TNEOOTHONE

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED

113 1AN - R OPPRODE POR

1.	NAME OF		
	COMMITTEE	(in	full

TYPE OR PRINT ▼

	COMMI	TTEE (in full)	IFE ON	rmiti y		r the lines.	ilg, type	PEEF4ME	CENTER	
S	out	hern Arizo	ona	Con	servati	ve Po	litical	Action	Com	mittee
L		<u> </u>		1 1 1				<u> </u>		
ADD	RESS (number and street)	PO	Во _х	1504	<u> </u>	1111	1 1 1 1 1		
	tha	eck if different in previously oorted. (ACC)	Şal	nuar	i ta			AZ I	85629)
2.	FEC ID	ENTIFICATION NU	MBER ▼	_	CITY 🛦			STATE A	ZIP C	CODE A
	CC	05012046	(1,-1) n		3. IS THIS REPORT		NEW (N) OR	?:: AM ::::: (A)	ENDED	
	TYPE (Choose	OF REPORT	(b) Moi Rer		Feb 20 (M2)		May 20 (M5) Jun 20 (M6)		20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
	(a) Qu	arterly Reparts:		i.	Apr 20 (M4)	ings mgs	Jul 20 (M7)	ti afa Gara	20 (M10)	(Non-Election Year Only) Jan 31 (YE)
	tari	April 15 Quarterly Report (Q1) <u> </u>	12-Day	<u>。</u> 相制	Primary (12		<u> </u>	i de	• •
		July 15 Quarterly Report (Q2		PRE-Elec	or the:	Convention	: E:::. :; -::			11011011 (1211)
		October 15 Quarterly Report (Q3)	•	tar)	EMPVM /		Y'''Y'''Y'''Y'		e v≓ā∺g
	X	January 31 Year-End Report (YE	e)		Election on					
	11.23	July 31 Mid-Year Report (Non-election Year Only) (MY)	(d)	30-Day		General (30	G)	Runoff (3	90R) (774.) 15. 1.	Special (30S)
	H.	Termination Report (TER)		Report fo	or the: Election on	- W - M - /	雷 作文	YEVY V		-
5.	5. Covering Period 11 127 2012 through 12 31 2012									
		I have examined this	_	_			belief it is tru	e, correct and	d complete.	
		nt Name of Treasurer		navio	Barei	SS LLLA	∮ □	ate 01	′ 04 ′	2013
NOT	0	nission of false, errone ffice Jse Only	ous, or inc	omplete sin	formation may s	abject the pe	rson signing th	is Report to th	FEC FO Rev. 12	RM 3X

Write or Type Committee Name

Southern Arizona Conservative Political Action Committee

Report Covering the Period:

From:

27 2012

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012	,	0
	(b) Cash on Hand at Beginning of Reporting Period	, , 92.14	·
	(c) Total Receipts (from Line 19)	, , 115.00	, 3876.08
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	, 207.14	, 3876.08
-	Total Disbursements (from Line 31)	, , 45.64	, 3714.58
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, , , 161.50	, , , 161.50
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , ,	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

Write or Type Committee Name

FEC Form 3X (Rev. 06/2004)

Southern Arizona Conservative Political Action Committee

2012 To: Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 1140.00 (i) Itemized (use Schedule A)..... (ii) Uniternized (iii) TOTAL (add Lines 11(a)(i) and (ii)......▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b))... 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).......▶ 20. Total Federal Receipts 3876.08 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tills Period	Calendar Tear-to-Date
	(i) Federal Share	, , , , U	, , ,
	(ii) Non-Federal Share		O
	(b) Other Federal Operating		
	Expenditures	, 4 5.6 4	, , , , , , , , 775.98
	(c) Total Operating Expenditures	15.61	775.09
22	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	45.64	, 775.98
	Committees	0	0
23.	Contributions to Federal Candidates/Committees		2075 00
24	and Other Political Committees		2875.00
	Independent Expenditures (use Schedule E)	0	
25.	Coordinated Party Expenditures		
	(2 U.S.C. §441a(d)) (use Schedule F)	0	. The first state of the constraints of the 0 - 0 . The 0
26	Loan Repayments Made	·	
20.	Loan Repayments Made		
	Loans Made	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
20.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees		
	(b) Political Party Committees	Λ	, 63.60
	(c) Other Political Committees		, 63.60
	(such as PACs)	ou illus de sanciares como de ductionis el 🔱 🖯	<u> </u>
	(d) Total Contribution Refunds	i de la companya de	
	(add Lines 28(a), (b), and (c))▶	, , 0	, , 63,60
	Out Disk		
29.	Other Disbursements	The second of th	, , , , , , , , , , , , , , , , , , ,
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	n	^
	(i) Federal Share	, ,	, ,
	(ii) "Levin" Share	, , , 0	, , 0
	(b) Federal Election Activity Paid Entirely		0
	With Federal Funds (c) Total Federal Election Activity (add	, , , , U	, ,
	(c) Iotal Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0
31.	Total Disbursements (add Lines 21(c), 22,	and with the first groups that compare the first section is	n kan di kuta sa masa santung kuta ma
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	45:64	, 3714.58
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		0744 F0
	from Line 31)	, 45.64	, 3714.58

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)		or blobal comercia	Page 5
111	. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Total Contributions (other than loans) (from Line 11(d), page 3)	, , 115.00	, 3480.00
34.	Total Contribution Refunds (from Line 28(d))	· · · · · · · · · · · · · · · · · · ·	, 63.60
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	, , 115.00	, 3416.40
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	, 45.64	, , , 775.98
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0	, , 0
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	, 45.64	, 775.98

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:				:	PAGE	_	_	OF	1	
check only one)										
X	11a		11b		11c		12			
	13		14		15		16			17

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
	Statements may not be sold or used by any personante and address of any political committee to	
NAME OF COMMITTEE (In Full)		
·	Conservative Politica	I Action Committee
Full Name (Last, First, Middle Initial) A. Woolley, Donald		Date of Receipt
Mailing Address Box 1598		12 ′ 10 ′ 2012
Sahuarita	State Zip Code AZ 85629	
FEC ID number of contributing	again an an agus gairtí aire an thairtí an s	Amount of Each Receipt this Period
federal political committee.	C	, 15.00
Name of Employer retired	Occupation	
Receipt For: Primary General	Aggregate Year-to-Date ▼	·
Other (specify)	, 270.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y
City	State Zip Code	este i mai la
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.		il de la desta de de la companya de
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	The state of the s	
Full Name (Last, First, Middle Initial)		
c		Date of Receipt
Mailing Address		M M / D D Y Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	· C	en e
federal political committee. Name of Employer	Occupation	i de la compaña de compaña de la compaña
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	+ T2 (1 90 - 1) - 1 90 + 1 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
SUBTOTAL of Receipts This Page (optional)		, , 15.00
TOTAL This Period (last page this line number	only)	45.00
		<u> </u>

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 1 OF 1			
TEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE N (check only	TOMBLIT.			
I LIMIZED DISBURGENIEN IS	for each category of the Detailed Surmary Page	21b	22 🔀 23 🗌 24 🔲 25 🔲 26			
	Dotailog Guitimary Fage	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used and address of any political	by any person committee to	n for the purpose of soliciting contributions solicit aontributions from such committee.			
NAME OF COMMITTEE (In Full)						
Southern Arizona Cor	servative Po	olitical	Action Committee			
Full Name (Last, First, Middle Initial)			Date of Disbursement			
Mailing Address			Manifest Control of the control of t			
City	State Zip Code					
Purpose of Disbursement	· · ·		Amount of Each Disbursoment this Period			
Candidate Name		Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:	Type	on the section Make Levil (1995) and the Community of the			
Senate	Primary General Other (specify)					
State: District:	· · · · · · · · · · · · · · · · · · ·					
Full Name (Last, First, Middle Initial)						
3.			Date of Disbursement			
Mailing Address			M M / D D / Y Y Y			
			and the second of the second o			
City	State Zip Code					
Purpose of Disbursement	<u> </u>	,				
•			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type				
Office Sought: House Disbursem						
1 1	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
c.			Date of Disbursement			
Mailing Address			M - M - / D - / Y - Y - Y			
Mailing Address						
City	State Zip Code					
Purpose of Disbursement	1					
Condidate Name			Amount of Each Disbursement this Period			
Candidate Name	"	Category/ Type	in the first present the control of the AH decided of the con-			
Office Sought: House Disbursem	nent For:	Type	The section of the section of the section of			
Senate	Primary General					
_	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		······	0			
TOTAL This Period (last page this line number only).						

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 1 OF 1
FOR LINE 13 OF FORM 3X

		Detailed Summary Page
NAME OF COMMITTEE (IF Southern Ai	•	ve Political Action Committee
LOAN SOURCE Fall N	Name (Last, First, Middle Initial)	Election: Primary General
Mailing Address		Other (specify) ▼
City	State ZIF	P Code
Original Amount of Loa		
Went of the first length of the length of th		
TERMS Date Inc		Due Interest Rate Secured:
		% (apr) Yes N
	Guarantors (if any) to Loan Source	
1. Full Name (Last, Fi	rst, Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, Firs	st, Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, Fire	st, Middle Initial)	Name of Employer
Mailing Address		Occupation
	70.4	Amount Guaranteed
City	State ZIP Code	Outstanding:
4. Full Name (Last, Fire	st, Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount County Control of County Count
City	State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period	This Page (optional)	
TOTALS This Period (last	page in this line only)	<i>f</i>
Carry outstanding balance	e only to LINE 3, Schedule D, for this line	e. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

rederal Election Commission, washington, D.C. 20463		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Southern Arizona Conservative Politic	cal Action Committe	e C 005012046
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	6/
Mailing Address	Date Incurred or Established	Michael V. Distor V. V. V. V. V. V. V. V.
City State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurre	d (Millian) / College / Tyley very very
B. If line of credit, Amount of this Draw:	Ralance	The state of the first field of the state of
C. Are other parties secondarily liable for the debt incurre		
D. Are any of the following pledged as collateral for the loproperty, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other No Yes If yes, specify:	oan: real estate, personal deposit, chattel papers,	What is the value of this collateral? Does the lender have a perfected security interest in it? No Yes
E. Are any future contributions or future receipts of intere collateral for the loan? No Yes If yes, s		What is the estimated value?
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:	,
	City, State, Zip:	-
F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan	s pledged for this loan, or if the was made and the basis on wi	amount pledged does not equal or exceed nich it assures repayment.
G. COMMITTEE TREASURER Typed Name		DATE
Signature		
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the ter are accurate as stated above. II. The loan was made on terms and conditions (incoming similar extensions of credit to other borrowers of III. This institution is aware of the requirement that a complied with the requirements set forth at 11 Cl	cluding interest rate) no more fa comparable credit worthiness. a loan must be made on a basi	avorable at the time than those imposed for s which assures repayment, and has
AUTHORIZED REPRESENTATIVE	171 100.02 and 100.142 in mak	DATE
Typed Name Signature	le	TWO WILLS AND TO THE TOTAL OF THE
-		The Development of the State of the Section Co.

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE OF FOR LINE NUMBER: (check only one) 9 10

NAME OF	COMMITTEE	(In Full)
---------	-----------	-----------

Southern Arizona Conservative Political Action Committee

A. 1	Full Name (Last, First, Middle Initial) adf Deb	Naturer of Debt (Purpose):		
Maili	ing Address			
City	State	Zip Code		
0	utstanding Balance Beginning This Period			
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
	er berktaus Prasidus trattes it serdies Marchisel	The translation of the first and the first and	Reserve on an entering one nearly the entering	
B. F	ull Name (Last, First, Middle Initial) of Debt	or or Creditor	Nature of Debt (Purpose):	
Maili	ing Address			
City	State	Zip Code		
0	utstanding Balance Beginning This Period			
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
	. Carlotte (In etcer Euchneiler Terlinetter Gest	on (f.) The conflict of the of Pennils of Francis Pennils and the of Consideration (f.)	Lessed the Clark Of Lessed to Control Control Lessed Lessed.	
C.	Full Name (Last, First, Middle Initial) of Det	otor or Creditor	Nature of Debt (Purpose):	
Maili	ing Address			
City		State Zip Code		
0	utstanding Balance Beginning This Period			
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
	ലാലു വി വെട ്ടും സംവവ ാഗം വി	et Ter Dieeler T oell, ofker fo r in 111. 0% steel	lade be n amele n a televe elek	
SU	BTOTALS This Period This Page (optional)			
TO.	TALS This Period (last page this line numb	er only)		
то	TAL OUTSTANDING LOANS from Schedul	e C (last page only)		
AD:	D 2) and 3) and carry forward to appropria	te line of Summary Page (last page only) ▶		
	- 			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES		PAGE 1 OF 1 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)	-	FEC IDENTIFICATION NUMBER ▼
Southern Arizona Conservative Political Action Commi	ittee	C 005012046
theck if 24-hour report 48-hour report New report Amends report	filed on	VW / DVD / YVYVY
Full Name (Last, First, Middle Initial) of Payee	Date	
	[FM	LATA 1 LOCAL 1 LATA A RAL
Mailing Address	Amou	<u></u>
City State Zip Code		<u></u>
	<u> </u>	1 1 <u> 1 1 1 1 1 1 1 1 </u>
Purpose of Expenditure Category/ Type	Office Soug	He
Name of Federal Candidate Supported or Opposed by Expenditure:		President District:
	Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disburseme	nt For: Primary General
Full Name (Last, First, Middle Initial) of Payee	Date	
Mailing Address	A	<u></u>
City State Zip Code	Amou	ur
· · · · · · · · · · · · · · · · · · ·	1	
Category	Office Soug	
Name of Federal Candidate Supported or Opposed by Expenditure:		Senate District: President
	Check One:	Support Oppose
Calendar Year-To-Date Per Election	Disburseme	nt For: Primary General
for Office Sought	O	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		
(a) SUBTUTAL OF HARMACH HUMBHINGH EXPENDITURES		-1-7 1-17-1-1-12-1-1
(b) SUBTOTAL of Uniternized Independent Expenditures	•	
(a) TOTAL Independent Firearditures	7	
(c) TOTAL Independent Expenditures	D	<u></u>
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.		
- .	MATERIAL /	D . D / Y . Y . Y . Y
Signature	الحدث	<u> </u>

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(2 U.S.C. §441a(d))

(To be used only by Political Committees in the General Elements of the General E

PAGE 1 OF 1

(10	be used only	by Political Con	ımıπees in the	General Election)	FOR LINE	25 OF FUNIVI 3X
AME OF COMMITTEE (In Full)	<u> </u>		D = 1!4! ·		O =	!11
Southern Arizona as your committee been designated to ma		Prvative			Comr	nittee
ordinated expenditures by a political party YES NO		Full Name of 30	outonate Comm	nice:		
YES, name the designating committee:		Mailing Address				
		City		Sta	ate Zil	P Code
Full Name (Last, First, Middle Initial) of	Each Payee	<u></u>		Purpose of Exp	enditure	Category/
Mailing Address				Date	·	Туре
City	State	Zip Code	1	S 10 /	· · · · · ·	
Name of Federal Candidate Supported	Office Sough	ht: House Senate Presidentia	State:	Amount		
Aggregate General Election Expenditure for this Candidate ▶			**			
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	Category/
Mailing Address				Date		Туре
City	State	Zip Code		EXI TO NO.	**************************************	-
Name of Federal Candidate Supported	Office Sough	Senate Presidentia				
Aggregate General Election Expenditure for this Candidate ▶			i		7-	
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	Category/
Mailing Address				Date		Туре
City	State	Zip Code)	Na = 303 /	, Lang	
Name of Federal Candidate Supported	Office Sough	House Senate Presidentia	State: District:		<u></u>	
Aggregate General Election Expenditure for this Candidate ▶		3. 3. 4.			<u></u>	
SUBTOTAL of Expenditures This Page (op	tional)				· . ·	
) (1.1.1.) - X),	0
'OTAL This Period (last page this line nur	nber only)			D> "		

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds and Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)	
USE ONLY ONE SECTION	ON, A or B
A. State and Local Party Committees Fixed Percentage (select one)	
Preeidential-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% rederal)
B. Separate Segregated Funds and Noncor	
B. Separate Segregated Funds and Noncor	nnected Committees
B. Separate Segregated Funds and Noncor Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage	nnected Committees centage of 50% federal funds, check ds, indicate ratio below %

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 1 OF 1

So.	of COMMITTEE (In Full) uthern Arizona Conservative Political Action₄Committee
1	S FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ITIES APPEARING ON THIS REPORT.
Method	s of allocation:
l.	FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
II.	Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. Fer PACs Ortly: Direct candidates support includes public communications or voter drives that refer to both foderal and portederal candidates, regardless of whether there is a reference to a political party. Such expenses

are allocated using a time/space method.		
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %

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

PAGE	1	O	F	1	
FOR L	INE	18a	OF	FORM	ЗХ

NAME OF COMMITTEE (In Full)

Southern Arizona Conservative Political Action Committee

NAM	E OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE 1 OF 1 FOR LINE 18b OF FORM 3X

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

(To be used by State, District and Local Party Committees Only)

PAGE 1 OF 1 FOR LINE 30a OF FORM 3X

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SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

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SCHEDULE L-A (FEC Form 3X)

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

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PAGE 1

OF 1

ITEMIZED RECEIPTS OF LEVIN FUNDS F to Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any positical committee to solicit committee. NAME OF COMMITTEE (In Full) Southern Arizona Conservative Political Action Committee Full Natine (Last, First, Middle Initial) / Full Organization Name Date of Receipt (พิทัย พ.) / คือ ติด . / คราย รางาราย รา Mailing Address Amount of Each Receipt this Period City State Zip Code to multiple Res I have Treated Than The Constitution of Name of Employer or Principal Place of Business Aggregate Year-to-Date . The contraction of the property of the prop 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 Harrie and arthur of rails and sand are the form of 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 ा विकासकरी र विकासकर करने **Mailing Address** Amount of Each Receipt this Period City State Zip Code and the second s Production of the Contract of Name of Employer or Principal Place of Business Aggregate Year-to-Date والمراز والمرازي والمرازي والمراز والمراز والمراز والمراز والمناز والمناز Occupation annii an in 200 ania an 1 a air an 1 an 1 an 1 an 1 Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. M N M / D N D / American Hamiles and Service Mailing Address Amount of Each Receipt this Period Zip Code City State Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation <u> Sana Talan San 19</u>04-yilgi yeni <u>artib</u>i kengala<u>sti yen</u>gile di sana SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

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(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked USPS First Class Mail Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED