

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Kyrsten Sinema for Congress			
ADDRESS (number and street) PO Box 25879			
CITY, STATE, and ZIP CODE Tempe AZ 85285			
2. NAME OF CANDIDATE Kyrsten Sinema	3. OFFICE SOUGHT (State and District) House AZ 09		4. FEC IDENTIFICATION NUMBER C00508804
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Machinists Non Partisan Political League 9000 Machinists Pl Upper Marlboro MD 20772		Date (month, day, year) 08/24/2016	Amount 5000.00
Transaction ID : 11c-000059747		Occupation	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Machinists Non Partisan Political League 9000 Machinists Pl Upper Marlboro MD 20772		Date (month, day, year) 08/24/2016	Amount 5000.00
Transaction ID : 11c-000059746		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Council of Insurance Agents and Brokers PAC 701 Pennsylvania Ave NW Ste 750 Washington DC 20004		Date (month, day, year) 08/25/2016	Amount 2500.00
Transaction ID : 11c-000059749		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer American Medical Assoc. PAC (AMPAC) 25 Massachusetts Ave NW Ste 600 Washington DC 20001-7400		Date (month, day, year) 08/24/2016	Amount 5000.00
Transaction ID : 11c-000059745		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Supporting House Problem Solvers (SHP PAC) 1050 17th St NW Ste 590 Washington DC 20036		Date (month, day, year) 08/25/2016	Amount 1000.00
Transaction ID : 11c-000059748		Occupation	
SIGNATURE (optional) Judith Allen [Electronically Filed]		DATE 08/26/2016	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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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Neal Thomas 5510 E Sanna St Paradise Valley AZ 85253	Name of Employer ComTrans Transaction ID : 11ai-000059750 Occupation President	Date (month, day, year) 08/25/2016	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
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