



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Kiehne for Congress**

Report Covering the Period: From:  /  /  To:  /  /

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 93150.40                | 327166.28                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 93150.40                | 327166.28                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 130820.65               | 290443.34                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 299.81                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 130820.65               | 290143.53                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 337022.75               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 300000.00               |                                    |

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Kiehne for Congress**

Report Covering the Period: From:  /  /  To:  /  /

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                                       |  |
| (a) Individuals/Persons Other Than Political Committees  |                                       |  |
| (i) Itemized (use Schedule A).....   | 52499.00                              | 273947.74                                  |
| (ii) Unitemized.....   | 2795.00                               | 10362.14                                   |
| (iii) TOTAL of contributions from individuals ▶  | 55294.00                              | 284309.88                                  |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees (such as PACs).....   | 2000.00                               | 2000.00                                    |
| (d) The Candidate.....   | 35856.40                              | 40856.40                                   |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 93150.40                              | 327166.28                                  |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>  |                                       |  |
| (a) Made or Guaranteed by the Candidate.....   | 100000.00                             | 300000.00                                  |
| (b) All Other Loans.....   | 0.00                                  | 0.00                                       |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....   | 100000.00                             | 300000.00                                  |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 299.81                                     |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 193150.40                             | 627466.09                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 130820.65                     | 290443.34                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 130820.65                     | 290443.34                          |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 274693.00 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 193150.40 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 467843.40 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 130820.65 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 337022.75 |

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 5 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Dyer**

Mailing Address **PO Box 1009**

City **Fort Davis** State **TX** Zip Code **79734-1009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Rancher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 01 / 2014**

**Transaction ID : A7EAD3A3D3AB24736A6D**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**J.R. Purvis**

Mailing Address **PO Box 10727**

City **Midland** State **TX** Zip Code **79702-7727**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Oil and Gas Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 12 / 2014**

**Transaction ID : AEAE718DE0F1A4622AF9**

Amount of Each Receipt this Period  
**1400.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kathleen Kiehne**

Mailing Address **1920 S Avenue G Apt J**

City **Portales** State **NM** Zip Code **88130-7171**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Information Requested** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 13 / 2014**

**Transaction ID : A3A5D02CCF9EF4A12B4A**

Amount of Each Receipt this Period  
**500.00**

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

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

**2900.00**

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 6 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Menges**

Mailing Address PO Box 842

City Safford State AZ Zip Code 85548-0842

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A9C3C69BC01EF4A728F5**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Troy Shelley**

Mailing Address 900 Marshall Lane

City Socorro State NM Zip Code 87801-5048

FEC ID number of contributing federal political committee. **C**

Name of Employer Shelly Productions Occupation self employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A82894CCB3C504378AB8**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Margaret Pavlich**

Mailing Address 1750 N. Vista dr.

City Flagstaff State AZ Zip Code 86001-1174

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Car Wash Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : A1560EC0A0E574C4F900**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 7 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Farr**

Mailing Address 25 Miles SW of Datil

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Datil | State<br>NM | Zip Code<br>87821 |
|---------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

|                                   |                       |
|-----------------------------------|-----------------------|
| Name of Employer<br>Self Employed | Occupation<br>Rancher |
|-----------------------------------|-----------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : A304D1A7C9D8B4F5BB99**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Judy Prosser**

Mailing Address P.O. Box 190

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Winslow | State<br>AZ | Zip Code<br>86047-0190 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|                                   |                              |
|-----------------------------------|------------------------------|
| Name of Employer<br>Self Employed | Occupation<br>Cattle Rancher |
|-----------------------------------|------------------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : A55F175501682494FBFB**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Roy Tyler**

Mailing Address 3320 S Fortuna Ave

|              |             |                        |
|--------------|-------------|------------------------|
| City<br>Yuma | State<br>AZ | Zip Code<br>85365-4205 |
|--------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|                                   |                          |
|-----------------------------------|--------------------------|
| Name of Employer<br>Self Employed | Occupation<br>Contractor |
|-----------------------------------|--------------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1950.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : A2A1180D5351242ECA18**

Amount of Each Receipt this Period  
700.00

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

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

1950.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |                                  |   |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>Edward Shields</b>  |                                  | Date of Receipt<br>MM / DD / YYYY<br>06 / 01 / 2014 |
| Mailing Address PO Box 4  |                                  | <b>Transaction ID : A9452EE2FCA43459F8BB</b>        |
| City<br>Springerville   | State<br>AZ                      |   |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>100.00        |
| Name of Employer<br>Self Employed   | Occupation<br>Accountant         |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>800.00 |   |

|   |                                  |   |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>Jack Bruton</b>   |                                  | Date of Receipt<br>MM / DD / YYYY<br>04 / 12 / 2014 |
| Mailing Address PO Box 205  |                                  | <b>Transaction ID : A4C9B9A1C4F494806B9E</b>        |
| City<br>Magdalena   | State<br>NM                      |   |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer<br>Self  | Occupation<br>Cattle Rancher     |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |   |

|   |                                  |   |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>J. Mike Caudle</b>  |                                  | Date of Receipt<br>MM / DD / YYYY<br>04 / 01 / 2014 |
| Mailing Address PO Box 11108  |                                  | <b>Transaction ID : A226FE867616C409CB62</b>        |
| City<br>Midland   | State<br>TX                      |   |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer<br>Apache Corp   | Occupation<br>Petroleum Landman  |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1100.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 9 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry Elkins**

Mailing Address **PO Box 2326**

City **Milan** State **NM** Zip Code **87021-2326**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Rancher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 12 / 2014**

**Transaction ID : A3FE2B6E0B1B54895910**

Amount of Each Receipt this Period  
**300.00**

**B.** Full Name (Last, First, Middle Initial)  
**Abelardo Martinez**

Mailing Address **PO Box 2350**

City **Pinetop** State **AZ** Zip Code **85935**

FEC ID number of contributing federal political committee. **C**

Name of Employer **McDonalds** Occupation **Franchisor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : A131C2D6D39EB4A2BAC2**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**J.R. Purvis**

Mailing Address **PO Box 10727**

City **Midland** State **TX** Zip Code **79702-7727**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Oil and Gas Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 12 / 2014**

**Transaction ID : A6C1C8F05D2BD45D4B25**

Amount of Each Receipt this Period  
**2600.00**

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

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

**5400.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 10 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Farr**

Mailing Address 25 Miles SW of Datil

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Datil | State<br>NM | Zip Code<br>87821 |
|---------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

|                                   |                       |
|-----------------------------------|-----------------------|
| Name of Employer<br>Self Employed | Occupation<br>Rancher |
|-----------------------------------|-----------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : A136381E861A54F5FAA4**

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Wheeler**

Mailing Address PO Box 11969

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Chandler | State<br>AZ | Zip Code<br>85248-0017 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|   |                      |
|---|----------------------|
| Name of Employer<br>Information Requested | Occupation<br>Lender |
|---|----------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : ABF10812A8B6B4879905**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Alan Kiehne**

Mailing Address 197 NM 88

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Portales | State<br>NM | Zip Code<br>88130-9293 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|   |                       |
|---|-----------------------|
| Name of Employer<br>World Series of Team Roping | Occupation<br>Rancher |
|---|-----------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : AEE009D3EA5314C1DB6B**

Amount of Each Receipt this Period  
2600.00

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

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

3700.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 11 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Travis Kiehne</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 15 / 2014 |
| Mailing Address PO Box 246  |                                   | <b>Transaction ID : AF431F664E31C47CEBD8</b>             |
| City<br>Magdalena   | State<br>NM                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2000.00            |
| Name of Employer<br>Self Employed   | Occupation<br>Rancher             |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2000.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Alan Kiehne</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 27 / 2014 |
| Mailing Address 197 NM 88   |                                   | <b>Transaction ID : AF99F9421200C4B808FF</b>             |
| City<br>Portales  | State<br>NM                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>400.00             |
| Name of Employer<br>World Series of Team Roping   | Occupation<br>Rancher             |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>3000.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Randy Chavez</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 25 / 2014 |
| Mailing Address HC 32 Box 303   |                                  | <b>Transaction ID : A44D1EABFF69E4083848</b>             |
| City<br>Quemado   | State<br>NM                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00             |
| Name of Employer<br>State of New Mexico   | Occupation<br>Supervisor         |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2900.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 12 OF 47 |
|   | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A. George Ortega**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6900 N Blanco Wash Trail  
 City Marana State AZ Zip Code 85653-9496  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Restaurant Owner  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : A7399F26DD06042DFA2B**  
 Amount of Each Receipt this Period  
 1000.00

**B. Edward Shields**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 4  
 City Springerville State AZ Zip Code 85938-0004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Accountant  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014  
**Transaction ID : AD9ED44EE0B794C84BF7**  
 Amount of Each Receipt this Period  
 200.00

**C. Danette Walker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 981  
 City Eagar State AZ Zip Code 85925-0981  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Housewife Occupation Housewife  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014  
**Transaction ID : A916F3B663E5440D3BB5**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

1700.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 13 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Buddy Tharp**

Mailing Address 1208 Rancho Algodones

City Las Cruces State NM Zip Code 88007-5925

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : ADF2903E5741A478CB9B**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Kiehne**

Mailing Address 1920 S Avenue G Apt J

City Portales State NM Zip Code 88130-7171

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A39B35902AAE141A2BDF**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**James Kiehne**

Mailing Address 21403 US Highway 62/180

City El Paso State TX Zip Code 79938-8150

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Cattle Rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A7A48DD1397BF4BF2A46**

Amount of Each Receipt this Period  
 2000.00

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

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

3000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 14 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |                                  |   |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>Ralph Wong</b>  |                                  | Date of Receipt<br>MM / DD / YYYY<br>05 / 05 / 2014 |
| Mailing Address PO Box 99   |                                  | <b>Transaction ID : AB770519C087B4D51912</b>        |
| City<br>Marana  | State<br>AZ                      |   |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer<br>Retired   | Occupation<br>Retired            |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |   |

|   |                                   |   |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>H. Jay Platt</b>  |                                   | Date of Receipt<br>MM / DD / YYYY<br>05 / 10 / 2014 |
| Mailing Address PO Box 426  |                                   | <b>Transaction ID : A8FC10F6D9ACB407E8FD</b>        |
| City<br>Saint Johns   | State<br>AZ                       |   |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00       |
| Name of Employer<br>Self Employed   | Occupation<br>Cattle Ranching     |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1500.00 |   |

|   |                                   |   |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>Robb Hatch</b>  |                                   | Date of Receipt<br>MM / DD / YYYY<br>05 / 09 / 2014 |
| Mailing Address PO Box 91   |                                   | <b>Transaction ID : A2B2CA4316EBE4CD0A6A</b>        |
| City<br>Snowflake   | State<br>AZ                       |   |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00       |
| Name of Employer<br>Hatch Motor Company   | Occupation<br>Owner               |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 4100.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 15 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ty Yost**

Mailing Address **PO Box 80762**

City **Billings** State **MT** Zip Code **59108-0762**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Stock Contractor/Producer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : A58AFD75F8959468EBAC**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Donald Lann**

Mailing Address **PO Box 155**

City **Saint Johns** State **AZ** Zip Code **85936-0155**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Cattle Rancher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 01 / 2014**

**Transaction ID : A0E5BB0432F8C49C3934**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Carol DalMolin**

Mailing Address **2 DalMolin Hgts**

City **Globe** State **AZ** Zip Code **85501-2649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Globe Unified School District** Occupation **Procurement Specialist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 13 / 2014**

**Transaction ID : ABF89F01D0481424A8FB**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**250.00**

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

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

\_\_\_\_\_

\_\_\_\_\_

**1250.00**

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

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

FOR LINE NUMBER: PAGE 16 OF 47  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Hartwell**

Mailing Address 540 W Airport Rd., Ste. A-2

City State Zip Code  
Casa Grande AZ 85222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dog Bone LLC self employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A58EAE9032D0F4E06A8F**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Jerry Lilly**

Mailing Address 418 N 164th St.

City State Zip Code  
Gilbert AZ 85234-5215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Trio Forest Products Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : AA8237E3585A842B1BF2**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Bonnie Kiehne**

Mailing Address 21403 US Highway 62/180

City State Zip Code  
El Paso TX 79938-8150

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A3CF457AE2EA44DE39A0**

Amount of Each Receipt this Period  
2000.00

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

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

3300.00



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

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

FOR LINE NUMBER: PAGE 17 OF 47  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gertrude Hickman**

Mailing Address 11141 W Laurelwood Ln.

City Avondale State AZ Zip Code 85392-3932

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : ABBFAD0DA9C6B46D8AC/**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Robb Hatch**

Mailing Address PO Box 91

City Snowflake State AZ Zip Code 85937-0091

FEC ID number of contributing federal political committee. **C**

Name of Employer Hatch Motor Company Occupation Owner

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : A9E98007D20CF4F2B8AA**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Ron Tyler**

Mailing Address 3320 S Fortuna Ave.

City Yuma State AZ Zip Code 85365-4205

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2014

**Transaction ID : A7907D5775A51436088F**

Amount of Each Receipt this Period  
700.00

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

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

3550.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 18 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bonnie Kiehne**

Mailing Address 21403 US Highway 62/180

City El Paso State TX Zip Code 79938-8150

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : ABE1F84A2AE5944A49C1**

Amount of Each Receipt this Period  
1100.00

**B.** Full Name (Last, First, Middle Initial)  
**Gloria Long**

Mailing Address 148 E Peach St.

City Safford State AZ Zip Code 85546-9140

FEC ID number of contributing federal political committee. **C**

Name of Employer Vista Recycling Occupation self employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A7E25EA9B1A2D4F009F6**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Stanley Jobe**

Mailing Address 1150 Southview Dr.

City El Paso State TX Zip Code 79928-5240

FEC ID number of contributing federal political committee. **C**

Name of Employer Jobe Concrete Occupation CEO/Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : AF3CB955BA65549178F8**

Amount of Each Receipt this Period  
500.00

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

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

1850.00

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 19 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Loyd Powell**

Mailing Address 5949 Sherry Lane, Suite 850

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Dallas | TX    | 75225-8060 |

FEC ID number of contributing federal political committee. **C**

|                  |                         |
|------------------|-------------------------|
| Name of Employer | Occupation              |
| Self             | Oil and Gas Investments |

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A427066AF96B4466582A**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Dick Henderson**

Mailing Address 651 N Inland Shores

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Flagstaff | AZ    | 86004-7831 |

FEC ID number of contributing federal political committee. **C**

|                  |                     |
|------------------|---------------------|
| Name of Employer | Occupation          |
| Self Employed    | Building Contractor |

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : A621CD5A0354B4432A87**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Darrell Welty**

Mailing Address PO Box 75

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Winston | NM    | 87943-0075 |

FEC ID number of contributing federal political committee. **C**

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
| Self Employed    | Rancher    |

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : AF91701583748B897C**

Amount of Each Receipt this Period  
500.00

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

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

3350.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 20 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Kiehne**

Mailing Address 21403 US Highway 62/180

City El Paso State TX Zip Code 79938-8150

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Cattle Rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A85C7BE969FD74D4AB46**

Amount of Each Receipt this Period  
1100.00

**B.** Full Name (Last, First, Middle Initial)  
**James Dyer**

Mailing Address PO Box 1009

City Fort Davis State TX Zip Code 79734-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1199.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : A775C08B3F5924A07898**

Amount of Each Receipt this Period  
199.00

**C.** Full Name (Last, First, Middle Initial)  
**Gordon Nikolaus Jr.**

Mailing Address 939 Apple Blossom Ln

City Snowflake State AZ Zip Code 85937-6251

FEC ID number of contributing federal political committee. **C**

Name of Employer SRP Occupation Mechanic

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A13FCA6FA3C4F4CCD836**

Amount of Each Receipt this Period  
500.00

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

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

1799.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 21 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Farr**

Mailing Address 25 Miles SW of Datil

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Datil | State<br>NM | Zip Code<br>87821 |
|---------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

|                                   |                       |
|-----------------------------------|-----------------------|
| Name of Employer<br>Self Employed | Occupation<br>Rancher |
|-----------------------------------|-----------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : ADDF27090A5F64F7D8FB**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeanie McClaran**

Mailing Address PO Box 482

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Taylor | State<br>AZ | Zip Code<br>85939-0482 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A6E4D3F297F0E4E7FBCB**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Loyd Powell**

Mailing Address 5949 Sherry Lane, Suite 850

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Dallas | State<br>TX | Zip Code<br>75225-8060 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

|   |                                     |
|---|-------------------------------------|
| Name of Employer<br>Information Requested | Occupation<br>Information Requested |
|---|-------------------------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : A3FAF4C50CDFE41519B6**

Amount of Each Receipt this Period  
2400.00

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

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

3050.00

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

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

FOR LINE NUMBER: PAGE 22 OF 47  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy Robinson**

Mailing Address **PO Box 11138**

City **Casa Grande** State **AZ** Zip Code **85230**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Empire Southwest** Occupation **Machinery Sales**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 02 / 2014**

**Transaction ID : A42262B4C3EF94AF88AA**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**John Sharp**

Mailing Address **PO Box 737**

City **Estancia** State **NM** Zip Code **87016-0737**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Cattle Rancher**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 01 / 2014**

**Transaction ID : ABC1ACE93CCCC4C7E8B5**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Kent Winterton**

Mailing Address **3311 S 157th Pl.**

City **Gilbert** State **AZ** Zip Code **85297-2020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Farmer**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : A4B31625CF6DD4B06B9F**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 23 OF 47 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dick Henderson**

Mailing Address 651 N Inland Shores

City State Zip Code  
Flagstaff AZ 86004-7831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Building Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : A81223F2A5A61456EA77**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Tammy Kiehne**

Mailing Address PO Box 246

City State Zip Code  
Magdalena NM 87825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Cattle Rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : A46F3B2155A2B4126ADA**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2100.00

52499.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 24 OF 47 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Duncan D. Hunter for Congress**

Mailing Address PO Box 1545

City State Zip Code  
El Cajon CA 92022-1545

FEC ID number of contributing federal political committee. **C** C00433524

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : A888DF7F6E0B244ECB47**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2000.00

2000.00



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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 25 OF 47 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input checked="" type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Kiehne**

Mailing Address P.O. Box 1974

City State Zip Code  
Eagar AZ 85925-1974

FEC ID number of contributing federal political committee. **C H4AZ01145**

Name of Employer Occupation  
Self Employed Team Roper

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**340856.40**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : AC57D5997EBB54FD289E**

Amount of Each Receipt this Period  
**35856.40**

In-kind: See Below for Itemization

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**35856.40**

**35856.40**

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

|                                      |  |                                     |                                    |
|--------------------------------------|--|-------------------------------------|------------------------------------|
| FOR LINE NUMBER:<br>(check only one) |  | PAGE 26 OF 47                       |                                    |
| <input type="checkbox"/> 11a<br>12   | <input checked="" type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |
|                                      |  | <input type="checkbox"/>            | <input type="checkbox"/> 15        |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Kiehne**

Mailing Address P.O. Box 1974

City State Zip Code  
Eagar AZ 85925-1974

FEC ID number of contributing federal political committee. **C** H4AZ01145

Name of Employer Occupation  
Self Employed Team Roper

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
340856.40

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2014

**Transaction ID : ABA4759ACAEEE4D5EA54**

Amount of Each Receipt this Period  
100000.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

100000.00

100000.00

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 27 OF 47                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Qgiv</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 02 / 2014</b>                                     |
| Mailing Address <b>53 Lake Morton Dr.</b>  |  | Amount of Each Disbursement this Period<br><b>506.51</b><br>Transaction ID : <b>B59C975DCE6FC46728E6</b> |
| City <b>Lakeland</b> State <b>FL</b> Zip Code <b>33801-5344</b>  | Purpose of Disbursement<br><b>Credit Card Processing Fees</b>  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Bill Taylor</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 08 / 2014</b>                                     |
| Mailing Address <b>P.O. Box 292</b>  |  | Amount of Each Disbursement this Period<br><b>240.00</b><br>Transaction ID : <b>B38FA57F821484FAF9E9</b> |
| City <b>Miami</b> State <b>AZ</b> Zip Code <b>85539-0292</b>   | Purpose of Disbursement<br><b>Radio Advertising</b>  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Blue Point LLC</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 11 / 2014</b>                                       |
| Mailing Address <b>35311 N 92nd Way</b>  |  | Amount of Each Disbursement this Period<br><b>16060.00</b><br>Transaction ID : <b>BAE035F25C771476E8EB</b> |
| City <b>Scottsdale</b> State <b>AZ</b> Zip Code <b>85262-1153</b>  | Purpose of Disbursement<br><b>Communication and Direct Mail</b>  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>16806.51</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                 |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 28 OF 47                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Flagstaff Business News</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 24 / 2014                                     |
| Mailing Address 121 E Birch Ave Ste 408  |   | Amount of Each Disbursement this Period<br>400.00<br><b>Transaction ID : B207A232C27C2438DBB7</b> |
| City<br>Flagstaff  | State<br>AZ   |   |
| Zip Code<br>86001-4610   | Purpose of Disbursement<br>Newspaper Advertising  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Bill Taylor</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 24 / 2014                                     |
| Mailing Address P.O. Box 292   |   | Amount of Each Disbursement this Period<br>360.00<br><b>Transaction ID : BB8C0D5F2807C4DD5813</b> |
| City<br>Miami  | State<br>AZ   |   |
| Zip Code<br>85539-0292   | Purpose of Disbursement<br>Radio Advertising  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Print and Pack Express</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 30 / 2014                                      |
| Mailing Address 623 E Florence Blvd  |   | Amount of Each Disbursement this Period<br>2661.22<br><b>Transaction ID : BA946493C2AB14F939C0</b> |
| City<br>Casa Grande  | State<br>AZ   |  |
| Zip Code<br>85122-4153   | Purpose of Disbursement<br>Campaign Promotional Materials   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3421.22 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 29 OF 47 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Connie Pellman</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014                                      |
| Mailing Address 376 W Wheeler Rd.   |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : B55F7F73EDBE2496C83C</b> |
| City<br>Tucson  | State<br>AZ  |  |
| Purpose of Disbursement<br>Payroll  | Candidate Name   | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Cristine Bauserman</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014                                      |
| Mailing Address 12221 E Makohoh Trl.  |  | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : B55C5DE6B9EE649F3816</b> |
| City<br>Tucson  | State<br>AZ  |  |
| Purpose of Disbursement<br>Payroll  | Candidate Name   | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Gaither Martin</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014                                      |
| Mailing Address 184 W 4th Ave   |  | Amount of Each Disbursement this Period<br>7000.00<br><b>Transaction ID : B148867F6619A4758811</b> |
| City<br>Eagar   | State<br>AZ  |  |
| Purpose of Disbursement<br>Payroll  | Candidate Name   | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 10500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 30 OF 47 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Gaither Martin</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014                                     |
| Mailing Address 184 W 4th Ave                                       |   | Amount of Each Disbursement this Period<br>400.00<br><b>Transaction ID : B239869ADDD4C4FC48C2</b> |
| City<br>Eagar   | State<br>AZ   |   |
| Zip Code<br>85925-9895  | Purpose of Disbursement<br>Mileage Reimbursement  | Category/<br>Type   |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  |   |
| <input type="checkbox"/> Other (specify)                            | State: District:  |   |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Qgiv</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 03 / 2014                                    |
| Mailing Address 53 Lake Morton Dr.                        |   | Amount of Each Disbursement this Period<br>53.30<br><b>Transaction ID : BDADCB645281B4DBA9E9</b> |
| City<br>Lakeland  | State<br>FL   |  |
| Zip Code<br>33801-5344                                    | Purpose of Disbursement<br>Credit Card Processing Fees  | Category/<br>Type  |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014                                    | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  |  |
| <input type="checkbox"/> Other (specify)                  | State: District:  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. American Express Merchant Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 05 / 2014                                    |
| Mailing Address 200 Vesey St.   |   | Amount of Each Disbursement this Period<br>34.98<br><b>Transaction ID : B04C48A2F4559447F881</b> |
| City<br>New York  | State<br>NY   |  |
| Zip Code<br>10285-1000  | Purpose of Disbursement<br>Credit Card Processing Fees  | Category/<br>Type  |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  |  |
| <input type="checkbox"/> Other (specify)  | State: District:  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 488.28 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 31 OF 47 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Sign King of Arizona</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 12 / 2014                                      |
| Mailing Address 325 S Westwood Dr<br>Unit 1  |   | Amount of Each Disbursement this Period<br>3079.43<br><b>Transaction ID : B49BCCA6224C84E0C93B</b> |
| City<br>Mesa   | State<br>AZ   |  |
| Zip Code<br>85210-8400   | Purpose of Disbursement<br>Campaign Yard Signs  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Blue Point LLC</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 12 / 2014                                      |
| Mailing Address 35311 N 92nd Way   |   | Amount of Each Disbursement this Period<br>4000.00<br><b>Transaction ID : B7F1187986016427C955</b> |
| City<br>Scottsdale   | State<br>AZ   |  |
| Zip Code<br>85262-1153   | Purpose of Disbursement<br>Communication and Direct Mail  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Flagstaff Business News</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 27 / 2014                                     |
| Mailing Address 121 E Birch Ave Ste 408  |   | Amount of Each Disbursement this Period<br>200.00<br><b>Transaction ID : BE83301DB3634435F9D7</b> |
| City<br>Flagstaff  | State<br>AZ   |   |
| Zip Code<br>86001-4610   | Purpose of Disbursement<br>Newspaper Advertising  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7279.43 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 32 OF 47 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |   |  |   |  |
|---|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Cristine Bauserman</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 28 / 2014 |  |
| Mailing Address 12221 E Makohoh Trl.                                    |   |  | Amount of Each Disbursement this Period<br>2000.00            |  |
| City<br>Tucson  | State<br>AZ   | Zip Code<br>85749-8684   | Transaction ID : <b>B7AAB6D96B3BE427782A</b>                  |  |
| Purpose of Disbursement<br>Payroll Expense                              |   | Category/<br>Type  |   |  |
| Candidate Name  |   |  |   |  |
| Office Sought:  | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:  | District:   |  |   |  |

|   |   |  |   |  |
|---|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Gaither Martin</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 29 / 2014 |  |
| Mailing Address 184 W 4th Ave                                       |   |  | Amount of Each Disbursement this Period<br>7000.00            |  |
| City<br>Eagar   | State<br>AZ   | Zip Code<br>85925-9895   | Transaction ID : <b>B7C9A8AAD7CB24938B47</b>                  |  |
| Purpose of Disbursement<br>Payroll Expense                          |   | Category/<br>Type  |   |  |
| Candidate Name  |   |  |   |  |
| Office Sought:  | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:  | District:   |  |   |  |

|  |   |  |   |  |
|--|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Petition Pros Inc</b> |   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 29 / 2014 |  |
| Mailing Address 527 West Whiteley                                      |   |  | Amount of Each Disbursement this Period<br>2540.00            |  |
| City<br>Apache Junction  | State<br>AZ   | Zip Code<br>85120-9458   | Transaction ID : <b>BC19259FD7AE24DF0A21</b>                  |  |
| Purpose of Disbursement<br>Petition Gathering Expense                  |   | Category/<br>Type  |   |  |
| Candidate Name   |   |  |   |  |
| Office Sought:   | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:   | District:   |  |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 11540.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |



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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 33 OF 47 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Arent Fox LLP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 03 / 2014                                      |
| Mailing Address 1717 K Street NW  |  | Amount of Each Disbursement this Period<br>5624.20<br><b>Transaction ID : B078C72179D984515BA3</b> |
| City Washington   | State DC Zip Code 20006-5343   |  |
| Purpose of Disbursement<br>Legal, accounting and administration   |  | Category/<br>Type  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Qgiv</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 03 / 2014                                     |
| Mailing Address 53 Lake Morton Dr.  |  | Amount of Each Disbursement this Period<br>300.29<br><b>Transaction ID : BC3BFE516EC034C84874</b> |
| City Lakeland   | State FL Zip Code 33801-5344   |   |
| Purpose of Disbursement<br>Credit Card Processing Fees  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Gaither Martin</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 04 / 2014                                     |
| Mailing Address 184 W 4th Ave   |  | Amount of Each Disbursement this Period<br>633.23<br><b>Transaction ID : B4E33C80F90354AD7801</b> |
| City Eagar  | State AZ Zip Code 85925-9895   |   |
| Purpose of Disbursement<br>Mileage Reimbursement  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6557.72 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 34 OF 47                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. American Express Merchant Services</b>                          |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>06 / 05 / 2014</b>                                    |
| Mailing Address <b>200 Vesey St.</b>   |  | Amount of Each Disbursement this Period<br><b>29.05</b><br>Transaction ID : <b>B25E07D673B384B54947</b> |
| City <b>New York</b> State <b>NY</b> Zip Code <b>10285-1000</b>  | Purpose of Disbursement<br><b>Credit Card Processing Fees</b>  |   |
| Candidate Name   | Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Blue Point LLC</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>06 / 05 / 2014</b>                                      |
| Mailing Address <b>35311 N 92nd Way</b>  |  | Amount of Each Disbursement this Period<br><b>4000.00</b><br>Transaction ID : <b>BCA54DD7331AF4439929</b> |
| City <b>Scottsdale</b> State <b>AZ</b> Zip Code <b>85262-1153</b>  | Purpose of Disbursement<br><b>Communication and Direct Mail</b>  |   |
| Candidate Name   | Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KQSS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>06 / 16 / 2014</b>                                     |
| Mailing Address <b>PO Box 292</b>  |  | Amount of Each Disbursement this Period<br><b>360.00</b><br>Transaction ID : <b>BA7AB3755023F4DB499D</b> |
| City <b>Miami</b> State <b>AZ</b> Zip Code <b>85539-0292</b>   | Purpose of Disbursement<br><b>Media Purchase</b>   |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

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|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>4389.05</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 35 OF 47                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. National Research Inc</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>06 / 17 / 2014</b>                                       |
| Mailing Address <b>146 State Hwy 34<br/>Suite 250</b>   |  | Amount of Each Disbursement this Period<br><b>18000.00</b><br><b>Transaction ID : B93612D74D36840B89E0</b> |
| City <b>Holmdel</b> State <b>NJ</b> Zip Code <b>07733-2417</b>  | Purpose of Disbursement<br><b>Polling Services</b>   |  |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Anthem Media Inc.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>06 / 25 / 2014</b>                                       |
| Mailing Address <b>5524 Bee Caves Rd. Ste. B-5</b>  |  | Amount of Each Disbursement this Period<br><b>15152.00</b><br><b>Transaction ID : BABBC6FFA009F4E43A29</b> |
| City <b>West Lake Hills</b> State <b>TX</b> Zip Code <b>78746-5248</b>  | Purpose of Disbursement<br><b>Media Buy</b>  |  |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Gaither Martin</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>05 / 06 / 2014</b>                                     |
| Mailing Address <b>184 W 4th Ave</b>  |  | Amount of Each Disbursement this Period<br><b>827.00</b><br><b>Transaction ID : B3B13DD9917D24BB2832</b> |
| City <b>Eagar</b> State <b>AZ</b> Zip Code <b>85925-9895</b>  | Purpose of Disbursement<br><b>Expense and Mileage Reimbursement</b>  |  |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

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|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>33979.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                 |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 36 OF 47 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YMC Enterprise LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 06 / 2014 |
| Mailing Address 929 W 23rd St   |  | Amount of Each Disbursement this Period<br>280.00             |
| City<br>Tempe   | State<br>AZ  |   |
| Zip Code<br>85282-1806  | Purpose of Disbursement<br>Campaign Promotional Materials  | Transaction ID : <b>BA58A433B559E4C588C4</b>                  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Gary Kiehne</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address P.O. Box 1974   |  | Amount of Each Disbursement this Period<br>35856.40           |
| City<br>Eagar   | State<br>AZ  |   |
| Zip Code<br>85925-1974  | Purpose of Disbursement<br>In-kind:See Below for Itemization   | Transaction ID : <b>BC57D5997EBB54FD289E</b>                  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Stephanie Rainey</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address PO Box 1407   |  | Amount of Each Disbursement this Period<br>475.00             |
| City<br>Lakeside  | State<br>AZ  |   |
| Zip Code<br>85289   | Purpose of Disbursement<br>In-kind:Videographer Services   | Transaction ID : <b>B00003231E2D54E22BA7</b>                  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 35856.40 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 37 OF 47                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Walt Trike</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 30 / 2014 |
| Mailing Address 2211 S Deer Trail Cir   |  | Amount of Each Disbursement this Period<br>495.08        |
| City<br>Tuscon  | State<br>AZ  |  |
| Zip Code<br>85710   | Purpose of Disbursement<br>In-kind:Catering Services   | Transaction ID : B00003232E2D54E22BA7                    |
| Candidate Name  | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Therese Hicks</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 30 / 2014 |
| Mailing Address 753 N Hicks Rd  |  | Amount of Each Disbursement this Period<br>480.00        |
| City<br>Globe   | State<br>AZ  |  |
| Zip Code<br>85501   | Purpose of Disbursement<br>In-kind:Catering Services   | Transaction ID : B00003233E2D54E22BA7                    |
| Candidate Name  | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Travis Simshauser</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 30 / 2014 |
| Mailing Address PO Box 244  |  | Amount of Each Disbursement this Period<br>12538.00      |
| City<br>Chambers  | State<br>AZ  |  |
| Zip Code<br>86502   | Purpose of Disbursement<br>In-kind:Payroll   | Transaction ID : B00003234E2D54E22BA7                    |
| Candidate Name  | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  |  |  |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 38 OF 47                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Gaither Martin</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 184 W 4th Ave   |  | Amount of Each Disbursement this Period<br>7000.00            |
| City<br>Eagar   | State<br>AZ  |   |
| Zip Code<br>85925   | Purpose of Disbursement<br>In-kind: Campaign Management Consulting   | Transaction ID : B00003235E2D54E22BA7                         |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Sarah Bernstein</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address PO Box 278  |  | Amount of Each Disbursement this Period<br>430.00             |
| City<br>Globe   | State<br>AZ  |   |
| Zip Code<br>85502   | Purpose of Disbursement<br>In-kind: Catering Services  | Transaction ID : B00003236E2D54E22BA7                         |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Circle K</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 4303 Broad St.  |  | Amount of Each Disbursement this Period<br>559.85             |
| City<br>Claypool  | State<br>AZ  |   |
| Zip Code<br>85532   | Purpose of Disbursement<br>In-kind: Fuel   | Transaction ID : B0000323A92D54E22BA7                         |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 39 OF 47                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Fry's Fuel</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 2858 N Pinal Ave.   |  | Amount of Each Disbursement this Period<br>1184.76            |
| City<br>Casa Grande   | State<br>AZ  |   |
| Zip Code<br>85222   | Purpose of Disbursement<br>In-kind:Fuel  | Transaction ID : <b>BB66AD24DE23541C98B1</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Giant</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 1790 S White Mountain Rd.   |  | Amount of Each Disbursement this Period<br>235.48             |
| City<br>Show Low  | State<br>AZ  |   |
| Zip Code<br>85901   | Purpose of Disbursement<br>In-kind:Fuel  | Transaction ID : <b>B0D9E7D08F29148F98B4</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Safeway Fuel</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 1449 N Arizona Blvd.  |  | Amount of Each Disbursement this Period<br>675.55             |
| City<br>Coolidge  | State<br>AZ  |   |
| Zip Code<br>85228   | Purpose of Disbursement<br>In-kind:Fuel  | Transaction ID : <b>BA496D0564C184C1CB3F</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 40 OF 47 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

Full Name (Last, First, Middle Initial)  
**A. Cutter Aviation**

Mailing Address 1771 Shuttle Columbia Dr.

City El Paso State TX Zip Code 79925

Purpose of Disbursement In-kind: Air Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 30 / 2014

Amount of Each Disbursement this Period: 287.00

Transaction ID : B6A99B4E981314EDBA62

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Marriott Tucson**

Mailing Address 880 E 2nd St.

City Tucson State AZ Zip Code 85719

Purpose of Disbursement In-kind: Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 30 / 2014

Amount of Each Disbursement this Period: 267.39

Transaction ID : B656F314B88014DE280B

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. Cancun Grill**

Mailing Address 223 W Wall St. #121

City Midland State TX Zip Code 79701

Purpose of Disbursement In-kind: Catering/Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 30 / 2014

Amount of Each Disbursement this Period: 315.63

Transaction ID : B8F12ADE63B5C41D1B09

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 41 OF 47                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Hifalutin Western Grill</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 6780 N Oracle Rd.   |  | Amount of Each Disbursement this Period<br>725.00             |
| City<br>Tucson  | State<br>AZ  |   |
| Zip Code<br>85704   | Purpose of Disbursement<br>In-kind:Catering/Meals  | Transaction ID : <b>BCAA20509253C41F893F</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Plaza Inn</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 4108 N Big Spring St.   |  | Amount of Each Disbursement this Period<br>413.82             |
| City<br>Midland   | State<br>TX  |   |
| Zip Code<br>79705   | Purpose of Disbursement<br>In-kind:Lodging   | Transaction ID : <b>BE609F4E87C5B48E8BAB</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Short Stop</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 12 N Main St.   |  | Amount of Each Disbursement this Period<br>723.53             |
| City<br>Edgar   | State<br>AZ  |   |
| Zip Code<br>85925   | Purpose of Disbursement<br>In-kind:Fuel  | Transaction ID : <b>B443D19FBF1994EBABE5</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 42 OF 47                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Corner Store</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 25106 S Arizona Ave.  |  | Amount of Each Disbursement this Period<br>278.45             |
| City<br>Chandler  | State<br>AZ  |   |
| Zip Code<br>85248   |  | Transaction ID : <b>BB2475BB2FBC64B19884</b>                  |
| Purpose of Disbursement<br>In-kind:Fuel   | Category/<br>Type  |   |
| Candidate Name  |  | <b>[MEMO ITEM]</b>  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Hotel Harrington</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 436 11th St. Nw   |  | Amount of Each Disbursement this Period<br>377.86             |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20004   |  | Transaction ID : <b>B96B8B8EC500A497496E</b>                  |
| Purpose of Disbursement<br>In-kind:Lodging  | Category/<br>Type  |   |
| Candidate Name  |  | <b>[MEMO ITEM]</b>  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Copper County News</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 180 W Oak St.   |  | Amount of Each Disbursement this Period<br>354.96             |
| City<br>Globe   | State<br>AZ  |   |
| Zip Code<br>85501   |  | Transaction ID : <b>B32FC13EE8E0C423DAAA</b>                  |
| Purpose of Disbursement<br>In-kind:Newspaper Advertising  | Category/<br>Type  |   |
| Candidate Name  |  | <b>[MEMO ITEM]</b>  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 43 OF 47                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. QuickTrip</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 1627 N Pinal Ave.   |  | Amount of Each Disbursement this Period<br>308.90             |
| City<br>Casa Grande   | State<br>AZ  |   |
| Zip Code<br>85122   | Purpose of Disbursement<br>In-kind:Fuel  | Transaction ID : <b>BB8BA1E22046D42C7BB1</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Arizona Silver Belt</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 298 N. Pine St.   |  | Amount of Each Disbursement this Period<br>403.92             |
| City<br>Globe   | State<br>AZ  |   |
| Zip Code<br>85501   | Purpose of Disbursement<br>In-kind:Newspaper Advertising   | Transaction ID : <b>B73083AAF4B814FB49A5</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Shell Oil</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 1673 W AZ-260   |  | Amount of Each Disbursement this Period<br>833.83             |
| City<br>Camp Verde  | State<br>AZ  |   |
| Zip Code<br>86322   | Purpose of Disbursement<br>In-kind:Fuel  | Transaction ID : <b>B9C181B5752014313865</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 44 OF 47                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Comfort Inn</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 340 N. Goswich Way  |  | Amount of Each Disbursement this Period<br>213.47             |
| City<br>Camp Verde  | State<br>AZ  |   |
| Zip Code<br>86322   | Purpose of Disbursement<br>In-kind:Lodging   | Transaction ID : <b>BC019CDE717F24986A86</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Chevron</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 320 Castle Ln.  |  | Amount of Each Disbursement this Period<br>429.60             |
| City<br>Camp Verde  | State<br>AZ  |   |
| Zip Code<br>86322   | Purpose of Disbursement<br>In-kind:Fuel  | Transaction ID : <b>B83A146C745444892AE8</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Sign King of Arizona</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |
| Mailing Address 325 S Westwood Dr<br>Unit 1   |  | Amount of Each Disbursement this Period<br>2917.36            |
| City<br>Mesa  | State<br>AZ  |   |
| Zip Code<br>85210-8400  | Purpose of Disbursement<br>In-kind:Sign Printing   | Transaction ID : <b>B24A6DBDB352E499D8A5</b>                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00      |
| <b>TOTAL</b> This Period (last page this line number only)..... | 130817.61 |

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Kiehne for Congress**

Transaction ID : **C26EADE050F6A40FDA62**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Gary Kiehne**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
P.O. Box 1974

City State ZIP Code  
Eagar AZ 85925-1974

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100000.00 0.00 100000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 31 / Y 2013 M M / D D / Y None 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... 100000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Kiehne for Congress** Transaction ID : **CBA4759ACAE4D5EA54**

|  |                         |   |
|--|-------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br><b>Gary Kiehne</b> | <b>[PERSONAL FUNDS]</b> | Election: 2014<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>P.O. Box 1974   |                         |   |

|       |       |            |
|-------|-------|------------|
| City  | State | ZIP Code   |
| Eagar | AZ    | 85925-1974 |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 100000.00               | 0.00                       | 100000.00                                   |

|                        |                      |               |          |               |   |
|------------------------|----------------------|---------------|----------|---------------|---|
| <b>TERMS</b>           |                      | Date Incurred | Date Due | Interest Rate | Secured:  |
| M 06 / D 30 / Y 2014 Y | M M / D D / Y None Y |               |          | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |   |           |
|---|---|-----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....  | ▶ | 100000.00 |
| <b>TOTALS</b> This Period (last page in this line only).....  | ▶ | [ ]       |
| <b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b> |   |           |

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Kiehne for Congress** Transaction ID : **C10CAC833DBEF41B8B23**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014  
**Gary Kiehne**  Primary  
 Mailing Address P.O. Box 1974  General  
 Other (specify) ▼

City State ZIP Code  
 Eagar AZ 85925-1974

|                                      |                                    |  |
|--------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>100000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>100000.00 |
|--------------------------------------|------------------------------------|--|

**TERMS**

|                                       |                            |                               |   |
|---------------------------------------|----------------------------|-------------------------------|---|
| Date Incurred<br>M 03 / D 29 / Y 2014 | Date Due<br>M / D / Y None | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|----------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |   |           |
|--|---|-----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | ▶ | 100000.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | ▶ | 300000.00 |

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**