FE FORM			D DIS	OF RE	MENT	S	20 Office	RECEIVED
1. NAME C COMMIT	OF TEE (in full)	TYPE	or print		ample: If ty er the lines.	ping, type		FEC MAIL CENTER
	n Arizona Con	serva						
ADDRESS (n	number and street)	LRC		504				
thar	eck if different n previously orted. (ACC)	L_ LSa	huarita:					 29]-L
2. FEC ID	ENTIFICATION NU	JMBE	R 🛡					
C 00	5012046			3. IS THIS REPOR	v	NEW (N) OR	AMENDE (A)	ED .
4. TYPE ((Choose	OF REPORT One)	(b)	Monthly Report	Feb 20 (M2	2)	May 20 (M5)) Aug 20 (M	8) Nov 20 (M11) (Non-Election Year Only)
(a) Qua	rterly Reports:		Due On:	Mar 20 (M	3)	Jun 20 (M6)	Sep 20 (M	
	April 15 Quarterly Report (C			Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M1	10) Jan 31 (YE)
	July 15 Quarterly Report (C			ay Election rt for the:	Primary (1 Convention		General (12G) Special (12S)	Runoff (12R)
	October 15 Quarterly Report (C January 31 Year-End Report (Y			Election on	M M	/	Y Y Y Y	in the State of
x	July 31 Mid-Year Report (Non-electio Year Only) (MY)	n		ay I-Election rt for the:	General (3	0G)	Runoff (30R)	Special (30S)
	Termination Report (TER)			Election on	NA 63	/ D D /	¥ ¥ ¥ ¥	in the State of
5. Coverinç	g Period 01	191 /	01 [°]	2013	through	n 06	′ [°] 30° ′ 20	
-	I have examined th t Name of Treasure	-		-	owledge and	d belief it is t	rue, correct and com	plete.
Signature of	Treasurer	\geq	>0~	et.l	Dall		Date 07 /	01 [°] 2013 [°]

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

	Office				FEC FORM 3X
1	Use				Rev. 12/2004
	Only				

	OF FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name		
S	Southern Arizona Conservative Politic	cal Action Committee	
R	eport Covering the Period: From: 01	΄ 01 2013 Το: Το:	06 30 2013 °
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand y y y y January 1, 2013		, <u>,</u> 161 <u>.</u> 50
	(b) Cash on Hand at Beginning of Reporting Period	, ,161.50	
	(c) Total Receipts (from Line 19)	, 6,977.00	, 6,977.00
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	, 7,1 38.50	, 7 _, 138 _. 00
7.	Total Disbursements (from Line 31)	, 2,051,48	, 2,051.48
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, 5,087.02	, 5,087.02
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , 0.0 0	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, , 0 <u></u> 00	

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

For further information contact:

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

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

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R	Report Covering the Period: From: 01	01	ź013 Č	To:	06 (30° ′ 2013 ′
	I. Receipts	I	COLUMN Total This Pe			OLUMN B ar Year-to-Date
۱.	Contributions (other than loans) From:		······································			
	(a) Individuals/Persons Other Than Political Committees					
	(i) itematzed (use Schedule A)	,	,70	00.00	,	,700 <u>0</u> 00
		·	627	7_0 0	·	6,27700
	(ii) Unitemized	,	0,21	1.00	,	0,211.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)►	,	6,97	7_00	,	6,277.0
				0 0 0	·	0,0 0
	(b) Political Party Committees (c) Other Political Committees	,	7	0.00	2	, 0.00
	(such as PACs)		_	0.00	<u> </u>	. 0,0 (
	(d) Total Contributions (add Lines	,	,	•	,	,
	11(a)(iii), (b), and (c)) (Carry		~ ~ ~			60770
	Totals to Line 33, page 5)▶	,	6,97	7,00	,	6,977 _. 0
2.	Transfers From Affiliated/Other					0.0
	Party Committees	,	7	0.0 0	,	, 000
3.	All Loans Received	,	,	0 _. 00	,	, 0.0
1	Loan Repayments Received			0 0 0		0 0
	Offsets To Operating Expenditures	,	,	0.00	,	,
	(Refunds, Rebates, etc.)					
	(Carry Totals to Line 37, page 5)	,	,	000	,	, 0.0
3.	. Refunds of Contributions Made		,		,	,
	to Federal Candidates and Other			0 0 0		
-	Political Committees	,	,	000	,	, 0.0 (
/ .	Other Federal Receipts			0 0 0		0.0
a	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	3	,	000	,	, 0.0
<i>.</i>	(a) Non-Federal Account					
	(from Schedule H3)	_	,	0.0 0	,	. 0.0
		,	,		,	,
	(b) Levin Funds (from Schedule H5)	,	,	000	,	, 0.0
	(c) Total Transfers (add 18(a) and 18(b))			0 0 0		0.0
		,	,	0.00	,	,
9.	. Total Receipts (add Lines 11(d),					
	12, 13, 14, 15, 16, 17, and 18(c))▶	,	6,9	77 _. 00	,	6,977.0
_	. Total Federal Receipts					
1						69770

DETAILED SUMMARY PAGE of Receipts

Page 3

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FEC Form 3X (Rev. 06/2004)

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Γ	DETA	AILED SUMMARY PAGE of Disbursements	
	FEC Form 3X (Rev. 02/2003)	COLUMN A	Page 4 COLUMN B
		Total This Period	Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	0.0.0	0.0.0
	(i) Federal Share	, , 0.00	, , 0.00
	(ii) Non-Federal Share (b) Other Federal Operating	, , 0 <u>0</u> 0	, , 0 <u>0</u> 0
	Expenditures	, _, 6 1 2 4 8	, ,612.48
22	(add 21(a)(i), (a)(ii), and (b))▶ Trænsfers to Affilletted/Other Party	, ,612 <u>48</u>	, <u>,</u> 612_48
	Committees	, , 0 <u>0</u> 0	, , 0 <u>0</u> 0
04	Fedoral Candidates/Committees and Other Political Committees	, , 0.00	, , 0.00
	Independent Expenditures (use Schudule E) Coordinated Party Expenditures	, , 0.00	, , 0.0 0
	(2 U.S.C. §441a(d)) (use Schedule F)	, , 0.00	, , 0.00
26.	Loan Repayments Made	, , 0.00	, , 0.00
27. 28	Loans Made Refunds of Contributions To:	, , 0.00	, , 0.00
_0.	(a) Individuats/Persons Other Than Political Committees	, , 50.00	, , 50.00
	(b) Political Party Committees	, , 0.00	, , 0.00
	(c) Other Political Committees (such as PACs)	, , 0 <u></u> 00	, , 0_0 0
	(d) Total Contribution Refunds		5000
	(add Lines 28(a), (b), and (c)) ►	, , 50.00	, , 50,00
29.	Other Disbursements	, 1,3 89.00	, 1,38900
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	, , 0 <u></u> 00	, , 0.00
	(il) "Levin" Share (b) Federal Election Activity Paid Entirely	, , 0 <u></u> 00	, , 0.00
	With Federal Funds	, , 0.00	, , 0_0 0
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	, , 000	, , 0 <u>0</u> 0
31.	Total Disbursements (add Lines 21(c), 22,		
* -	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, 2,051 <u>4</u> 8	, 2,051.48
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	, 2 _, 051 _. 48	, 2,051 <u>4</u> 8

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FE6AN026

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 5
III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Petiod	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	, 6,977.00	, 6,977 <u>0</u> 0
 Total Contribution Refunds (from Line 28(d)) 	, , 50.00	, , 50.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 6,927.00	, 6 <u>,</u> 927 <u>0</u> 0
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	, ,612.48	, <u>,</u> 612.48
7. Offsets to Operating Expenditures (from Line 15, page 3)	, , 0.00	, , 0.00
 Net Operating Expanditures (subtract Line 37 from Line 36)	, <u>,</u> 612_48	, , <mark>61248</mark>

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Detailed Summary Page 11a 11b 11c	SCHEDULE A (FEC Form 3X)		Lico concreto estadule/a)		FOR LINE NUMBER: PAGE 1 OF 1						
Ary information copied from such Reports and Statements may not be add or used by any prenof for the purpose of soliciting contributions from such controllations. NAME OF COMMITTEE (in Full) Southern Arizona Conservative Political Action Committee to soliciting controllations from such committee. Fell Name (Last, First, Middle Initial) A Biol Sharpe Mailing Address City City City City City City Alling Address Pointer (Last, First, Middle Initial) A Boot of Receipt City Alling Address Pointer (Last, First, Middle Initial) A Boot of Receipt City Ally Miller Date of Receipt Mailing Address PO Dax 69/28 City City City Ally Miller Date of Receipt in Section Receipt For: Oner (specify) Mailing Address PO Dax 69/28 City City City	ITEMIZED RECEIPTS			for each category of the	· · · · ·						
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✓ Full Name (Last, First, Middle Initial) Date of Receipt A. Bob Sharpe Mailing Address 4549 E. Ft. Lowell Road C Gity State Zp Code City Az 85712 FEC ID number of contributing federal political committee. C Mame of Employer Occupation President Amount of Each Receipt for: Compation Pointer (specify) ψ , 5 0 0.00 FeI Name (Last, First, Middle Initial) B. Ally Miller Mailing Address Az PO Box 89128 State City State Cocupation FeC ID number of contributing federal political committee. C PO Box 89128 State City State Cocupation FeC ID number of contributing federal political committee. C Pirma countly Supervisor Receipt For: Prima Countly Cocupation Receipt For: City State City State Zip Code FeC ID number of contributing federal political committee. C Mailing Address Aggregate Year-to-Date ♥ City State Zip Code FeC ID number of contribu	$\overline{\Lambda}$	NAME OF COMMITTEE (In Full)									
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federal political committee. , , , . Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ , , . SUBTOTAL of Receipts This Page (optional)				·	Amoun	t of Each Receipt this Period					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ , , , SUBTOTAL of Receipts This Page (optional)			С			, , ·					
Primary General Other (specify) ▼ , , , 7 0 0 0 0 SUBTOTAL of Receipts This Page (optional)		Name of Employer	Occupation	1	-						
Other (specify) ▼ , , , . SUBTOTAL of Receipts This Page (optional)			Aggregate	Year-to-Date ▼							
SUBTOTAL of Receipts This Page (optional)											
TOTAL This Period (last page this line number only) 70000				, , , .							
TOTAL This Period (last page this line number only) 70000	Γ					70000					
TOTAL This Period (last page this line number only)	Ľ				-						
	ו	OTAL This Period (last page this line number	only)		•	, ,700 <u>0</u> 0					

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SCHEDULE B (FEC Form 3X)		FO	R I		E NUMBER: PAGE 1 OF 1								
ITEMIZED DISBURSEMENTS	Use separate schedule(s)			only		1.		L		<u> </u>			
	for each category of the Detailed Summary Page			21b	22		23						
				27	28a	_	28b		8c X 29				
Any information copied from such Reports and States or for commercial purposes, other than using the name													
NAME OF COMMITTEE (in Full)	no and addition of any problem	- outin											
								_					
Full Name (Last, First, Middle Initial)					<u> </u>								
A. Cow Palace					Date	ot D	isburse		v v ¹	v v			
Mailing Address 28802 S. Nogales Highway					04		ີ 2	0	2013				
City	State Zip Code												
/ 11000	AZ 85645												
Purpose of Disbursement Catering Cost and Room Rental f		00	2		Amou	int of	Each	Dishu	rsement th	is Period			
Candidate Name			-				~~~~						
N/A		Cate Ty		"			,		1,38	9.00			
	ment For:												
Senate	Primary General												
	Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) B.					Data	of D	isburs	ement					
0.				1	Date	u. U	/ D	D /	Y Y	Y Y			
Mailing Address	· · · · · · · · · · · · · · · · · · ·					K (0 /					
City	State Zip Code												
Purpose of Disbursement													
					Amou	int of	f Each	Disbu	rsement th	is Period			
Candidate Name		Cate	000	,									
		Ty		"			,		,	•			
	ment For:												
Senate	Primary General												
State: District:	Other (specify)												
Full Name (Last, First, Middle Initial) C.					Date	of D	isburs	ement					
					м	M	/ D	D /	Y Y	v v			
Mailing Address													
Old .	Otata Zin Cada												
City	State Zip Code												
Purpose of Disbursement	· · · · · · · · · · · · · · · · · · ·												
					Arnou	unt o	f Each	Disbu	rsement th	is Period			
Candidate Name		Cate	gon	y/									
		Ту	ре				,		,	•			
Office Sought: House Disburse Senate	ment For: Primary General												
President	Other (specify)												
State: District:	(
SUBTOTAL of Disbursements This Page (optional).				►			,		,				
	····												
TOTAL This Period (last page this line number only	/}		•••••				,		1, 3 8 S	a'n n			

SCHEDULE C (FEC Form 3X)

LOANS	Use separate schedule(
	for each category of the Detailed Summary Page	
NAME OF COMMITTEE (In Full)		
Southern Arizona Conservative Politica	I Action Committee	
LOAN SOURCE Full Name (Last, First, Middle Initial)		Election:
NONE		Primary General
Mailing Address		Other (specify)
City State	ZIP Code	· · · · · · · · · · · · · · · · · · ·
		nce Outstanding at Close of This Period
, , . TERMS	3 3 "	, , ·
Date Incurred	Date Due Interest Rate	e Secured:
M M / D D / Y Y Y M M /		. % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan S	ource	
1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Co	de Guaranteed Outstanding:	, , .
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	de Guaranteed	
	Outstanding:	·····
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount	
City State ZIP Co	de Guaranteed Outstanding:	, , .
4. Full Name (Last, +First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Co	de Guaranteed Outstanding:	, , .
SUBTOTALS This Period This Page (optional)		, , ·
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 for	ward to appropriate line of Summary.

FEC Schedule C (Form 3X) Rev. 02/2003

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SCHEDULE C-1 (FEC Form 3X)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for Information found on Page ____ of Schedule C

_												
N	AME	OF COMMITTEE (In Full)			FEC	C IDI	ENT	FIC	ATIC	DN N	IUN	IBER
8	Sout	hern Arizona Conservative Political Actic	on Committee		С	0	05	0	12	0	4	6
1		NG INSTITUTION (LENDER)	Amount of Loan				Inte	rest	Rate	(AF	PR)	
F	ull Na	I ^{me} NONE										
ĺ			, ,	•		i i			-			%
М	ailing	Address	· · · · · · · · · · · · · · · · · · ·	M	м	,	D	D /	Y	Y	٧	Y
			Date Incurred or Established									
c	ity	State Zip Code	Date Due	- M	м	1	D	D /	Y	¥	Y	Y
L	-	<u> </u>										
		Has loan been restructured?	If yes, date originally incurred	M	M	,	D	D /	۲	¥	Y	¥
	B.	If line of credit,	Total Outstanding									
		Amount of this Draw: , ,	Balance:		;	,		,			•	
	c.	Are other parties secondarily liable for the debt incurre	ed?									
	Ĺ		ust be reported on Schedule C.)									
	D.	Are any of the following pledged as collateral for the I	oan: real estate, personal	What is	s the	yalı	le o	i this	coll	atera	al?	
		property, gends, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other										ĺ
					:	3		,			•	
				Does t	he le	ende	hav	/e a	perfe	ected	t se	curity
				interes				No		Ye	S	
	E.	Are any future contributions or future receipts of intere- collateral for the loan? No Yeo If yes, s		What is	s the	e esti	mate	ed va	due?	•		
	1					_		_			_	
						,		,				
		A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:									
		Date account established:	Address:									
		M M / D / Y Y Y	City, State, Zip:						_			
	F	If neither of the types of collateral described above wa		amount	nier	hant	doe	s not	60	at o		haag
	'·	the loan amount, state the basis upon which this loan	was made and the basis on wh	ich it a	ssure	es re	payn	nent.	oqu			COCU
	G.	COMMITTEE TREASURER	- <u></u>	DA	TE							
		Typed Name		M	N	,	D	, ם	¥	Y	Y	¥
		Signature										
	H.	Attach a signed copy of the loan agreement.	·····									
	1.	TO BE SIGNED BY THE LENDING INSTITUTION:										
		 To the best of this institution's knowledge, the te are accurate as stated above. 	erms of the loan and other inform	nation re	egaro	ding	the o	exter	sion	of t	he	loan
		II. The lean was made on terms and conditions (in	cluding interest rate) no more fav	vorable	at th	he tir	ne ti	nan t	hose) imj	oose	ed for
		similar extensions of credit to other borrowers of III. This institution is aware of the requirement that	comparable credit worthiness.									
_		complied with the requirements sait forth at 11 C	FR 100.82 and 100.142 in making	ng this	loan		.cha	.y.ne			23	
		ORIZED REPRESENTATIVE		DA	TE							
		I Name ture Tit	de	_	м	1	P	D /	۷	۷	γ	¥
1 9												

SC	HEDULE D (FEC Form 3X)			PAG	E 1 OF 1			
	BTS AND OBLIGATIONS		(Use separate schedule(s)					
	cluding Loans		for each numbered line)	(check only on	·			
_	ME OF COMMITTEE (In Full)	······································		1	10			
1	Southern Arizona Conservative Polit	ical Action Committee						
L	A. Full Name (Last, First, Middle Initial) of Debtar		Noture of C	Debt (Purpose):				
	NONE							
	Mailing Address							
	City State	Zip Code						
	Outstanding Balance Beginning This Period			<u> </u>				
	, , ·							
	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Cl	ose of This Period			
	, , -	3 3	•	3 3	•			
	B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	Debt (Purpose):				
	Mailing Address							
	City State	Zip Code						
	Outstanding Balance Beginning This Period	· · · · · · · · · · · · · · · · · · ·						
	, , , . Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Cl	ose of This Period			
		r ayniont fina f onou	Constant	ing Dalance at O				
	, , .	, ,	•	, ,	•			
	C. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor	Nature of [Debt (Purpose):				
	Mailing Address	······································						
	City	State Zip Code						
	Outstanding Balance Beginning This Period							
	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at C	lose of This Period			
	, , -	, ,	•	, ,	•			
	L		<u>,</u>		<u> </u>			
1)	SUBTOTALS This Period This Page (optional)	· · · · · · · · · · · · · · · · · · ·	►	, ,	•			
2)	TOTALS This Period (last page this line number	oniy)	►	, ,	•			
3)	TOTAL OUTSTANDING LOANS from Schedule (C (last page only)	►	, ,	•			
4)	ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page d	oniy) 🕨		0,0 0			

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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 1 OF 1 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (in Full)	FEC IDENTIFICATION NUMBER V
Southern Arizona Conservative Political Action Committee	C 0 05012046
Check if 24-hour report 48-hour report New report Amends report	мм/рр/үүү rt filed on
Full Name (Last, First, Middle Initial) of Payee	Date
NONE	
Mailing Address	
	Amount
City State Zip Code	, , -
Purpose of Expenditure Category/	Office Sought: House State:
Туре	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought , , .	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
	, , -
Purpose of Expenditure Category/ Type	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought , , .	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	· ▶ , , , -
(b) SUBTOTAL of Uniternized Independent Expenditures	•• , , -
(c) TOTAL Independent Expenditures	
	· • , , 0.00
Under penalty of perjury I cartify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o party committee) any political party committee or its agent.	
	M M / D D / Y Y Y Y
Date	
	FEC Schedule E (Form 3X) Rev. 07/201

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3031082208

end,

LITICAL PARTY COMMITTEE			:N1(S)		PAGE	1	OF	1
U.S.C. §441a(d))	e used only b	y Political Committ	es in the General	Election)	FOR LIN	E 25 C	DF FC	ORM :
ME OF COMMITTEE (in Full)				<u> </u>	- I			
Southern Arizona Conse					·· <u>·</u> ····			
s your committee been designated to maindinated expenditures by a political party		full Name of Subtordi	NONE					
E6, name the designating committee:	TK	Aailing Address						
	T	City	····	Str	ate	ZIP Co	de	
Full Name (Last, First, Middle Initial) of	Each Payee	<u> </u>	P	urpose of Exp	enditure			_
NONE								tegor
Mailing Address			-	Date				Туре
City	State	Zip Code		N. N. /	D D /	Y Y	۲	¥
Name of Federal Candidate Supported	Office Sought:		State:	Amount				
Aggregate General Election Expenditure for this Candidate ►	3	, .		3	3		•	
Full Name (Last, First, Middle Initial) of	Each Payee	······	P	urpose of Exp	penditure			tego
Mailing Address			⊢	Date				Туре
City	State	Zip Code		M M /	D'D /	¥ Y	Y	Y
Name of Federal Candidate Supported	Office Sought:		State:	Amount				
Aggregate General Election Expenditure for this Candidate ►	3	g =		3	3	I	•	
Full Name (Last, First, Middle Initial) of	Each Payee		F	urpose of Exp	penditure			
Mailing Address		<u> </u>					Ca	itego Type
		Zip Code		Date MM/	ע ס /	Y Y	¥	Y
City	State							
City Name of Federal Candidate Supported	State Office Sought:	House Senate D	State:	Amount				
		House		Amount ,				
Name of Federal Candidate Supported Aggregate General Election	Office Sought:	House Senate Presidential	listrict:				•	

FEC Schedule F (Form 3X) Rev. 02/2009

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SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER Dirive and exempt activity costs
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXEENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BIJT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

_____ Senate-Only Election Year (21% Federal)

_____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Generic Voter Drive

This ratio applies to (check all that apply):

Administrative

Public Communications Referencing Party Only

31082210

C) M

SCHEDULE H2 (FEC Form 3X)

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ALLOCATION RATIOS		PAGE 0F 1
NAME OF COMMITTEE (In Full) Southern Arizona Conservative Political Action Committee	·····	
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT.	te support	
Methods of allocation:		
I. FUNDRAISING activities are allocated using the "funds received meth expenses must equal the federal proportion of monies raised.	nod" where the federal prop	portion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated acco where the federal proportion of disbursements is based on the benefit tivity. Fer PACs Only: Direct candidate support includes public comm federal and nonfederal candidates, regardless of whether there is a m are allocated using a time/space method.	t derived by federal candid unications or voter drives	lates from the ac- that refer to both
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	. %	- %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:	0/	0 /
CHECK IF THE RATIO IS:	- %	- %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		6 /
CHECK IF THE RATIO IS:	- %	- %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
CHECK IF THE RATIO IS:	- %	- %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
CHECK IF THE RATIO IS:	- %	. %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
CHECK IF THE RATIO IS:	- %	. %
New Revised Same as Previously Reported		

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE OF 1

		FO	R LINE 18a	OF FORM
ME OF COMMITTEE (In Full) outhern Arizona Conservative Pc	litical Action Committee	-		
		TOTAL AMOU	JNT TRANS	FERRED
NONE	M M / D D / Y Y Y Y	,	,	
BREAKDOWN OF TRANSFER RECEIVED	<u> </u>		<u></u>	<u> </u>
i) Total Administrative		3	9	•
ii) Generic Voter Drive		,	9	-
lii) Exempt Activities		,	,	٩
Iv) Direct Fundraising (List Activity or Event	t Identifier)			
a)	, , -			
b)				
c) Total Amount Transferred For Direct Fu	undraising	,		
v) Direct Candidate Support (List Activity of		,	,	-
a)	, , .			
b)	, , .			
c) Total Amount Transferred For Direct Ca	andidate Support	9	3	•
vi) Public Communications Referring Only	v to Party (Made by PAC)	3	3	
TOTAL	S FOR BREAKDOWN OF TRANSFER RECEIVE	D		
TAL This Period (Administrative)	,	, .		
TAL This Period (Generic Voter Drive)		, -		
TAL. This Period (Exempt Activities)		,		
TAL This Period (Direct Fundraising)		3 3	•	
TAL This Period (Direct Candidate Support)		3 3	•	
TAL This Period (Public Communications Refe	erring Only to Party)	3	9	
TAL This Period (Total Amount Transferred)		,	3	0.00

FE6AN026

FEC Schedule H3 (Form 3X) Rev. 12/2004

PAGE 1

OF

FOR LINE 21a OF FORM 3X

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SCHEDULE	H4 (FEC	Form	3X)
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DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME ()	COMMITT	
NAME U		'EÉ (In Full)

λ.	Full Name (Last, First, Middle Initial) NONE			<u>_</u>	Allocated Activity or Event:
	Mailing Address		<u> </u>	<u></u>	Administrative Fundraisting Exemp
			7- 0-1-		Voter Drive Direct Candidate Suppo
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		<u> </u>	 Allocated Activity or Event Year-To-Date 	
	Activity or Event Identifier:			Category/ Type	, , , . M M / D D / Y Y Y Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	3 9 -	.	, ,	•	, , -
•	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
	Mailing Address		<u> </u>		Administrative _ Fundraising Exemp
					Voter Drive Direct Candidate Suppo
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:	· · · · · · · · · · · · · · · · · · ·			5 5 ·
				Category/ Type	M M / D D / Y Y Y Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	y y "		, ,	•	, , ·
	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
	Mailing Address		<u>. </u>		Administrative Fundraising Exemp
	City	State	Zip Code		Public Comm (ref to party only) by PAC
				<u> </u>	Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				, , ,
	Activity or Event Identifier:			Cutegory/ Type	M W / D D / Y Y Y Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
					, , -
	y y -		, ,		
S		leral Activity Th	·····		
SI	JBTOTAL of Allocated Federal and NonFed FEDERAL SHARE	deral Activity Th +	·····		= TOTAL AMOUNT
	JBTOTAL of Allocated Federal and NonFed FEDERAL SHARE	+	is Page NONFEDERAL	SHARE .	= TOTAL AMOUNT
	JBTOTAL of Allocated Federal and NonFed FEDERAL SHARE	+	is Page NONFEDERAL	SHARE I NonFederal s	= TOTAL AMOUNT

FE6AN026

SCHEDULE H5 (FEC Form 3X)

TRANSFEBS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(T)	o be used by State, District and Local	Party Committees Only)	FOR LINE 186 OF FORM 3X
ł	NAME OF COMMITTEE (In Full)		······································
	Southern Arizona Conservative Po	blitical Action Committee	
	NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
	NONE	M M / D D / Y Y Y Y	, , 0 _. 00
	BREAKDOWN OF THIS TRANSFER		
	i) Voter Registration	Voter registr	
	Total Amount Transferred for Voter	Registration,	•
	ii) Voter ID	v	OTER ID
	Total Amount Transferred for Voter	ID	, .
			GOTV
	iii) GOTV Total Amount Transferred for GOTV	1	
			GENERIC CAMPAIGN ACTIVITY
	iv) Generic Campaign Activity		
	Total Amount Transferred for Gene	ric Campaign Activity	, , ·
	NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
		M M / D D / Y Y Y	
			, , ·
	BREAKDOWN OF THIS TRANSFER		
	i) Voter Registration	VOTER REGIST	RATION
	Total Amount Transferred for Voter	Registration,	
			OTER ID
	ii) Voter ID Total Amount Transferred for Voter	D	
		,	, .
	iii) GOTV		GOTV
	Total Amount Transferred for GOT	V	, , .
	iv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
		eric Campaign Activity	,
ŕ	<u></u>	· · · · · · · · · · · · · · · · · · ·	· · ·
	TOTALS FOR BR	EAKDOWN OF TRANSFER RECEIVED (L	ast Page Only)
	TOTAL This Device (Makes Devices)		
	TOTAL This Period (Voter Registration)	5 5	
	TOTAL This Period (Voter ID)		
		3	, .
	TOTAL This Period (GOTV)		, , -
	TOTAL This Period (Generic Campaign A	ctivity)	, , .
	TOTAL This Period (Total Amount of Tran	nsfers Received)	, , 0.00
Ł			

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY (To be u

(Ta	be used by State, District and Local Party Committees	Only)	FOR LINE 30a OF FORM 3X
	ME OF COMMITTEE (In Full)		······
S	outhern Arizona Conservative Political Action Commi	ittee	
	A. Full Name (Last, Pirst, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:
	NONE		Voter Registration GOTV Voter ID Generic Campaign
	Mailing Address		Allocated Activity or Event Year-To-Date
	City State Zip Code		-
	Purpose of Disbursement	Category/ Type	M M / D D / Y Y Y Date
	FEDERAL SHARE + LEVIN SHA	ARE	= TOTAL AMOUNT
	, , · , , ,	•	3 3 -
	B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: Voter Registration Voter ID Generic Campaign
	Mailing Address	<u></u>	Allocated Activity or Event Year-To-Date
	City State Zip Code		
	Purpose of Disbursement	Category/ Type	мм/ в в / ч ч ч ч Date
	FEDERAL SHARE + LEVIN SH/	ARE	= TOTAL AMOUNT
	, , - , ,	•	y y •
	C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:
			Voter Registration GOTV Voter ID Generic Campaign
	Mailing Address		Allocated Activity or Event Year-To-Date
	City State Zip Code		, , .
	Purpose of Disbursement	Category/ Type	мм/ D D / ч ч ч Date
	FEDERAL SHARE + LEVIN SH		= TOTAL AMOUNT
	, , , , , , , , , , , , , , , , , , ,		, , ·
S	UBTOTAL of Shared Federal and Levin Activity This Page		
3	FEDERAL SHARE + LEVIN SH/	ARE	= TOTAL AMOUNT
	, , , , , ,	•	, , .
T	OTAL This Period (last page for each line only)(Federal share to 30(a)(i) and FEDERAL SHARE	a levin share ti	o 30(a)(ii)) TOTAL AMOUNT

LEVIN SHARE

3

3

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PAGE

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OF 1

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SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

IAM	E OF ACCOUNT NONE							
		-	OLUMN A . THIS PER	IOD			DLUMN B	
1.	RECEIPTS FROM PERSONS (a) Itemized (Use Schedule L-A)	, 9	3	•	h	3	,	•
	(b) Unitemized	,	3	.•		,	,	
	(c) Total	,	7	-		,	,	•
2.	OTHER RECEIPTS	,	,			,	,	•
3.	(Add Lines 1c and 2)	,	,	•		,	3	•
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)							
	(a) Voter Registration	,	3			,	, ,	
	(b) Voter ID	J	,	•		 y	,	•
	(c) GOTV	,	,	•		,	,	•
	(d) Generic Campaign	,	, ,			,	,	
	(e) Total	. 3	. ,	-		,	,	•
5.	OTHER DISBURSEMENTS	,	,	•.		,	,	· •
ð.	TOTAL DISBURSEMENTS (Add Lines 4e and 5)	,	,	•		3	3	
7.	BEGINNING CASH ON HAND (for Column B, use cash as of January 1st)	,	7	•		,	,	
8.	RECEIPTS (from Line 3)	3	,			, .	,	
9.	SUBTOTAL (Add Lines 7 and 8)	,	,			,	,	-
0.	DISBURSEMENTS (From Line 6)					,	3	
1.	ENDING CASH ON HAND					7	7	0 0 0

FEE Schedule L (Form 3X) Rev. 02/2003

SCHEDULE L-A (FEC Form 3X)

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

PAGE	1	OF
		_

CHEDULE L-A (FEC Form 3X)	Use separate schedule(s)	PAGE 1 OF 1
TEMIZED RECEIPTS OF LEVIN FUNDS	for each category of the Aggregation Page	FOR LINE NUMBER: 1a 2
Any information copied from such Reports and Statements may not or for commercial purposes, other than using the name and address	be sold or used by any perso s of acy political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Southern Arizona Conservative Political Acti	ion Committee	
Full Ndme (Last, First, Middle Initial) / Full Organization Name	······································	Date of Receipt
NONE		M M / D D / YY Y Y
Mailing Address		
City State	Zip Code	Amount of Each Receipt this Period
Name of Employer or Principal Place of Business		, , , · · Aggregate Year-to-Date
Occupation		
		· · · · · · · · ·
Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
		MIMI/DD/YNYYY
Mailing Address		and the second
<u></u>	7-0-1-	Amount of Each Receipt this Period
City State	Zip Code	
Name of Employer or Principal Place of Business		· · · ·
		Aggregate Year-to-Date
Occupation		, ,
Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
•		M M / D D / Y Y Y
Mailing Address		
		Amount of Each Receipt this Period
City State	Zip Code	
Name of Employer or Principal Place of Business		1 . 19 . 19 <u>1</u>
		Aggregate Year-to-Date
Occupation		
Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
· · · · · · · · · · · · · · · · · · ·		
Mailing Address		
		Amount of Each Receipt this Period
City State	zip Code	
Name of Employer or Principal Place of Business		, , , , , , , , , , , , , , , , , , ,
		Aggregate Year-to-Date
Occupation		a series and the series of the
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SUBTOTAL of Receipts This Page (optional)	••••••••••••••••••••••••••••••••••••••	3 3 •
TOTAL This Period (last page this line number only)		, , 0.00

FEC Schedule L-A (Form 3X) Rev. 02/2003

SCHEDUL	E L-B	(FEC	Form	3X)
ITEMIZED	DISBU	RSEM	ENTS	
OF LEVIN	FUNDS	6		

FOR LINE NUMB	ER:	PAG	E	1	OF	1
(check only one)		4a 4b		4c 4d]5

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NAME OF COMMITTEE (In Full)		mmittee to solicit contributions from such committee.
Southern Arizona Conservative	Political Action Committee	۶
Full Name (Last, First, Mladle Initial) / Full Or	ganization Manie	
NONE		Date of Disbursement
Mailing Address	**************************************	
	State 7:- A-+	Amount of Each Disburgement this Period
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		······································
Full Name (Last, First, Middle Initial) / Full Or	ganization Name	
•		Date of Disbursement
Maning Address		
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		+
Full Name (Last, First, Middle Initial) / Full Or	rganization Name	Data of Distances /
		Date of Disbursement
Mailing Address		M.M./ D.D./Y.Y.Y
		Amount of Each Dichurgement this David
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) / Full Or	rganization Name	
).		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
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City	State Zip Code	Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial) / Full Or	rganization Name	Date of Dishumament
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Suproza /		
SUBTOTAL of Disbursements This Page (option	nai)	·······▶ · · · · · · · · · · · · · · ·
FOTAL This Period (last page this line number	oniv)	

Federal Election Comm ENVELOPE REPLACEMENT PAGE FOR I The FEC added this page to the end of this filing	NCOMING DOCUMENTS				
Hand Delivered	Date of Receipt				
USPS First Class Mail	Postmarked				
USPS Registered/Certified	Postmarked (R/C)				
USPS Priority Mail	Postmarked				
Delivery Confirmation [™] or Signature Confirmation [™] Label					
USPS Express Mail	Postmarked				
Postmark Illegible					
No Postmark					
Overnight Delivery Service (Specify):	Shipping Date				
	ext Business Day Delivery				
Received from House Records & Registration C	Date of Receipt Office				
Received from Senate Public Records Office	Date of Receipt				
Received from Electronic Filing Office	Date of Receipt				
Other (Specify):	Date of Receipt or Postmarked				
Amp	7/8/13				
PREPARER (3/2005)	DATE PREPARED				

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