

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
H41, 500M

JUL 22 11 37 AM '93

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ARIZONA COTTON GROWERS POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C-00033795
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 4139 E. Broadway		
CITY, STATE and ZIP CODE Phoenix, AZ 85040		
3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).		

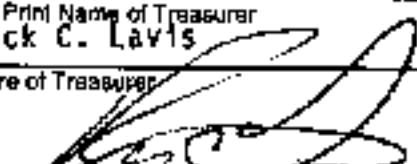
4. TYPE OF REPORT

- (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
- Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____
- (b) Is this Report an Amendment? YES NO

2 3 0 3 1 0 4 1 3

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>1/1/93</u> through <u>6/30/93</u>		
6. (a)	Cash on Hand January 1, 19 <u>93</u>		\$ 896.06
(b)	Cash on Hand at Beginning of Reporting Period	\$ 896.06	
(c)	Total Receipts (from Line 19)	\$ 1250.00	\$ 1250.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 2146.06	\$ 2146.06
7.	Total Disbursements (from Line 30)	\$ 629.93	\$ 629.93
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1516.13	\$ 1516.13
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 988 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	

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 Rick C. Lavis	Date 7/19/93
Signature of Treasurer 	

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

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

(revised 1/1/93)

NAME OF COMMITTEE <u>Arizona Cotton Growers Political Action Committee</u>	REPORT COVERING PERIOD	
	FROM: <u>1/1/93</u>	TO: <u>6/30/93</u>
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees	1250.00	1250.00
i. Itemized (use Schedule A).....		
ii. Unitemized.....		
ii. Total..... (add i and ii) >	<u>1250.00</u>	<u>1250.00</u>
b. Political Party Committees.....		
c. Other Political Committees (such as PACs).....		
d. Total Contributions..... (add a iii, b and c) >	<u>1250.00</u>	<u>1250.00</u>
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Nonfederal Account for Joint Activity.....	-0-	-0-
19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	<u>1250.00</u>	<u>1250.00</u>
20. Total Federal Receipts..... (subtract line 18 from line 19) >	<u>1250.00</u>	<u>1250.00</u>
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....		
ii. Non-Federal Share.....		
b. Other Federal Operating Expenditures.....		
c. Total Operating Expenditures..... (add a i, a ii, and b) >	-0-	-0-
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	629.93	629.93
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees.....		
b. Political Party Committees.....		
c. Other Political Committees (such as PACs).....		
d. Total Contribution Refunds..... (add a, b and c) >	-0-	-0-
29. Other Disbursements.....		
30. Total Disbursements..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	<u>629.93</u>	<u>629.93</u>
31. Total Federal Disbursements..... (subtract line 21 a ii from line 30) >	<u>629.93</u>	<u>629.93</u>
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d).....	1250.00	1250.00
33. Total Contribution Refunds (from line 28d).....	-0-	-0-
34. Net Contributions (other than loans) (subtract line 33 from 32).....	<u>1250.00</u>	<u>1250.00</u>
35. Total Federal Operating Expenditures..... (add 21 a i and 21 b) >	-0-	-0-
36. Offsets to Operating Expenditures (from line 15).....	-0-	-0-
37. Net Operating Expenditures..... (subtract line 36 from 35) >	-0-	-0-

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SCHEDULE A

ITEMIZED RECEIPTS

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

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)

ARIZONA COTTON GROWERS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Shawler Rt. 1 Box 79 Parker, AZ 85344	Self employed		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	6/8/93	\$250.00
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pete Cockrill P. O. Box 1127 Coolidge, AZ 85228	Self employed		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	6/25/93	150.00
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick Cockrill 1251 N. Havasupai Lane Coolidge, AZ 85228	Self employed		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	6/28/93	100.00
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James H. Johnston P. O. Box 820 Higley, AZ 85236	Self employed		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	6/24/93	100.00
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. S. Francis, Jr. 9017 N. 57th Drive Glendale, AZ 85302-3145	Self employed		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	6/23/93	200.00
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. T. Gladden P. O. Box 1061 Buckeye, AZ 85326	Self employed		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	6/23/93	200.00
	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger Hooper P. O. Box 11047 Casa Grande, Az 85230-1047	Self employed		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	6/26/93	100.00
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 1100.00

TOTAL This Period (last page this line number only)

20303415

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

ARIZONA COTTON GROWERS POLITICAL ACTION COMMITTEE

13033000416

<p>A. Full Name, Mailing Address and ZIP Code H. M. Johnson Rt. 1 Box 141 Somerton, AZ 85350</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Farmer</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 6/29/93</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code J. S. Wilson P. O. Box 488 Buckeye, AZ 85326</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Farmer</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 6/29/93</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>150.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>1250.00</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
ARIZONA COTTON GROWERS POLITICAL ACTION COMMITTEE

930330417

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
J. Kyl Coffee Cup Club P. O. Box 10246 Phoenix, AZ 85064-0246	Reelection Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/12/93	\$29.93
B. Full Name, Mailing Address and ZIP Code Symington for Governor 4531 N. 16th Street, Ste. 124 Phoenix, AZ 85016	Reelection Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/1/93	\$500.00
C. Full Name, Mailing Address and ZIP Code Edens for Rep. Com. 2114 E. Sam Juan Phoenix, AZ 85016	Reelection Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/93	\$100.00
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)

TOTAL This Period (last page this line number only)

\$629.93

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.

Hand Delivered DATE OF RECEIPT

First Class Mail POSTMARKED

Registered/Certified Mail POSTMARKED

7-27-93

No Postmark

Postmark Illegible

Received from the House Office of Records and Registration DATE OF RECEIPT

Received from the Senate Office of Public Records DATE OF RECEIPT

Other (Specify): POSTMARKED

and/or DATE OF RECEIPT

J. M. H.
PREPARER

7-22-93
DATE PREPARED

7 5 0 3 6 2 0 J 4 1 6