

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 17 P 4: 22

USE FEC MAILING LABEL
OR
TYPE OR PRINT

C00346403 030800
EDWARD WREN
ASSOCIATED HIGHWAY PATROLMAN O
F. ARIZONA
1240 E MISSOURI
PHOENIX AZ 85014

2. FEC IDENTIFICATION NUMBER

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

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>4/1/00</u> through <u>6/30/00</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 5,803.60
(b) Cash on Hand at Beginning of Reporting Period	\$ 4,618.26	
(c) Total Receipts (from Line 19)	\$ 7,134.00	\$ 44,537.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 11,752.26	\$ 50,340.60
7. Total Disbursements (from Line 30)	\$ 8,020.58	\$ 46,608.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 3,731.68	\$ 3,731.68
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 800 E Street, NW Washington, DC 20463 Toll Free 800-424-9660 Local 202-684-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

Type or Print Name of Treasurer
Ed WREN

Signature of Treasurer
Ed Wren

Date
7-14-00

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

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FEC FORM 3X
(revised 6/95)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

OF COMMITTEE

Associated Highway Patrolmen of Arizona

REPORT COVERING PERIOD

FROM **4/1/00**

TO: **6/30/00**

		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			11(a)(i)
i.	Itemized (use Schedule A)	\$ 7,134.00*	\$44,537.00	11(a)(i)
ii.	Unitemized			11(a)(i)
iii.	Total (add i and ii) >			11(b)
b.	Political Party Committees			11(a)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a iii, b and c) >	\$ 7,134.00	\$44,537.00	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)			18
18.	Transfers from Nonfederal Account for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$ 7,134.00	\$44,537.00	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	\$ 7,134.00	\$44,537.00	
*Funds received from payroll deduction - individual amounts under \$200.00				
II. Disbursements				
21.	Operating Expenditures:			21(a)(i)
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i.	Federal Share			21(b)
ii.	Non-Federal Share	\$ 4,358.58	\$24,438.92	21(c)
b.	Other Federal Operating Expenditures	\$ 4,358.58	\$24,438.92	22
c.	Total Operating Expenditures (add a i, a ii, and b) >			23
22.	Transfers to Affiliated/Other Party Committees		\$ 7,000.00	24
23.	Contributions to Federal Candidates/Committees and Other Political Committees			25
24.	Independent Expenditures (use Schedule E)			26
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			27
26.	Loan Repayments Made			28(a)
27.	Loans Made			28(b)
28.	Refunds of Contributions To:			28(c)
a.	Individuals/Persons Other Than Political Committees			28(d)
b.	Political Party Committees			29
c.	Other Political Committees (such as PACs)			30
d.	Total Contribution Refunds (add a, b and c) >	\$ 3,662.00	\$15,170.00	31
29.	Other Disbursements	\$ 8,020.58	\$46,608.92	
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$ 8,020.58	\$46,608.92	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	\$ 7,134.00	\$44,537.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	\$ 7,134.00	\$44,537.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	\$ 4,358.58	\$24,438.92	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 35 from 35) >	\$ 4,358.58	\$24,438.92	37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
 FOR LINE NUMBER 21B

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

NAME OF COMMITTEE (In Full)

Associated Highway Patrolmen of Arizona

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
City of Phoenix	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) fees	4/5/00	\$ 16.00
B. Full Name, Mailing Address and ZIP Code Special Olympics	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) donation	4/5/00	\$ 25.00
C. Full Name, Mailing Address and ZIP Code City of Tempe	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) fees	4/21/00	\$ 80.00
D. Full Name, Mailing Address and ZIP Code Cellular One	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) cell phone	4/21/00	\$ 85.27
E. Full Name, Mailing Address and ZIP Code Arizona Hotel & Motel Assoc. 1240 E. Missouri Phoenix, AZ 85014	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) rent	4/21/00	\$ 336.60
F. Full Name, Mailing Address and ZIP Code PLEA 5033 N. 19th Ave., #108 Phoenix, AZ 85015-3295	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) contract fees	5/16/00	\$1,500.00
G. Full Name, Mailing Address and ZIP Code AHPA 1240 E. Missouri Phoenix, AZ 85014	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) reimbursement	5/16/00	\$1,500.00
H. Full Name, Mailing Address and ZIP Code AHPA	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) golf tourn.	5/16/00	\$ 170.00
I. Full Name, Mailing Address and ZIP Code Cellular One	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) cell phone	5/22/00	\$ 80.18

\$3,793.05

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)
Associated Highway Patrolmen of Arizona

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
USAA	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) fees	5/22/00	\$ 140.86
B. Full Name, Mailing Address and ZIP Code Arizona Hotel & Motel Assoc. 1240 E. Missouri Phoenix, AZ 85014	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) rent	6/1/00	\$ 337.92
C. Full Name, Mailing Address and ZIP Code All Tec	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) cell phone	6/21/00	\$ 86.75
D. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	\$ 565.53
TOTAL This Period (last page this line number only)	\$4,358.58

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Associated Highway Patrolmen of Arizona

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Council to Elect Gregg Stanton Unknown	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/00	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Comm. to Elect Linda Gray 4535 W. Columbine Drive Glendale, AZ 85304	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/1/00	\$ 256.00
C. Full Name, Mailing Address and ZIP Code Tom Horne for State Senate 2824 E. Missouri Lane Phoenix, AZ 85028	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/1/00	\$ 256.00
D. Full Name, Mailing Address and ZIP Code Comm. to Elect Dr. Carroll	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/8/00	\$ 100.00
E. Full Name, Mailing Address and ZIP Code New Democrat 2000 Coalition	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/14/00	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Kunasek for Supervisor 8315 E. Mawson Road Phoenix, AZ 85207	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/00	\$ 200.00
G. Full Name, Mailing Address and ZIP Code Republican Nat'l Senate Election Committee The Dwight D. Eisenhower Rep Ctr 310 1st St, SE, Wash., DC 20003	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$ 500.00
H. Full Name, Mailing Address and ZIP Code Debra Norris Re-election	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$ 100.00
I. Full Name, Mailing Address and ZIP Code	contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$2,912.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

Associated Highway Patrolmen of Arizona

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Comm to Elect Kathleen Dunbar 3110 N. Jackson Avenue Tucson, AZ 85000	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/00	\$ 250.00
B. Full Name, Mailing Address and ZIP Code Friends of Carpenter 2000 20042 N. 17th Drive Phoenix, AZ 85000	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$ 250.00
C. Full Name, Mailing Address and ZIP Code Elect Overton 2000 1138 Oro Vista Litchfield Park, AZ 85000	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$ 250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$ 750.00

TOTAL This Period (last page this line number only)

\$3,662.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 7-14-00
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JK</i> PREPARER	7-17-00 DATE PREPARED