

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEDERAL CENTER
2010 APR 20 AM 11:27

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

ADDRESS (number and street) P.O. BOX 6253

Check if different than previously reported. (ACC)

PHOENIX AZ 85005

2. FEC IDENTIFICATION NUMBER **C00346403**

3. IS THIS REPORT NEW (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 Quarterly 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 (12G)

Election on _____ in the State of _____

(d) 30-Day Post-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 03 31 2010

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

Type or Print Name of Treasurer Dave Schroder

Signature of Treasurer Electronically Filed by Dave Schroder Date 4 15 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Report Covering the Period: From:

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 0 1 | 0 1 | 2 0 1 0 |

 To:

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 0 3 | 3 1 | 2 0 1 0 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | |
|--|---|-----------------------------------|---|----------|---|----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 1 0</td></tr></table> | Y Y Y Y | 2 0 1 0 | <table border="1" style="width: 100%;"><tr><td> </td></tr></table> | | <table border="1" style="width: 100%;"><tr><td align="right">32188.66</td></tr></table> | 32188.66 |
| Y Y Y Y | | | | | | |
| 2 0 1 0 | | | | | | |
| | | | | | | |
| 32188.66 | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | <table border="1" style="width: 100%;"><tr><td align="right">32188.66</td></tr></table> | 32188.66 | | | | |
| 32188.66 | | | | | | |
| (c) Total Receipts (from Line 19) | <table border="1" style="width: 100%;"><tr><td align="right">4066.29</td></tr></table> | 4066.29 | <table border="1" style="width: 100%;"><tr><td align="right">4066.29</td></tr></table> | 4066.29 | | |
| 4066.29 | | | | | | |
| 4066.29 | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | <table border="1" style="width: 100%;"><tr><td align="right">36254.95</td></tr></table> | 36254.95 | <table border="1" style="width: 100%;"><tr><td align="right">36254.95</td></tr></table> | 36254.95 | | |
| 36254.95 | | | | | | |
| 36254.95 | | | | | | |
| 7. Total Disbursements (from Line 31) | <table border="1" style="width: 100%;"><tr><td align="right">11887.12</td></tr></table> | 11887.12 | <table border="1" style="width: 100%;"><tr><td align="right">11887.12</td></tr></table> | 11887.12 | | |
| 11887.12 | | | | | | |
| 11887.12 | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <table border="1" style="width: 100%;"><tr><td align="right">24367.83</td></tr></table> | 24367.83 | <table border="1" style="width: 100%;"><tr><td align="right">24367.83</td></tr></table> | 24367.83 | | |
| 24367.83 | | | | | | |
| 24367.83 | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | <table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table> | 0.00 | | | | |
| 0.00 | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | <table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table> | 0.00 | | | | |
| 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

10030310033

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | W | Y |
| 2 | 0 | 1 | 0 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | W | Y |
| 2 | 0 | 1 | 0 |

I. Receipts

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

| | | |
|---|---------|---------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 0.00 | 0.00 |
| (ii) Unitemized | 4065.00 | 4065.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 4065.00 | 4065.00 |
| (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) | 4065.00 | 4065.00 |
| 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.) | 1.29 | 1.29 |
| 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 Transfer (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)) | 4066.29 | 4066.29 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 4066.29 | 4066.29 |

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

| | | |
|---|----------|----------|
| 21. Operating Expenditures: | | |
| (a) Shared 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..... | 6737.12 | 6737.12 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 6737.12 | 6737.12 |
| 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 Expenditure (use Schedule E)..... | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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..... | 5150.00 | 5150.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared 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)).. | 11887.12 | 11887.12 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 11887.12 | 11887.12 |

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 4065.00 | 4065.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4065.00 | 4065.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 6737.12 | 6737.12 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 6737.12 | 6737.12 |

10030310036

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 12

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <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 |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Arizona Capitol Reports | | Transaction ID: SB21B.5299 | |
| Mailing Address P.O. Box 2260 | | Date of Disbursement | |
| City Phoenix State AZ Zip Code 85002 | | 01 / 23 / 2010 | |
| Purpose of Disbursement Legislative Bill Tracking | | Amount of Each Disbursement this Period | |
| Candidate Name | | 1900.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Category/Type | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Arizona Capitol Times | | Transaction ID: SB21B.5301 | |
| Mailing Address 1835 W. Adams Street | | Date of Disbursement | |
| City Phoenix State AZ Zip Code 85007 | | 01 / 23 / 2010 | |
| Purpose of Disbursement Supscription | | Amount of Each Disbursement this Period | |
| Candidate Name | | 505.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Category/Type | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Swann and Associates LLC | | Transaction ID: SB21B.5302 | |
| Mailing Address 7131 W. Ray Road, #39-341 | | Date of Disbursement | |
| City Chandler State AZ Zip Code 85226 | | 02 / 10 / 2010 | |
| Purpose of Disbursement Government Relations | | Amount of Each Disbursement this Period | |
| Candidate Name | | 1250.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Category/Type | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | 3655.00 |
| TOTAL This Period (last page this line number only) | |

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 7 / 12

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <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)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Swann and Associates LLC | | Transaction ID: SB21B.5304 Date of Disbursement MM / DD / YYYY 03 / 09 / 2010 | |
| Mailing Address 7131 W. Ray Road, #39-341 | | Amount of Each Disbursement this Period 2500.00 | |
| City Chandler State AZ Zip Code 85226 | Purpose of Disbursement Government Relations | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) B. Verizon Wireless | | Transaction ID: SB21B.5303 Date of Disbursement MM / DD / YYYY 02 / 11 / 2010 | |
| Mailing Address P.O. Box 790293 | | Amount of Each Disbursement this Period 134.42 | |
| City St. Louis State MO Zip Code 63179 | Purpose of Disbursement Cellular | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. Verizon Wireless | | Transaction ID: SB21B.5305 Date of Disbursement MM / DD / YYYY 03 / 12 / 2010 | |
| Mailing Address P.O. Box 790293 | | Amount of Each Disbursement this Period 132.42 | |
| City St. Louis State MO Zip Code 63179 | Purpose of Disbursement Cellular | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | 2766.84 |
| TOTAL This Period (last page this line number only) | 6421.84 |

10030510038

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 12

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Full Name (Last, First, Middle Initial) A. AZ Secretary of State | | Transaction ID: SB29.5307 | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 1700 W. Washington | | Date of Disbursement | | | | | | | | | | | | | | | | | | | | | |
| City Phoenix State AZ Zip Code 85007 | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 2 | 4 | / | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 2 | / | 2 | 4 | / | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <table border="1"> <tr> <td>100.00</td> </tr> </table> | | 100.00 | | | | | | | | | | | | | | | | | | | |
| 100.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Full Name (Last, First, Middle Initial) B. BARTO, NANCY FOR SENATE | | Transaction ID: SB29.5273 | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 3631 E. Rockwook Drive | | Date of Disbursement | | | | | | | | | | | | | | | | | | | | | |
| City Phoenix State AZ Zip Code 85050 | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | / | 0 | 4 | / | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 1 | / | 0 | 4 | / | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| Purpose of Disbursement CONTRIBUTION | | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <table border="1"> <tr> <td>500.00</td> </tr> </table> | | 500.00 | | | | | | | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Full Name (Last, First, Middle Initial) C. Crandall, Rich Senate Expl. Committee | | Transaction ID: SB29.5284 | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O.Box 31990 | | Date of Disbursement | | | | | | | | | | | | | | | | | | | | | |
| City Mesa State AZ Zip Code 85272 | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | / | 0 | 5 | / | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 1 | / | 0 | 5 | / | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <table border="1"> <tr> <td>500.00</td> </tr> </table> | | 500.00 | | | | | | | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|---|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1100.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

1003031003

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 9 / 12

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

| | | |
|--|--|---|
| A. Driggs 2010 Full Name (Last, First, Middle Initial) Mailing Address 4231 E. Clarendon Avenue City Phoenix State AZ Zip Code 85018 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: SB29.5280 Date of Disbursement 01 / 05 / 2010 Amount of Each Disbursement this Period 500.00 Category/Type |
|--|--|---|

| | | |
|--|--|---|
| B. Horne, Tom for Attorney General Full Name (Last, First, Middle Initial) Mailing Address 2824 E. Mission Lane City Phoenix State AZ Zip Code 85028 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: SB29.5296 Date of Disbursement 03 / 12 / 2010 Amount of Each Disbursement this Period 500.00 Category/Type |
|--|--|---|

| | | |
|--|--|---|
| C. Lopez, Linda for State Senate Full Name (Last, First, Middle Initial) Mailing Address 1506 E. Melridge Street City Tucson State AZ Zip Code 85706 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: SB29.5292 Date of Disbursement 01 / 05 / 2010 Amount of Each Disbursement this Period 300.00 Category/Type |
|--|--|---|

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1300.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

10050310040

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

| | | | | | | | |
|---|--------------------------------------|------------------------------------|------------------------------------|------------------------------------|--|------------------------------------|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | | | | | PAGE 10 / 12 |
| | <input type="checkbox"/> 21b 27 | <input type="checkbox"/> 22 28a | <input type="checkbox"/> 23 28b | <input type="checkbox"/> 24 28c | <input checked="" type="checkbox"/> 25 29 | <input type="checkbox"/> 26 30b | |

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Murphy, Rick Expl. Comm. | | Transaction ID: SB29.5286 Date of Disbursement MM / DD / YYYY 01 / 05 / 2010 | |
| Mailing Address 13265 N. 73rd Avenue | | Amount of Each Disbursement this Period 300.00 | |
| City Peoria State AZ Zip Code 85381 | Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |
| State: District: | | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Nelson, Friends of John | | Transaction ID: SB29.5275 Date of Disbursement MM / DD / YYYY 01 / 05 / 2010 | |
| Mailing Address 5433 N. 106th Avenue | | Amount of Each Disbursement this Period 400.00 | |
| City Glendale State AZ Zip Code 85307 | Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |
| State: District: | | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Committee to Elect Russell Pearce | | Transaction ID: SB29.5278 Date of Disbursement MM / DD / YYYY 01 / 05 / 2010 | |
| Mailing Address 1247 E. Inca | | Amount of Each Disbursement this Period 500.00 | |
| City Mesa State AZ Zip Code 85203 | Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |
| State: District: | | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1200.00 |
| TOTAL This Period (last page this line number only) ▶ | |

10030310041

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 12

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Pierce, Steve for Senate 2010 | | Transaction ID: SB29.5288 Date of Disbursement MM / DD / YYYY 01 / 05 / 2010 | |
| Mailing Address 1400 N. 7V Ranch Road | | Amount of Each Disbursement this Period 500.00 | |
| City Prescott State AZ Zip Code 86305 | Purpose of Disbursement Contribution | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Sinema 2010 Exploratory | | Transaction ID: SB29.5294 Date of Disbursement MM / DD / YYYY 01 / 05 / 2010 | |
| Mailing Address 335 W. Windsor Avenue | | Amount of Each Disbursement this Period 300.00 | |
| City Phoenix State AZ Zip Code 85003 | Purpose of Disbursement Campaign Contribution | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Stevens, David 2010 | | Transaction ID: SB29.5276 Date of Disbursement MM / DD / YYYY 01 / 05 / 2010 | |
| Mailing Address 4145 S. Comanche Drive | | Amount of Each Disbursement this Period 250.00 | |
| City Sierra Vista State AZ Zip Code 85650 | Purpose of Disbursement Contribution | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1050.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

10050310042

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 12

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Full Name (Last, First, Middle Initial)
A. Weiers, Jim 2010

Mailing Address 16022 N. 37th Avenue

City Peoria State AZ Zip Code 85053

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB29.5290
Date of Disbursement
01 / 05 / 2010

Amount of Each Disbursement this Period
500.00

10030310043

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | 500.00 |
| TOTAL This Period (last page this line number only) | 5150.00 |

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

| | |
|--|---|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
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| <input checked="" type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) 4/15/10 |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| | Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

Jm (0)
 PREPARER
 (3/2005)

4/20/10
 DATE PREPARED

10030310044