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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

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

| NAME OF COMMITTEE IN FULL Mary Rose Wilcox For Congress | | |] | |
|---|---|----|--|---------|
| ADDRESS (number and street) PO Box 24507 | | | - | |
| CITY, STATE, and ZIP CODE | | | - | |
| Phoenix | AZ 850 | 74 | | |
| 2. NAME OF CANDIDATE | 3. OFFICE SOUGHT (State and District) House AZ 07 | | 4. FEC IDENTIFICATION NUMBER C00559989 | |
| Mary Rose Wilcox | | | | |
| 5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING | YES, IT AMENDS THE NOTICE FILED ON | | / | <i></i> |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | | Date (month, | Amount |
| Gail Gordon | Policy Development Group | | day, year) | |
| | | | 08/12/2014 | 1000.00 |
| 10316 N 50th St | | | | |
| | Transaction ID : 11ai-000002236 | | | |
| Paradise Valley AZ 85253 | AZ 85253 Occupation Public Affairs Consultant | | | |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | | Date (month, day, year) | Amount |
| | | | day, year) | |
| | | | | |
| | Occupation | | | |
| | Occupation | | | |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer Occupation | | Date (month, day, year) | Amount |
| | | | | |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | | Date (month, | Amount |
| | | | day, year) | |
| | Occupation | | | |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | | Date (month, day, year) | Amount |
| | | | | |
| | Occupation | | | |
| SIGNATURE (optional) Aaron Kizer | DATE 08/14/2014 [Electronically Filed] | | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 | |

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