identification Number

**C****Transaction ID : SB21B.4204**

Amount of Each Disbursement this Period

1000.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	12	/	2018

FEC Identification Number

**C****Transaction ID : SB21B.4208**

Amount of Each Disbursement this Period

200.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2160.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	1	8		

Mailing Address 5555 HILTON AVE.

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4210**

Amount of Each Disbursement this Period

2000.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BMO CONSULTING LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	8		

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
COMPLIANCE CONSULTING / POSTAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4190**

Amount of Each Disbursement this Period

1757.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BMO CONSULTING LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	1	8		

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4205**

Amount of Each Disbursement this Period

975.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4732.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. DMM MEDIA**Mailing Address 1911 N. FORT MYER DRIVE  
STE 400City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
MEDIA PRODUCTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	1	8		

FEC Identification Number

**C****Transaction ID : SB21B.4207**

Amount of Each Disbursement this Period

5715.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FREEDOM FORCE, LLC**

Mailing Address 1050 CONNECTICUT AVENUE, NW

City  
WASHINGTONState  
DCZip Code  
20035Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	8		

FEC Identification Number

**C****Transaction ID : SB21B.4192**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FREEDOM FORCE, LLC**

Mailing Address 1050 CONNECTICUT AVENUE, NW

City  
WASHINGTONState  
DCZip Code  
20035Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	1	8		

FEC Identification Number

**C****Transaction ID : SB21B.4202**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30715.42

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. LOVAS CO, LLC**Mailing Address 6635 W. HAPPY VALLEY RD.  
SUITE A-104, PMB 198City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2018

FEC Identification Number

**C****Transaction ID : SB21B.4175**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LOVAS CO, LLC**Mailing Address 6635 W. HAPPY VALLEY RD.  
SUITE A-104, PMB 198City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

FEC Identification Number

**C****Transaction ID : SB21B.4186**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LOVAS CO, LLC**Mailing Address 6635 W. HAPPY VALLEY RD.  
SUITE A-104, PMB 198City  
GLENDALEState  
AZZip Code  
85310Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		01		2018

FEC Identification Number

**C****Transaction ID : SB21B.4199**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. MARSON MEDIA**

Mailing Address 330 E THOMAS ROAD

City  
PHOENIXState  
AZZip Code  
85012Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	1	8		

FEC Identification Number

**C** **Transaction ID : SB21B.4188**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARSON MEDIA**

Mailing Address 330 E THOMAS ROAD

City  
PHOENIXState  
AZZip Code  
85012Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	8		

FEC Identification Number

**C** **Transaction ID : SB21B.4193**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARSON MEDIA**

Mailing Address 330 E THOMAS ROAD

City  
PHOENIXState  
AZZip Code  
85012Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	1	8		

FEC Identification Number

**C** **Transaction ID : SB21B.4211**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 15000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEFENDARIZONA**

Full Name (Last, First, Middle Initial)

**A. PUBLIC OPINION STRATEGIES, LLC**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
05		29		2018

Mailing Address 214 NORTH FAYETTE STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.4195**

Amount of Each Disbursement this Period

31372.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RSM**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		24		2018

Mailing Address 2375 E CAMELBACK RD  
SUITE 600City  
PHOENIXState  
AZZip Code  
85016Purpose of Disbursement  
MEDIA PRODUCTION

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.4179**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETPOINT CONSULTING, INC.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		26		2018

Mailing Address 66 CANAL CENTER PLAZA NO 555

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.4184**

Amount of Each Disbursement this Period

22230.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

56602.50

**TOTAL** This Period (last page this line number only).....▶

143313.97