Ln 1303108033

STATEMENT OF

RECEIVED

FORM 1	1 1				<u> </u>	FEC MAllomanus pro	
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		nple:If typing, type the lines.	12FE4M		
Southern A	rizoņa C	onservativ	e, Poli	tical Action	Commi	ttee	
	1.1.1.1.1.						
ADDRESS (number an	d street)	D Box 1504	<u> </u>	11111			
(Check if ad is changed)		Sahuarita			AZ 85629		
			CITY		STATE	ZIP CODE	
COMMITTEE'S E-MAI	L ADDRESS (PI	ease provide only one	e-mail add	iress)			
(Check if a		uthernarizonac	onserv	ativepac@reag	an,com		
is changed		1.	1.1.1				
COMMITTEE'S WEB	PAGE ADDRES	G (URL)					
	<u>[ht</u>	tp://www.sacp	ac201	2.com , , , ,			
(Check if a is changed				1.1 1 1 1 1 1			
2. DATE 06" '7° '2013 '							
3. FEC IDENTIFIC	ATION NUMBE	R CC	0512	046			
4. IS THIS STATEM	IENT .	IEW (N) OR	×	AMENDED (A)			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Type or Print Name of	f Treasurer	avid Bareis	SS				
Signature of Treasure		and Be	neer	<i>A</i>	Date $\overset{\mathtt{M}}{\mathcal{O}}$	6'08' 2013	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.							
Office Use Only				For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)	

FEC Fo	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	
Candidate	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidat	e information below.)
(b)	This committee is an authorized committee, and is NOT a principal campa information below.)	ign committee. (Complete the candidate
Name of Candidate		
Candidate Party Affiliat	Office tion Sought: House Senate	State President District
(c)	This committee supports/opposes only one candidate, and is NOT an auth	orized committee.
Name of Candidate		
Party Cor	mmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organiza	tion on line 6.) Its connected organization is a
	Corporation w/o Capital	Stock Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) X	This committee supports/opposes more than one Federal candidate, and is committee. (i.e., nonconnected committee)	s NOT a separate segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on	line 6.)
Joint Fun	draising Representative:	· · · · · · · · · · · · · · · · · · ·
(g)	This committee collects contributions, pays fundraising expenses and disburs	es net proceeds for two or more political
	committees/organizations, at least one of which is an authorized committee of	a federal candidate.
(h)	This committee collects contributions, pays fundraising expenses and disburse committees/organizations, none of which is an authorized committee of a federal committee of a federal committee.	
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID	number C
2.	FEC ID	number C
3.	FEC ID	number C
A		number C

90	_	3
-20	е	-3

	FEC FORM I (Revised C	2/2009)	rage 3						
Write or Type Committee Name									
Southern Arizona Conservative Political Action Committee									
6.	Name of Any Connected C	rganization, Affiliated Committee, Joint Fundralsing Representative, or Leadersh	p PAC Sponsor						
L	IONE								
L		<u> </u>							
	Mailing Address								
		CITY STATE 2	ZIP CODE						
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor						
7.	Custodian of Records: Identification books and records.	ntify by name, address (phone number optional) and position of the person in poss	ession of committee						
	Full Name Donal	d T.,Wqolley, , , , , , , , , , , , , , , , , , ,							
	Mailing Address	1582 W Calle Media Luz	le Media Luz						
		[PO Box 1598							
		Sahuarita AZ 85629	9						
	Title or Position	CITY STATE 2	ZIP CODE						
	[Chairman , , , , ,		6,]-[5333 ,]						
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of						
	Full Name of Treasurer	Bareiss							
	Mailing Address	PO,Box 654							
		Sonoita AZ 85637	vin cons						
	Title or Position		SIP CODE 5						
ı									

Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

PayPal

PO Box 45950

PO Box 45950

PO Box 45950

NE 68145

CITY

CITY

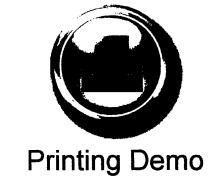
STATE

STATE

ZIP CODE

ZIP CODE

Page 4



5631080338

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

(3/2005)

PREPARER