

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Committee to Re-Elect Trent Franks to Congress

ADDRESS (number and street) PO Box 8105 Check if different than previously reported. (ACC) Glendale AZ 85312-8105

2. FEC IDENTIFICATION NUMBER C C00367110 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT AZ 08

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2013 through M M / D D / Y Y Y Y 12 / 31 / 2013

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 Lisa Teschler

Signature of Treasurer Lisa Teschler [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 24 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Committee to Re-Elect Trent Franks to Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	49415	148143.32
(b) Total Contribution Refunds (from Line 20(d)) .....	0	2500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	49415	145643.32
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	25961.42	110860
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	3299
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25961.42	107561
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	34345.7	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	295586.4	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Committee to Re-Elect Trent Franks to Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20625	54038
(ii) Unitemized.....	690	9546.98
(iii) TOTAL of contributions from individuals ▶	21315	63584.98
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	28100	84558.34
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	49415	148143.32
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	3299
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0	88.87
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	49415	151531.19

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25961.42	110860
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	5000
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	5000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	2500
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	2500
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	25961.42	118360

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10892.12
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	49415
25. SUBTOTAL (add Line 23 and Line 24).....	60307.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25961.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	34345.7

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Committee to Re-Elect Trent Franks to Congress**

**A. Mike Beehler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5248 W 129th Terrace  
 City Shawnee Mission State KS Zip Code 66209-3400  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Burns & McDonnell Occupation Engineer  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 26 / 2013  
**Transaction ID : A-CF66854**  
 Amount of Each Receipt this Period  
 500

**B. Julie Carr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1735 Fairview Avenue  
 City Mc Lean State VA Zip Code 22101-4709  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Kountoupes Consulting Occupation Principal  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013  
**Transaction ID : A-CF66862**  
 Amount of Each Receipt this Period  
 500

**C. Mr. Alan Castillo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6401 W Post Road  
 City Chandler State AZ Zip Code 85226-1163  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Castillo Technologies, LLC Occupation President  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2013  
**Transaction ID : A-CF66880**  
 Amount of Each Receipt this Period  
 250

**SUBTOTAL** of Receipts This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Choudhry**

Mailing Address 768 11th Street SE

City Washington State DC Zip Code 20003-2810

FEC ID number of contributing federal political committee. **C**

Name of Employer Nickles Group Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1273**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : A-CF66890**

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Michael Curtis**

Mailing Address 501 E Thomas Road

City Phoenix State AZ Zip Code 85012-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer Curtis, Goodwin Sullivan Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : A-CF66883**

Amount of Each Receipt this Period  
 1500

**C.** Full Name (Last, First, Middle Initial)  
**Michael Curtis**

Mailing Address 501 E Thomas Road

City Phoenix State AZ Zip Code 85012-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer Curtis, Goodwin Sullivan Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : A-CF66884**

Amount of Each Receipt this Period  
 500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Dacey**

Mailing Address 139 Trent Shores Drive

City State Zip Code  
Trent Woods NC 28562-7741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pace LLP Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF66891**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Jay Drossman**

Mailing Address 2391 Areca Palm Road

City State Zip Code  
Boca Raton FL 33432-7970

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 16 / 2013

**Transaction ID : A-CF66874**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Phyllis Drossman**

Mailing Address 2391 Areca Palm Road

City State Zip Code  
Boca Raton FL 33432-7970

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 16 / 2013

**Transaction ID : A-CF66875**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Frazee</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013	
Mailing Address 6313 Evermay Drive		<b>Transaction ID : A-CF66903</b>	
City Mc Lean	State VA	Zip Code 22101-2309	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer Twin Logic Strategies	Occupation GR Consultant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) <b>B. Joseph H Gibson</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address 5040 Glenbrook Terrace NW		<b>Transaction ID : A-CF66893</b>	
City Washington	State DC	Zip Code 20016-2602	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer The Gibson Group LLC	Occupation Business Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) <b>C. Thomas Harrison</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address 1092 N Roosevelt Avenue		<b>Transaction ID : A-CF66857</b>	
City Chandler	State AZ	Zip Code 85226-1198	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Robertson Fuel Systems, LLC	Occupation Pres & Gen Mgr		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

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



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Heckman**

Mailing Address 143 Martin Lane

City Alexandria State VA Zip Code 22304-7748

FEC ID number of contributing federal political committee. **C**

Name of Employer Capital City Partners Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : A-CF66900**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Jason Isaak**

Mailing Address 6745 N 12th Place

City Phoenix State AZ Zip Code 85014-1106

FEC ID number of contributing federal political committee. **C**

Name of Employer Policy Development Group Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : A-CF66886**

Amount of Each Receipt this Period  
 150

**C.** Full Name (Last, First, Middle Initial)  
**Kenneth Kamon**

Mailing Address PO Box 10589

City Midland State TX Zip Code 79702-7589

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : A-CF66898**

Amount of Each Receipt this Period  
 2600

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Billy N Morris**

Mailing Address 7413 W Emile Zola Avenue

City	State	Zip Code
Peoria	AZ	85381-6030

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 11 / 2013**

**Transaction ID : A-CF66894**

Amount of Each Receipt this Period  
**25**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Billy N Morris**

Mailing Address 7413 W Emile Zola Avenue

City	State	Zip Code
Peoria	AZ	85381-6030

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 11 / 2013**

**Transaction ID : A-CF66896**

Amount of Each Receipt this Period  
**25**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Billy N Morris**

Mailing Address 7413 W Emile Zola Avenue

City	State	Zip Code
Peoria	AZ	85381-6030

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2013**

**Transaction ID : A-CF66895**

Amount of Each Receipt this Period  
**25**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**75.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Rosen**

Mailing Address 6000 Island Boulevard  
Apt. 1401

City Aventura State FL Zip Code 33160-3784

FEC ID number of contributing federal political committee. **C**

Name of Employer Services LLC Occupation Owner/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 25 / 2013

**Transaction ID : A-CF66850**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Donald Rumsfeld**

Mailing Address 1749 W Golf Road  
Unit 310

City Mount Prospect State IL Zip Code 60056-4025

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Author

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : A-CF66901**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Donald Rumsfeld**

Mailing Address 1749 W Golf Road  
Unit 310

City Mount Prospect State IL Zip Code 60056-4025

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Author

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : A-CF66902**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6200.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Smoldon**

Mailing Address 357 E Monte Vista Road

City State Zip Code  
Phoenix AZ 85004-1438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
B3 Strategies CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : A-CF66899**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Suzann Suna**

Mailing Address 17267 Ventana Drive

City State Zip Code  
Boca Raton FL 33487-1020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2013

**Transaction ID : A-CF66876**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Paul Tartell**

Mailing Address 640 N Island

City State Zip Code  
Golden Beach FL 33160-2257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : A-CF66878**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3350.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Randy Tate**

Mailing Address 12508 Lawyers Road

City Herndon State VA Zip Code 20171-2119

FEC ID number of contributing federal political committee. **C**

Name of Employer Tate Strategies Occupation Public Affairs Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : A-CF66907**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Stanley Tate**

Mailing Address 1175 NE 125th Street Suite 102

City North Miami State FL Zip Code 33161-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer Tate Enterprises Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 13 / 2013

**Transaction ID : A-CF66872**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Richard P Timmons**

Mailing Address 8822 W Sequoia Drive

City Peoria State AZ Zip Code 85382-8545

FEC ID number of contributing federal political committee. **C**

Name of Employer Honeywell Occupation Professional - Medical MD

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : A-CF66885**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

**20625.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amazon Corporate LLC**

Mailing Address 126 C Street NW

City Washington State DC Zip Code 20001-2118

FEC ID number of contributing federal political committee. **C C00360354**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : A-CF66888**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**American Principles PAC**

Mailing Address 20533 Biscayne Boulevard Suite 250

City Miami State FL Zip Code 33180-1529

FEC ID number of contributing federal political committee. **C C00492579**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2013

**Transaction ID : A-CF66848**

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**American Principles PAC**

Mailing Address 20533 Biscayne Boulevard Suite 250

City Miami State FL Zip Code 33180-1529

FEC ID number of contributing federal political committee. **C C00492579**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : A-CF66871**

Amount of Each Receipt this Period  
 500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Arizona Westside Districts PAC**

Mailing Address 1850 N Central Avenue  
Suite 1100

City Phoenix State AZ Zip Code 85004-4541

FEC ID number of contributing federal political committee. **C** C00415539

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : A-CF66843**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Asian American Hotel Owner Association PAC**

Mailing Address 228 S Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00336743

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : A-CF66889**

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Best Buy Employee Political Forum**

Mailing Address 7601 Penn Avenue S

City Minneapolis State MN Zip Code 55423-3645

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : A-CF66859**

Amount of Each Receipt this Period  
 1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ebay Inc. Committee For Responsible Internet Commerce**

Mailing Address 228 S Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : A-CF66868**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**ENGPAC**

Mailing Address 2980 Fairview Park Drive

City Falls Church State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : A-CF66844**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Eye Of The Tiger PAC**

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : A-CF66892**

Amount of Each Receipt this Period  
 1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Florida Congressional Committee**

Mailing Address 6100 Hollywood Boulevard  
Suite 305

City Hollywood State FL Zip Code 33024-7981

FEC ID number of contributing federal political committee. **C C00127811**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : A-CF66870**

Amount of Each Receipt this Period  
 3600

**B.** Full Name (Last, First, Middle Initial)  
**General Dynamics Corporation PAC**

Mailing Address 2941 Fairview Park Drive  
Suite 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : A-CF66852**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Google Netpac**

Mailing Address 1101 New York Avenue NW  
Floor 2

City Washington State DC Zip Code 20005-4344

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2013

**Transaction ID : A-CF66879**

Amount of Each Receipt this Period  
 1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gridiron Pac**

Mailing Address 345 Park Avenue

City State Zip Code  
New York NY 10154-0004

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 19 / 2013

**Transaction ID : A-CF66865**

Amount of Each Receipt this Period  
1500

**B.** Full Name (Last, First, Middle Initial)  
**Honeywell International PAC**

Mailing Address 101 Constitution Avenue NW  
Suite 500W

City State Zip Code  
Washington DC 20001-2177

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : A-CF66863**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin PAC**

Mailing Address 2121 Crystal Drive

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 01 / 2013

**Transaction ID : A-CF66849**

Amount of Each Receipt this Period  
1500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin PAC**

Mailing Address 2121 Crystal Drive

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 21 / 2013

**Transaction ID : A-CF66855**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin PAC**

Mailing Address 2121 Crystal Drive

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2013

**Transaction ID : A-CF66867**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Michele Pac**

Mailing Address 610 S Boulevard

City State Zip Code  
Tampa FL 33606-2693

FEC ID number of contributing federal political committee. **C** C00486738

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2013

**Transaction ID : A-CF66866**

Amount of Each Receipt this Period  
1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A. National Action Committee (NACPAC)**

Full Name (Last, First, Middle Initial)  
National Action Committee (NACPAC)

Mailing Address 3389 Sheridan Street  
Suite 424

City Hollywood State FL Zip Code 33021-3606

FEC ID number of contributing federal political committee. **C C00147983**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : A-CF66869**

Amount of Each Receipt this Period  
1000

**B. NCTAPAC**

Full Name (Last, First, Middle Initial)  
NCTAPAC

Mailing Address 25 Massachusetts Avenue NW  
Suite 100

City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : A-CF66845**

Amount of Each Receipt this Period  
1000

**C. Pinnacle West PAC**

Full Name (Last, First, Middle Initial)  
Pinnacle West PAC

Mailing Address 400 N 5th Street

City Phoenix State AZ Zip Code 85004-3902

FEC ID number of contributing federal political committee. **C C00015933**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2013

**Transaction ID : A-CF66864**

Amount of Each Receipt this Period  
1500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Salt River Project PAC**

Mailing Address PO Box 52025

City Phoenix State AZ Zip Code 85072-2025

FEC ID number of contributing federal political committee. **C** C00048579

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : A-CF66853**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Universal Music Group PAC**

Mailing Address 3699 Wilshire Boulevard Suite 1290

City Los Angeles State CA Zip Code 90010-2732

FEC ID number of contributing federal political committee. **C** C00392464

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : A-CF66842**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**UPSPAC**

Mailing Address 55 Glenlake Parkway

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : A-CF66887**

Amount of Each Receipt this Period  
 500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Verizon Wireless Good Government Club**

Mailing Address 1300 I Street NW  
Lower 4

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2013

**Transaction ID : A-CF66851**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

28100.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle Industries</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 12 3 4 5 6 7 8 9 0 2175
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement Software & Hosting		Category/ Type 001	<b>Transaction ID : B-E-66927</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Black Angus</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 7606 W Bell Road			Amount of Each Disbursement this Period 12 3 4 5 6 7 8 9 0 60
City Glendale	State AZ	Zip Code 85308-8619	
Purpose of Disbursement Food & Beverage		Category/ Type 001	<b>Transaction ID : B-E-66936</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Campaign Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 117 N Saint Asaph Street			Amount of Each Disbursement this Period 12 3 4 5 6 7 8 9 0 1450
City Alexandria	State VA	Zip Code 22314-3109	
Purpose of Disbursement Website Maintenance & Hosting		Category/ Type 001	<b>Transaction ID : B-E-66942</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3685.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 117 N Saint Asaph Street			Amount of Each Disbursement this Period 412.88 <b>Transaction ID : B-E-66904</b>
City Alexandria	State VA	Zip Code 22314-3109	
Purpose of Disbursement Website Fundraising		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Campaign Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 117 N Saint Asaph Street			Amount of Each Disbursement this Period 1425 <b>Transaction ID : B-E-66905</b>
City Alexandria	State VA	Zip Code 22314-3109	
Purpose of Disbursement Website Maintenance & Hosting		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Campaign Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 117 N Saint Asaph Street			Amount of Each Disbursement this Period 602.8 <b>Transaction ID : B-E-66906</b>
City Alexandria	State VA	Zip Code 22314-3109	
Purpose of Disbursement Fundraising & Credit Card Fees		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2440.68
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 32.84 <b>Transaction ID : B-E-66909</b>
City Alexandria State VA Zip Code 22314-3109	Purpose of Disbursement Fundraising & Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 1311.52 <b>Transaction ID : B-E-66917</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food & Beverage 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CD Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address PO Box 1877		Amount of Each Disbursement this Period 2024.4 <b>Transaction ID : B-E-66943</b>
City Alexandria State VA Zip Code 22313-1877	Purpose of Disbursement Website Advertising & List Matching 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3368.76
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. CD Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address PO Box 1877		Amount of Each Disbursement this Period 448.5 <b>Transaction ID : B-E-66908</b>
City Alexandria	State VA	
Purpose of Disbursement Advertising - Facebook		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Central Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 5240 W Cactus Road		Amount of Each Disbursement this Period 203.39 <b>Transaction ID : B-E-66924</b>
City Glendale	State AZ	
Purpose of Disbursement Monthly Storage Fee		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Central Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 5240 W Cactus Road		Amount of Each Disbursement this Period 203.39 <b>Transaction ID : B-E-66940</b>
City Glendale	State AZ	
Purpose of Disbursement Monthly Storage Fee		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	855.28
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 44			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Central Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 5240 W Cactus Road		Amount of Each Disbursement this Period 203.39
City Glendale	State AZ	
Zip Code 85304-1947	Purpose of Disbursement Monthly Storage Fee	<b>Transaction ID : B-E-66918</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Click &amp; Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 2200 Kraft Drive Suite 1175		Amount of Each Disbursement this Period 23.05
City Blacksburg	State VA	
Zip Code 24060-6704	Purpose of Disbursement Merchant Fee	<b>Transaction ID : B-E-66923</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Click &amp; Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 2200 Kraft Drive Suite 1175		Amount of Each Disbursement this Period 23.05
City Blacksburg	State VA	
Zip Code 24060-6704	Purpose of Disbursement Merchant Fee	<b>Transaction ID : B-E-66935</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	249.49
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Click &amp; Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 2200 Kraft Drive Suite 1175		Amount of Each Disbursement this Period 23.05
City Blacksburg	State VA	
Zip Code 24060-6704	Purpose of Disbursement Merchant Fee	001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Air</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 927.8
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel Expense: Airfare	002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Electoral Strategies, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 2121 NE 211th Street		Amount of Each Disbursement this Period 700
City Miami	State FL	
Zip Code 33179-1634	Purpose of Disbursement Fundraising and/or Consulting	003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1650.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Electoral Strategies, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013		
Mailing Address 2121 NE 211th Street			Amount of Each Disbursement this Period 780		
City Miami	State FL	Zip Code 33179-1634	Transaction ID : B-E-66947		
Purpose of Disbursement Fundraising and/or Consulting		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013		
Mailing Address 2320 W Peoria Avenue			Amount of Each Disbursement this Period 38.12		
City Phoenix	State AZ	Zip Code 85029-4753	Transaction ID : B-E-66916		
Purpose of Disbursement Shipping Fee		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Hirsch Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013		
Mailing Address 7788 E Oakshore Drive			Amount of Each Disbursement this Period 1800		
City Scottsdale	State AZ	Zip Code 85258-3489	Transaction ID : B-E-66919		
Purpose of Disbursement Fundraising & Consulting		003 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2618.12
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Marriott - West Palm Beach</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 1001 Okeechobee Boulevard		Amount of Each Disbursement this Period 352.98 <b>Transaction ID : B-E-66937</b>
City West Palm Beach State FL Zip Code 33401-6214	Purpose of Disbursement Travel: Hotel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nova Information Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 71 <b>Transaction ID : B-E-66920</b>
City Knoxville State TN Zip Code 37920-6612	Purpose of Disbursement Merchant Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Nova Information Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 71 <b>Transaction ID : B-E-66932</b>
City Knoxville State TN Zip Code 37920-6612	Purpose of Disbursement Merchant Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	494.98
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Nova Information Services</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013	
Mailing Address 7300 Chapman Highway			Amount of Each Disbursement this Period 90	
City Knoxville	State TN	Zip Code 37920-6612	Transaction ID : B-E-66915	
Purpose of Disbursement Merchant Fee		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Pf Changs</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 16170 N 83rd Avenue			Amount of Each Disbursement this Period 260.84	
City Peoria	State AZ	Zip Code 85382-4790	Transaction ID : B-E-66911	
Purpose of Disbursement Food & Beverage		Category/ Type 003		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. The Great 48th Group</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013	
Mailing Address PO Box 2833			Amount of Each Disbursement this Period 1000	
City Scottsdale	State AZ	Zip Code 85252-2833	Transaction ID : B-E-66944	
Purpose of Disbursement Campaign Consulting		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1350.84
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 44		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 3800 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 478.8
City Phoenix	State AZ	
Zip Code 85034-3712	Purpose of Disbursement Travel: Airfare	<b>Transaction ID : B-E-66941</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 10011 N Metro Parkway E		Amount of Each Disbursement this Period 386.86
City Phoenix	State AZ	
Zip Code 85051-1524	Purpose of Disbursement Phones: Wireless	<b>Transaction ID : B-E-66926</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 10011 N Metro Parkway E		Amount of Each Disbursement this Period 324.69
City Phoenix	State AZ	
Zip Code 85051-1524	Purpose of Disbursement Phone: Wireless	<b>Transaction ID : B-E-66948</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1190.35
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 44	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

Full Name (Last, First, Middle Initial) <b>A. Catherine Kutz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 18620 Muncaster Road		Amount of Each Disbursement this Period 5488.02
City Derwood	State MD Zip Code 20855-1426	
Purpose of Disbursement Fundraising and Consulting	Category/Type 003	<b>Transaction ID : B-E-66930</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lisa Teschler</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 9104 Kristin Lane		Amount of Each Disbursement this Period 2000
City Fairfax	State VA Zip Code 22032-1423	
Purpose of Disbursement FEC Reporting & Bookkeeping	Category/Type 001	<b>Transaction ID : B-E-66931</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7488.02
<b>TOTAL</b> This Period (last page this line number only).....	25392.37

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10-L49**  
Committee to Re-Elect Trent Franks to Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Trent Franks</b>	<b>[PERSONAL FUNDS]</b>	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000	0	75000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 21 / 2002	12/31/2006	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	75000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L51**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Trent Franks</b>	<b>[PERSONAL FUNDS]</b>	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000	0	50000

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	09 / 04 / 2002	12/31/2006	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	50000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10-L52  
**Committee to Re-Elect Trent Franks to Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Trent Franks</b>	<b>[PERSONAL FUNDS]</b>	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		
City Peoria	State AZ	ZIP Code 85383-3213

Original Amount of Loan 20000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 20000
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**TERMS**

Date Incurred M 09 / D 05 / Y 2002	Date Due M M / D D / Y 12/31/2006	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="20000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L55

Committee to Re-Elect Trent Franks to Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2000

Trent Franks

Primary

General

Other (specify) ▼

Primary 2000

Mailing Address

6828 W Camino De Oro

City

State

ZIP Code

Peoria

AZ

85383-3213

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000

4900

100

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08 / 09 / 2002

12/31/2006

0.00 % (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

100.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L58**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Trent Franks</b>	<b>[PERSONAL FUNDS]</b>	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000	5000	45000

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 19 / Y 2002	M / D / Y 12/31/2006		0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	45000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L986**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Trent Franks</b>	<b>[PERSONAL FUNDS]</b>	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4000	0	4000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 12 / Y 2003	M M / D D / Y 12/31/2006	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="4000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/>

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L987

Committee to Re-Elect Trent Franks to Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2000

Trent Franks

Primary

General

Other (specify) ▼

Primary 2000

Mailing Address

6828 W Camino De Oro

City

State

ZIP Code

Peoria

AZ

85383-3213

Original Amount of Loan

20000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

20000

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

01

27

2003

12/31/2006

0.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

20000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L989**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Trent Franks</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000	0	2000

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 02 / 04 / 2011	M M / D D / Y Y Y Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	2000.00
<b>TOTALS</b> This Period (last page in this line only).....	216100.00
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Base Connect, Inc</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th Street NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 34955.53	<b>Transaction ID : SD10-DEBT66385</b>	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 34955.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Century Data Systems Corp. (BC)</b>	Nature of Debt (Purpose): Data Processing
Mailing Address 1155 15th Street NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 16077.33	<b>Transaction ID : SD10-DEBT64621</b>	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 16077.33

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Consolidated Mailing Services (BC)</b>	Nature of Debt (Purpose): Printing
Mailing Address 504 Shaw Road Suite 206	
City State Zip Code Sterling VA 20166-9437	

Outstanding Balance Beginning This Period 8070.5	<b>Transaction ID : SD10-DEBT64319</b>	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 8070.5

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	59103.36
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Committee to Re-Elect Trent Franks to Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Legacy Lists Inc. - Brokerage</b>		Nature of Debt (Purpose): List Rental
Mailing Address 1155 15th Street NW Suite 410		
City State	Zip Code	
Washington	DC 20005-2748	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT64602</b>	
<input type="text" value="17079.94"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="17079.94"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Legacy Lists Inc. - Management</b>		Nature of Debt (Purpose): List Rental
Mailing Address 1155 15th Street NW Suite 410		
City State	Zip Code	
Washington	DC 20005-2748	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT64622</b>	
<input type="text" value="1103.1"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="1103.1"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr Donald Gumpertz</b>		Nature of Debt (Purpose): Refund - Over Contribution Limit
Mailing Address PO Box 2450		
City State	Zip Code	
Toluca Lake CA	91610-0450	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT63696</b>	
<input type="text" value="1500"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="1500"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="19683.04"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Trent Franks to Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lenora Pusta</b>		Nature of Debt (Purpose): Refund - over contribution limit
Mailing Address 138 W Sunflower Drive		
City Payson	State AZ	Zip Code 85541-6152

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT63697	
<input type="text" value="700"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="700"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="700.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="79486.40"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="216100.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="295586.40"/>