

07 JUL 16 AM 10:20

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Jon Kyl for U.S. Senate

ADDRESS (number and street) P.O. Box 10246

Check if different than previously reported. (ACC)

Phoenix AZ 85064

2. FEC IDENTIFICATION NUMBER **C00279521**

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

STATE **AZ** DISTRICT **00**

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 [ ] [ ] [ ] in the State of [ ]

(c) 30-Day POST-Election Report for the:

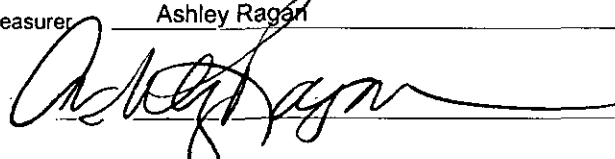
General (30G)  Runoff (30R)  Special (30S)

Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period **04 01 2007** through **06 30 2007**

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 **Ashley Ragan**

Signature of Treasurer  Date **07 09 2007**

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

Office Use Only									
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27020232752

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Jon Kyl for U.S. Senate

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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)).....	23980.00	47405.42
(b) Total Contribution Refunds (from Line 20(d)).....	580.00	19030.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	23400.00	28375.42
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	55752.07	698213.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	106260.28	175190.14
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	-50508.21	523023.65
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>460684.81</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**For further information contact:**

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

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

27020232753

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name  
Jon Kyl for U.S. Senate

Report Covering the Period: From:

MM 04 DD 01 YYYY 2007

To:

MM 06 DD 30 YYYY 2007

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5000.00	9950.00
(ii) Unitemized.....	17980.00	19227.00
(iii) TOTAL of contributions from individuals..... ▶	22980.00	29177.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	1000.00	18228.42
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	23980.00	47405.42
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	106260.28	175190.14
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	2318.52	5900.74
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	132558.80	228496.30

27020232754

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	55752.07	698213.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	580.00	8030.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	11000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	580.00	19030.00
21. OTHER DISBURSEMENTS.....	0.00	29000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	56332.07	746243.79

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	384458.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	132558.80
25. SUBTOTAL (add Line 23 and Line 24).....	517016.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	56332.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	460684.81

27020232755

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

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

FOR LINE NUMBER: PAGE 5 / 40

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  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)  
Jon Kyl for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
DR. James Barlow  
Mailing Address 8697 West Andrea Drive  
City Peoria State AZ Zip Code 85383  
FEC ID number of contributing federal political committee. C  
Name of Employer Beatrice Keller Dermatology  
Occupation Physician - Dermatology  
Receipt For: 2012  
 Primary  General  
 Other (specify)▼  
Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2007

Transaction ID: 70628.C74998

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
DR. Patricia Carroll-Chen  
Mailing Address 8815 North 65th Street  
City Paradise Valley State AZ Zip Code 85253  
FEC ID number of contributing federal political committee. C  
Name of Employer Patricia A. Carroll, MD, PC  
Occupation Physician  
Receipt For: 2012  
 Primary  General  
 Other (specify)▼  
Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2007

Transaction ID: 70628.C75004

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
MRS. Dawn Grove  
Mailing Address 6847 North 1st Avenue  
City Phoenix State AZ Zip Code 85013  
FEC ID number of contributing federal political committee. C  
Name of Employer Karsten Manufacturing Corporation  
Occupation Attorney  
Receipt For: 2012  
 Primary  General  
 Other (specify)▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2007

Transaction ID: 70628.C74999

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4500.00

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

27020232756

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

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

FOR LINE NUMBER: PAGE 6 / 40  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)  
A. MR. James Simmons

Mailing Address 3957 Paradise View Drive

City Paradise Valley   State AZ   Zip Code 85253

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

Name of Employer N/A   Occupation Retired

Receipt For: 2012  
 Primary    General  
 Other (specify)▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 02 / 2007

Transaction ID: 0719200129C20272

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....	▶	500.00
TOTAL This Period (last page this line number only) .....	▶	5000.00

27020232757

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

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

FOR LINE NUMBER: PAGE 7 / 40

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)

A. Salt River Project Political Inv. Cmte.

Mailing Address P.O. 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: 2012

Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
05 / 21 / 2007

Transaction ID: 70628.C74992

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

1000.00

27020232758

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

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

FOR LINE NUMBER: PAGE 8 / 40

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)

A. Media Placement Technologies

Mailing Address 336 Commerce Street Old Town

City State Zip Code  
Alexandria VA 22314-

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

82000.00

Date of Receipt

MM / DD / YYYY  
04 / 25 / 2007

Transaction ID: 70522.C74764

Amount of Each Receipt this Period

82000.00

Offsets to Operating Expenditure

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Republican National Committee

Mailing Address 310 First Street, S. E.

City State Zip Code  
Washington DC 20003-

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

18079.13

Date of Receipt

MM / DD / YYYY  
04 / 02 / 2007

Transaction ID: 70522.C74741

Amount of Each Receipt this Period

6332.91

Offsets to Operating Expenditure

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Republican National Committee

Mailing Address 310 First Street, S. E.

City State Zip Code  
Washington DC 20003-

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

32810.13

Date of Receipt

MM / DD / YYYY  
04 / 23 / 2007

Transaction ID: 70522.C74742

Amount of Each Receipt this Period

14731.00

Offsets to Operating Expenditure

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

103063.91

27020232759



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

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

FOR LINE NUMBER: PAGE 9 / 40

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)

A. Republican National Committee

Mailing Address 310 First Street, S. E.

City	State	Zip Code
Washington	DC	20003-

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

35962.06

Date of Receipt

MM / DD / YYYY  
04 / 30 / 2007

Transaction ID: 70522.C74824

Amount of Each Receipt this Period

3151.93

Offsets to Operating Expenditure

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3151.93

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

106215.84

27020232760

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

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

FOR LINE NUMBER: PAGE 10 / 40

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Senate Majority Fund

Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
3702.06

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2007

Transaction ID: 70522.C74820

Amount of Each Receipt this Period  
579.84

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
3840.06

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2007

Transaction ID: 70522.C74821

Amount of Each Receipt this Period  
138.00

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
3895.06

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2007

Transaction ID: 70522.C74822

Amount of Each Receipt this Period  
55.00

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

772.84

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

27020232761

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

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

FOR LINE NUMBER: PAGE 11 / 40

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)

Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)

A. Senate Majority Fund

Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify)▼  
Election Cycle-to-Date ▼  
4474.90

Date of Receipt

05 / 28 / 2007

Transaction ID: 70628.C75001

Amount of Each Receipt this Period

579.84

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Senate Majority Fund

Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify)▼  
Election Cycle-to-Date ▼  
4612.90

Date of Receipt

05 / 29 / 2007

Transaction ID: 70628.C75003

Amount of Each Receipt this Period

138.00

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Senate Majority Fund

Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify)▼  
Election Cycle-to-Date ▼  
4667.90

Date of Receipt

05 / 29 / 2007

Transaction ID: 70628.C75002

Amount of Each Receipt this Period

55.00

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

772.84

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

27020232762

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

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

FOR LINE NUMBER: PAGE 12 / 40

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)  
A. Senate Majority Fund  
Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
5247.74

Date of Receipt  
06 / 29 / 2007

Transaction ID: 70709.C75007

Amount of Each Receipt this Period  
579.84

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)  
B. Senate Majority Fund  
Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
5302.74

Date of Receipt  
06 / 29 / 2007

Transaction ID: 70709.C75008

Amount of Each Receipt this Period  
55.00

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)  
C. Senate Majority Fund  
Mailing Address P.O. Box 32025

City State Zip Code  
Phoenix AZ 85064-

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
5440.74

Date of Receipt  
06 / 29 / 2007

Transaction ID: 70709.C75009

Amount of Each Receipt this Period  
138.00

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **772.84**

**TOTAL** This Period (last page this line number only) ..... ▶ **2318.52**

27020232763

**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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)  
**A. American Express**

Mailing Address P.O. Box 360002

City Fort Lauderdale State FL Zip Code 33336-0002

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70404.E9410  
Date of Disbursement  
04 / 02 / 2007

Amount of Each Disbursement this Period  
188.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW

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

Mailing Address 4502 East Oak Street

City Phoenix State AZ Zip Code 85008-

Purpose of Disbursement  
FOOD FOR MEETING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70404.E9411  
Date of Disbursement  
04 / 02 / 2007

Amount of Each Disbursement this Period  
188.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: FOOD FOR MEETING

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

Mailing Address P.O. Box 360002

City Fort Lauderdale State FL Zip Code 33336-0002

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70628.E9472  
Date of Disbursement  
06 / 12 / 2007

Amount of Each Disbursement this Period  
52.28

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 241.14

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

27020232764

**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 14 / 40

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesale</b>		Transaction ID: 70628.E9473 Date of Disbursement 06 / 12 / 2007	
Mailing Address 4502 East Oak Street		Amount of Each Disbursement this Period 52.28	
City Phoenix	State AZ	Zip Code 85008-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: FOOD FOR MEETING
Purpose of Disbursement FOOD FOR MEETING		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:			

Full Name (Last, First, Middle Initial) <b>B. Americopy</b>		Transaction ID: 70522.E9443 Date of Disbursement 05 / 14 / 2007	
Mailing Address 856 East Main Street		Amount of Each Disbursement this Period 2699.09	
City Mesa	State AZ	Zip Code 85203-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINTING
Purpose of Disbursement PRINTING		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:			

Full Name (Last, First, Middle Initial) <b>C. Americopy</b>		Transaction ID: 70628.E9485 Date of Disbursement 06 / 26 / 2007	
Mailing Address 856 East Main Street		Amount of Each Disbursement this Period 967.05	
City Mesa	State AZ	Zip Code 85203-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINTING
Purpose of Disbursement PRINTING		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) .....	3666.14
<b>TOTAL</b> This Period (last page this line number only) .....	

27020232765

**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 15 / 40
	<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)  
Jon Kyl for U.S. Senate

**A. Aristotle Publishing**

Full Name (Last, First, Middle Initial)  
Aristotle Publishing

Mailing Address 205 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
COMPUTER SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9481  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
1725.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER SOFTWARE

**B. Arizona Department of Revenue**

Full Name (Last, First, Middle Initial)  
Arizona Department of Revenue

Mailing Address P.O. Box 29079

City Phoenix State AZ Zip Code 85038-9079

Purpose of Disbursement  
QUARTERLY PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70410.E9415  
Date of Disbursement  
04 / 07 / 2007

Amount of Each Disbursement this Period  
130.07

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

QUARTERLY PAYROLL TAXES

**C. Todd Baughman**

Full Name (Last, First, Middle Initial)  
Todd Baughman

Mailing Address 7628 W. Julie Dr.

City Glendale State AZ Zip Code 85308-

Purpose of Disbursement  
WAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70410.E9413  
Date of Disbursement  
04 / 04 / 2007

Amount of Each Disbursement this Period  
235.50

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WAGES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2090.57
<b>TOTAL</b> This Period (last page this line number only) .....	

27020232766

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Todd Baughman</b>		Transaction ID: 70628.E9458 Date of Disbursement 05 / 31 / 2007
Mailing Address 7628 W. Julie Dr.		Amount of Each Disbursement this Period 193.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Glendale	State AZ	
Zip Code 85308-	Purpose of Disbursement WAGES	WAGES
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) <b>B. Bonds Alarm Co.</b>		Transaction ID: 70628.E9484 Date of Disbursement 06 / 26 / 2007
Mailing Address 3900 E Camelback Road , #306		Amount of Each Disbursement this Period 173.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix	State AZ	
Zip Code 85016-	Purpose of Disbursement ALARM MONITORING	ALARM MONITORING
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) <b>C. Camelback At 22nd, LLC</b>		Transaction ID: 70404.E9412 Date of Disbursement 04 / 02 / 2007
Mailing Address 2200 East Camelback Road Suite 101		Amount of Each Disbursement this Period 1159.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix	State AZ	
Zip Code 85016-	Purpose of Disbursement RENT	RENT
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional) .....	1526.91
TOTAL This Period (last page this line number only) .....	

27020232767



**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 17 / 40
	<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)  
Jon Kyl for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Camelback At 22nd, LLC

Mailing Address 2200 East Camelback Road  
Suite 101

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70522.E9439  
Date of Disbursement  
05 / 01 / 2007

Amount of Each Disbursement this Period  
1159.68

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

RENT

**B.** Full Name (Last, First, Middle Initial)  
Camelback At 22nd, LLC

Mailing Address 2200 East Camelback Road  
Suite 101

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9465  
Date of Disbursement  
06 / 04 / 2007

Amount of Each Disbursement this Period  
1159.68

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

RENT

**C.** Full Name (Last, First, Middle Initial)  
Camelback At 22nd, LLC

Mailing Address 2200 East Camelback Road  
Suite 101

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9486  
Date of Disbursement  
06 / 26 / 2007

Amount of Each Disbursement this Period  
1159.68

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

RENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3479.04
<b>TOTAL</b> This Period (last page this line number only) .....	

27020232768

**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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Transaction ID: 70404.E9406 Date of Disbursement 04 / 02 / 2007	
Mailing Address P.O. Box 3005		Amount of Each Disbursement this Period 46.03	
City Southeastern	State PA	Zip Code 19398-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement INTERNET SERVICES	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		INTERNET SERVICES
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Transaction ID: 70602.E9446 Date of Disbursement 05 / 25 / 2007	
Mailing Address P.O. Box 3005		Amount of Each Disbursement this Period 20.69	
City Southeastern	State PA	Zip Code 19398-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement INTERNET SERVICE	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		INTERNET SERVICE
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Comcast</b>		Transaction ID: 70628.E9477 Date of Disbursement 06 / 15 / 2007	
Mailing Address P.O. Box 3005		Amount of Each Disbursement this Period 92.21	
City Southeastern	State PA	Zip Code 19398-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement INTERNET SERVICES	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		INTERNET SERVICES
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	158.93
<b>TOTAL</b> This Period (last page this line number only) .....	

27020232769

**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)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Compass Insurance Agency</b>		Transaction ID: 70602.E9449	
Mailing Address P.O. Box 10067		Date of Disbursement 05 / 25 / 2007	
City Phoenix	State AZ	Zip Code 85064-	Amount of Each Disbursement this Period 550.00
Purpose of Disbursement INSURANCE		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		INSURANCE	
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:	Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Clarence DeLong</b>		Transaction ID: 70522.E9437	
Mailing Address 3811 East Solano Drive		Date of Disbursement 04 / 26 / 2007	
City Paradise Valley	State AZ	Zip Code 85253-	Amount of Each Disbursement this Period 58.14
Purpose of Disbursement WAGES		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		WAGES	
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:	Category/Type		

Full Name (Last, First, Middle Initial) <b>C. Elan</b>		Transaction ID: 70602.E9455	
Mailing Address 7300 Chapman Highway		Date of Disbursement 04 / 01 / 2007	
City Knoxville	State TN	Zip Code 37920-	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CRDIT CARD PROCESSING		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		CRDIT CARD PROCESSING	
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:	Category/Type		

SUBTOTAL of Disbursements This Page (optional) .....	633.14
TOTAL This Period (last page this line number only) .....	

27020232770

**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 20 / 40
	<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)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Elan</b>		Transaction ID: 70628.E9480 Date of Disbursement 05 / 02 / 2007	
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 25.00	
City Knoxville	State TN	Zip Code 37920-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CREDIT CARD PROCESSING		Category/Type	
Candidate Name		CREDIT CARD PROCESSING	
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:			

Full Name (Last, First, Middle Initial) <b>B. Elan</b>		Transaction ID: 70709.E9516 Date of Disbursement 06 / 04 / 2007	
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 25.00	
City Knoxville	State TN	Zip Code 37920-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/Type	
Candidate Name		CREDIT CARD PROCESSING FEE	
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:			

Full Name (Last, First, Middle Initial) <b>C. Fed Ex</b>		Transaction ID: 70404.E9408 Date of Disbursement 04 / 02 / 2007	
Mailing Address P. O. Box 7221		Amount of Each Disbursement this Period 115.30	
City Pasadena	State CA	Zip Code 91109-7321	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement SHIPPING		Category/Type	
Candidate Name		SHIPPING	
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) .....	165.30
<b>TOTAL</b> This Period (last page this line number only) .....	

27020232771

**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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Fed Ex</b>		Transaction ID: 70602.E9445	
Mailing Address P. O. Box 7221		Date of Disbursement M M / D D / Y Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
City Pasadena	State CA	Zip Code 91109-7321	Amount of Each Disbursement this Period 754.28
Purpose of Disbursement SHIPPING		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		SHIPPING
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Fed Ex</b>		Transaction ID: 70628.E9464	
Mailing Address P. O. Box 7221		Date of Disbursement M M / D D / Y Y Y Y Y Y 0 6 / 0 4 / 2 0 0 7	
City Pasadena	State CA	Zip Code 91109-7321	Amount of Each Disbursement this Period 168.84
Purpose of Disbursement SHIPPING		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		SHIPPING
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Frontier</b>		Transaction ID: 70522.E9429	
Mailing Address P.O. Box 3609		Date of Disbursement M M / D D / Y Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
City Kingman	State AZ	Zip Code 86402-3609	Amount of Each Disbursement this Period 79.81
Purpose of Disbursement TELEPHONE		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		TELEPHONE
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1002.93
<b>TOTAL</b> This Period (last page this line number only) .....	

2702023272

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) A. Frontier		Transaction ID: 70522.E9444	
Mailing Address P.O. Box 3609		Date of Disbursement 05 / 14 / 2007	
City Kingman	State AZ	Zip Code 86402-3609	Amount of Each Disbursement this Period 79.81
Purpose of Disbursement TELEPHONE		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/ Type	
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:	TELEPHONE		

Full Name (Last, First, Middle Initial) B. Frontier		Transaction ID: 70628.E9479	
Mailing Address P.O. Box 3609		Date of Disbursement 06 / 15 / 2007	
City Kingman	State AZ	Zip Code 86402-3609	Amount of Each Disbursement this Period 111.70
Purpose of Disbursement TELEPHONE		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/ Type	
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:	TELEPHONE		

Full Name (Last, First, Middle Initial) C. Gary L. Stuart, PC		Transaction ID: 70522.E9438	
Mailing Address 2039 East Glenn		Date of Disbursement 05 / 01 / 2007	
City Phoenix	State AZ	Zip Code 85020-	Amount of Each Disbursement this Period 12420.00
Purpose of Disbursement LEGAL FEES		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/ Type	
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:	LEGAL FEES		

SUBTOTAL of Disbursements This Page (optional) .....	12611.51
TOTAL This Period (last page this line number only) .....	

2702023273

**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 / 40
	<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)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Mitzi Haggard</b>		Transaction ID: 70522.E9436	
Mailing Address 1248 East Victor Hugo Avenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2007	
City Phoenix	State AZ	Zip Code 85022-4950	Amount of Each Disbursement this Period 100.03
Purpose of Disbursement WAGES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		WAGES
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Mitzi Haggard</b>		Transaction ID: 70628.E9457	
Mailing Address 1248 East Victor Hugo Avenue		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2007	
City Phoenix	State AZ	Zip Code 85022-4950	Amount of Each Disbursement this Period 459.32
Purpose of Disbursement WAGES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		WAGES
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Mitzi Haggard</b>		Transaction ID: 70629.E9501	
Mailing Address 1248 East Victor Hugo Avenue		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2007	
City Phoenix	State AZ	Zip Code 85022-4950	Amount of Each Disbursement this Period 50.80
Purpose of Disbursement WAGES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		WAGES
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	610.15
<b>TOTAL</b> This Period (last page this line number only) .....	

27020232774

**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 / 40

17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Ikon Office Solutions, S.W. Dist.</b>		Transaction ID: 70522.E9441 Date of Disbursement 05 / 01 / 2007	
Mailing Address    P.O. Box 7420		Amount of Each Disbursement this Period 64.86	
City Pasadena	State CA	Zip Code 91109-7420	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement COPIER MAINTENANCE		Category/ Type	
Candidate Name		COPIER MAINTENANCE	
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:			

Full Name (Last, First, Middle Initial) <b>B. Images by Kay &amp; Co.</b>		Transaction ID: 70628.E9470 Date of Disbursement 06 / 12 / 2007	
Mailing Address    11260 North Tatum Suite 143		Amount of Each Disbursement this Period 841.60	
City Phoenix	State AZ	Zip Code 85028-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement PHOTOGRAPHY		Category/ Type	
Candidate Name		PHOTOGRAPHY	
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:			

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		Transaction ID: 70410.E9414 Date of Disbursement 04 / 07 / 2007	
Mailing Address    P.O. Box 105083		Amount of Each Disbursement this Period 1611.00	
City Atlanta	State GA	Zip Code 30348-5083	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement QUATERLY PAYROLL TAXES		Category/ Type	
Candidate Name		QUATERLY PAYROLL TAXES	
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) ..... ▶	2517.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

27020232775



**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 / 40	
	<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)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. JL Church Tech Consulting Services, LLC</b>		Transaction ID: 70628.E9463	
Mailing Address 1970 N. Hartford Street #66		Date of Disbursement 06 / 04 / 2007	
City Chandler	State AZ	Zip Code 85225-	Amount of Each Disbursement this Period 95.00
Purpose of Disbursement COMPUTER MAINTENANCE	Category/Type		
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		COMPUTER MAINTENANCE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sarah Morgan</b>		Transaction ID: 70522.E9435	
Mailing Address 829-A East Cochise Drive		Date of Disbursement 04 / 26 / 2007	
City Phoenix	State AZ	Zip Code 85020-	Amount of Each Disbursement this Period 761.84
Purpose of Disbursement WAGES	Category/Type		
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		WAGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sarah Morgan</b>		Transaction ID: 70628.E9459	
Mailing Address 829-A East Cochise Drive		Date of Disbursement 05 / 31 / 2007	
City Phoenix	State AZ	Zip Code 85020-	Amount of Each Disbursement this Period 761.84
Purpose of Disbursement WAGES	Category/Type		
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		WAGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1618.68</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

27020232776

**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 / 40

17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

**A. Sarah Morgan**

Full Name (Last, First, Middle Initial)  
Sarah Morgan

Mailing Address 829-A East Cochise Drive

City Phoenix State AZ Zip Code 85020-

Purpose of Disbursement SEE BELOW

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9490  
Date of Disbursement 06 / 26 / 2007

Amount of Each Disbursement this Period 780.73

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW

**B. Chevys Restaurant**

Full Name (Last, First, Middle Initial)  
Chevys Restaurant

Mailing Address 2650 East Camelback

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement LUNCHEON

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9492  
Date of Disbursement 06 / 26 / 2007

Amount of Each Disbursement this Period 126.20

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]  
MEMO: LUNCHEON

**C. Ikon Office Solutions, S.W Dist.**

Full Name (Last, First, Middle Initial)  
Ikon Office Solutions, S.W Dist.

Mailing Address P.O. Box 7420

City Pasadena State CA Zip Code 91109-7420

Purpose of Disbursement COPIER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9494  
Date of Disbursement 06 / 26 / 2007

Amount of Each Disbursement this Period 91.89

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]  
MEMO: COPIER

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 780.73

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

2702023277

**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)

<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)  
Jon Kyl for U.S. Senate

**A. Staples**

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 1801 E. Camelback Road

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement  
BINDERS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70628.E9495  
Date of Disbursement  
06 / 26 / 2007

Amount of Each Disbursement this Period  
19.45

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: BINDERS

**B. Staples**

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 1801 E. Camelback Road

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement  
LABELS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70628.E9491  
Date of Disbursement  
06 / 26 / 2007

Amount of Each Disbursement this Period  
59.44

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: LABELS

**C. U. S. Postal Service**

Full Name (Last, First, Middle Initial)  
U. S. Postal Service

Mailing Address 4949 East Van Buren

City Phoenix State AZ Zip Code 85026-9636

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70628.E9493  
Date of Disbursement  
06 / 26 / 2007

Amount of Each Disbursement this Period  
41.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 0.00

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

27020232778

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

**A. Verizon Wireless**

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address P.O. Box 9622

City Mission Hills State CA Zip Code 91346-

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9496  
Date of Disbursement  
06 / 26 / 2007

Amount of Each Disbursement this Period  
442.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: TELEPHONE

**B. Sarah Morgan**

Full Name (Last, First, Middle Initial)  
Sarah Morgan

Mailing Address 829-A East Cochise Drive

City Phoenix State AZ Zip Code 85020-

Purpose of Disbursement  
WAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70629.E9502  
Date of Disbursement  
06 / 29 / 2007

Amount of Each Disbursement this Period  
761.84

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

WAGES

**C. Qwest**

Full Name (Last, First, Middle Initial)  
Qwest

Mailing Address P.O. Box 29039

City Phoenix State AZ Zip Code 85038-9060

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70404.E9407  
Date of Disbursement  
04 / 02 / 2007

Amount of Each Disbursement this Period  
72.56

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 834.40

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

27020232779

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

**A. Qwest**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 29039

City Phoenix State AZ Zip Code 85038-9060

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70522.E9431  
Date of Disbursement  
04 / 24 / 2007

Amount of Each Disbursement this Period  
156.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

**B. Qwest**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 29039

City Phoenix State AZ Zip Code 85038-9060

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70602.E9448  
Date of Disbursement  
05 / 25 / 2007

Amount of Each Disbursement this Period  
157.10

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

**C. Qwest**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 29039

City Phoenix State AZ Zip Code 85038-9060

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70628.E9475  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
35.89

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 349.98

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

27020232780

**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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

**A. Qwest**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 29039

City Phoenix State AZ Zip Code 85038-9060

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70628.E9489  
Date of Disbursement  
06 / 26 / 2007

Amount of Each Disbursement this Period  
156.97

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

**B. Qwest**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 29039

City Phoenix State AZ Zip Code 85038-9060

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70629.E9499  
Date of Disbursement  
06 / 29 / 2007

Amount of Each Disbursement this Period  
32.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

**C. Ashley Ragan**

Full Name (Last, First, Middle Initial)  
Mailing Address 307 East Royal Palm

City Phoenix State AZ Zip Code 85020-

Purpose of Disbursement  
WAGES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70522.E9434  
Date of Disbursement  
04 / 26 / 2007

Amount of Each Disbursement this Period  
1148.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

WAGES

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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

1337.55

27020232781

**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 / 40
	<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)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Ashley Ragan</b>		Transaction ID: 70628.E9456 Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2007
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 943.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix State AZ Zip Code 85020-	Purpose of Disbursement WAGES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	WAGES

Full Name (Last, First, Middle Initial) <b>B. Ashley Ragan</b>		Transaction ID: 70628.E9471 Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2007
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 83.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix State AZ Zip Code 85020-	Purpose of Disbursement POSTAGE REIMBURSEMENT Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial) <b>C. Ashley Ragan</b>		Transaction ID: 70629.E9497 Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2007
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 1285.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix State AZ Zip Code 85020-	Purpose of Disbursement WAGES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	WAGES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2311.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

27020232782

**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 / 40	
	<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)  
Jon Kyl for U.S. Senate

**A. U. S. Postal Service**

Full Name (Last, First, Middle Initial)  
U. S. Postal Service

Mailing Address 4949 East Van Buren

City Phoenix State AZ Zip Code 85026-9636

Purpose of Disbursement  
BRM PERMIT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70522.E9433  
Date of Disbursement  
04 / 24 / 2007

Amount of Each Disbursement this Period  
160.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

BRM PERMIT

**B. U. S. Postal Service**

Full Name (Last, First, Middle Initial)  
U. S. Postal Service

Mailing Address 4949 East Van Buren

City Phoenix State AZ Zip Code 85026-9636

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70628.E9461  
Date of Disbursement  
05 / 31 / 2007

Amount of Each Disbursement this Period  
433.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

POSTAGE

**C. United States Postal Service**

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 5021 N. 20th Street

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70522.E9430  
Date of Disbursement  
04 / 17 / 2007

Amount of Each Disbursement this Period  
1301.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 1895.39

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

27020232783



**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 / 40

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)

**A. Card Services**

Mailing Address P.O. Box 13337

City Philadelphia State PA Zip Code 19101-

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70522.E9425  
Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2007

Amount of Each Disbursement this Period

1224.45

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 51 W. 3rd Street

City Tempe State AZ Zip Code 85281-

Purpose of Disbursement  
AIR TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70522.E9427  
Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2007

Amount of Each Disbursement this Period

1698.90

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: AIR TRAVEL

Full Name (Last, First, Middle Initial)

**C. U.S. Senate Restaurants**

Mailing Address First and C Streets, N.E.

City Washington State DC Zip Code 20515-

Purpose of Disbursement  
LUNCHEON MEETINGS

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70522.E9426  
Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2007

Amount of Each Disbursement this Period

402.76

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: LUNCHEON MEETINGS

SUBTOTAL of Disbursements This Page (optional) .....

1224.45

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

27020232784

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

**A. Card Services**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 13337

City Philadelphia State PA Zip Code 19101-

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70602.E9450  
Date of Disbursement  
05 / 25 / 2007

Amount of Each Disbursement this Period  
4742.75

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

**B. J.W. Marriott Desert Ridge**

Full Name (Last, First, Middle Initial)  
Mailing Address 5350 E. Marriot Drive

City Phoenix State AZ Zip Code 85054-

Purpose of Disbursement  
BREAKFAST MEETING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70602.E9452  
Date of Disbursement  
05 / 25 / 2007

Amount of Each Disbursement this Period  
3000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: BREAKFAST MEETING

**C. U.S. Airways**

Full Name (Last, First, Middle Initial)  
Mailing Address 51 W. 3rd Street

City Tempe State AZ Zip Code 85281-

Purpose of Disbursement  
AIR TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70602.E9451  
Date of Disbursement  
05 / 25 / 2007

Amount of Each Disbursement this Period  
1155.70

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: AIR TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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

4742.75

27020232785

**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 35 / 40
	<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)  
Jon Kyl for U.S. Senate

**A. Card Services**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 13337

City Philadelphia State PA Zip Code 19101-

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70628.E9474  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
10060.76

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW

**B. J.W. Marriott Desert Ridge**

Full Name (Last, First, Middle Initial)  
Mailing Address 5350 E. Marriot Drive

City Phoenix State AZ Zip Code 85054-

Purpose of Disbursement  
BREAKFAST EVENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70709.E9506  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
4428.92

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: BREAKFAST EVENT

**C. Senate Gift Shop**

Full Name (Last, First, Middle Initial)  
Mailing Address Russell Senate Office Building  
First & C Street, NE

City Washington State DC Zip Code 20510-

Purpose of Disbursement  
MEMENTOS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70709.E9508  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
3099.62

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: MEMENTOS

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 10060.76

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

27020232786

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

**A. U.S. Airways**

Full Name (Last, First, Middle Initial)  
U.S. Airways

Mailing Address 51 W. 3rd Street

City Tempe State AZ Zip Code 85281-

Purpose of Disbursement  
AIR TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70709.E9505  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
1226.01

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: AIR TRAVEL

**B. Verizon Wireless**

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address P.O. Box 9622

City Mission Hills State CA Zip Code 91346-

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70709.E9509  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
442.08

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: TELEPHONE

**C. Vincents on Camelback**

Full Name (Last, First, Middle Initial)  
Vincents on Camelback

Mailing Address 3930 East Camelback

City Phoenix State AZ Zip Code 85018-

Purpose of Disbursement  
DINNER MEETING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70709.E9507  
Date of Disbursement  
06 / 15 / 2007

Amount of Each Disbursement this Period  
282.31

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: DINNER MEETING

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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

0.00

27020232787

**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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 70404.E9405 Date of Disbursement																					
Mailing Address P.O. Box 9622		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	2		2	0	0	7														
City Mission Hills	State CA	Zip Code 91346-	Amount of Each Disbursement this Period <table border="1"><tr><td>216.95</td></tr></table>	216.95																			
216.95																							
Purpose of Disbursement TELEPHONE	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
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) ▼		TELEPHONE																				
State: District:	Category/Type																						

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: 70404.E9409 Date of Disbursement																					
Mailing Address P.O. Box 17577		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	2		2	0	0	7														
City Baltimore	State MD	Zip Code 21297-0513	Amount of Each Disbursement this Period <table border="1"><tr><td>33.50</td></tr></table>	33.50																			
33.50																							
Purpose of Disbursement TELEPHONE	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
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) ▼		TELEPHONE																				
State: District:	Category/Type																						

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: 70522.E9440 Date of Disbursement																					
Mailing Address P.O. Box 17577		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	1		2	0	0	7														
City Baltimore	State MD	Zip Code 21297-0513	Amount of Each Disbursement this Period <table border="1"><tr><td>36.35</td></tr></table>	36.35																			
36.35																							
Purpose of Disbursement TELEPHONE	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
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) ▼		TELEPHONE																				
State: District:	Category/Type																						

SUBTOTAL of Disbursements This Page (optional) .....	<table border="1"><tr><td>286.80</td></tr></table>	286.80
286.80		
TOTAL This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

27020232788

**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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: 70628.E9467	
Mailing Address P.O. Box 17577		Date of Disbursement 06 / 08 / 2007	
City Baltimore	State MD	Zip Code 21297-0513	Amount of Each Disbursement this Period 77.63
Purpose of Disbursement TELEPHONE		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		TELEPHONE	
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:			

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: 70628.E9487	
Mailing Address P.O. Box 17577		Date of Disbursement 06 / 26 / 2007	
City Baltimore	State MD	Zip Code 21297-0513	Amount of Each Disbursement this Period 51.87
Purpose of Disbursement TELEPHONE		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		TELEPHONE	
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:			

Full Name (Last, First, Middle Initial) C. Tammy Wold		Transaction ID: 70628.E9460	
Mailing Address 2423 East Mallory Street		Date of Disbursement 05 / 31 / 2007	
City Mesa	State AZ	Zip Code 85213-	Amount of Each Disbursement this Period 258.58
Purpose of Disbursement WAGES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		WAGES	
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:			

SUBTOTAL of Disbursements This Page (optional) .....	388.08
TOTAL This Period (last page this line number only) .....	

27020232789

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial) <b>A. Tammy Wold</b>		Transaction ID: 70628.E9462	
Mailing Address 2423 East Mallory Street		Date of Disbursement 06 / 04 / 2007	
City Mesa	State AZ	Zip Code 85213-	Amount of Each Disbursement this Period 226.05
Purpose of Disbursement SEE BELOW		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		SEE BELOW	
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:	Category/ Type		

Full Name (Last, First, Middle Initial) <b>B. Tammy Wold</b>		Transaction ID: 70629.E9498	
Mailing Address 2423 East Mallory Street		Date of Disbursement 06 / 28 / 2007	
City Mesa	State AZ	Zip Code 85213-	Amount of Each Disbursement this Period 61.15
Purpose of Disbursement SEE BELOW		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		SEE BELOW	
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:	Category/ Type		

Full Name (Last, First, Middle Initial) <b>C. Tammy Wold</b>		Transaction ID: 70629.E9503	
Mailing Address 2423 East Mallory Street		Date of Disbursement 06 / 29 / 2007	
City Mesa	State AZ	Zip Code 85213-	Amount of Each Disbursement this Period 591.04
Purpose of Disbursement WAGES		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		WAGES	
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:	Category/ Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>878.24</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>55412.70</b>

27020232790

**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 40 / 40

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Jon Kyl for U.S. Senate

Full Name (Last, First, Middle Initial)  
A. Wesley DeBusk

Transaction ID: 70628.E9482  
Date of Disbursement

Mailing Address 128 W. Southern Hills Road

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	7

City State Zip Code  
Phoenix AZ 85023-6265

Amount of Each Disbursement this Period

530.00
--------

Purpose of Disbursement  
Refund of Contribution Refund  
Candidate Name

010
Category/ Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	530.00
TOTAL This Period (last page this line number only) .....	530.00

27020232791



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955064

7007 0220 0001 4165 8478



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POST OFFICE  
PRIVATE

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ALEXANDRIA, VA 22301-0109

U.S. POSTAGE  
PAID  
PHOENIX, AZ  
85013-07  
JUL 11 11:07  
AMOUNT  
\$464  
0018309-18

UNITED STATES  
POSTAL SERVICE  
0000

22301

07 JUL 16 AM 10:22  
SECRETARY OF THE SENATE

07 JUL 16 AM 10:22  
SECRETARY OF THE SENATE

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

USPS REGISTERED/CERTIFIED 07-11-07  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

**OVERNIGHT DELIVERY SERVICE:**

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

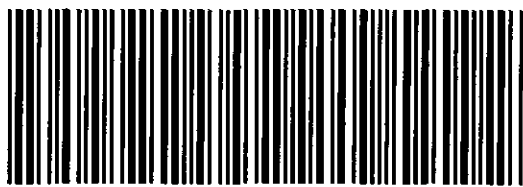
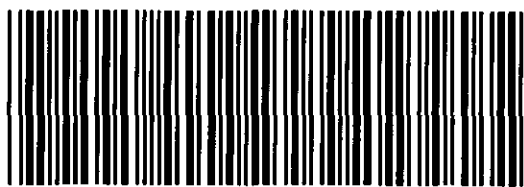
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 07-16-07

27020232793



27020232794