

Jon Kyl
U.S. SENATE

SECRETARY OF THE SENATE
07 JUN 12 PM 12:41

June 2, 2007

Secretary of the Senate
United States Senate
Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510

RE: Jon Kyl for U.S. Senate C00279521

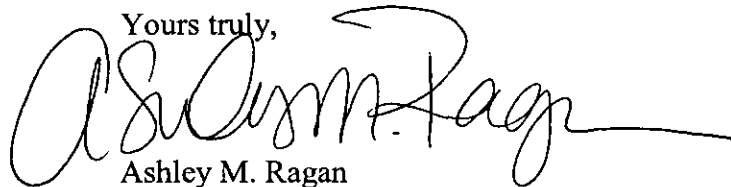
Dear Madam Secretary:

Enclosed is an amended April 15 Quarterly Report filed on behalf of Jon Kyl for U.S. Senate.

A disbursement for \$25.00 to Elan Credit Card Processing was inadvertently left out. The statement was lost in the mail. When reconciling our records I found the missing expense. Please see page 21 Line 17 A.

If you have any questions, please call me at (602) 840-0306.

Yours truly,



Ashley M. Ragan
Treasurer

Enclosure

P.O. Box 10246 • Phoenix, Arizona 85064-0246 • (602) 840-0306 • Fax (602) 840-1970

Paid for by Jon Kyl for U.S. Senate

Contributions are not deductible as charitable contributions for federal income tax purposes.
Not printed at government expense.

27020190763

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

SECRETARY OF THE SENATE

07 office Use Only PM 12:41

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
 CITY STATE ZIP CODE STATE DISTRICT
 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]
 AZ 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 01 01 2007 through 03 31 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 *Ashley Ragan* Date 06 02 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							
-----------------	--	--	--	--	--	--	--

27020190764

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 1

D D
0 1

Y Y Y Y
2 0 0 7

To:

M M
0 3

D D
3 1

Y Y Y Y
2 0 0 7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	7092.00	23425.42
(b) Total Contribution Refunds (from Line 20(d)).....	12350.00	18450.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-5258.00	4975.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	89541.07	642461.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	67945.42	68929.86
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	21595.65	573531.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	384458.08	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

27020190765

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:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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).....	500.00	4950.00
(ii) Unitemized.....	592.00	1247.00
(iii) TOTAL of contributions from individuals..... ▶	1092.00	6197.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	6000.00	17228.42
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	7092.00	23425.42
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.).....	67945.42	68929.86
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	2318.52	3582.22
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	77355.94	95937.50

27020190766

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	89541.07	642461.72
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.....	5350.00	7450.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	11000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	12350.00	18450.00
21. OTHER DISBURSEMENTS.....	4000.00	29000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	105891.07	689911.72

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	412993.21
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	77355.94
25. SUBTOTAL (add Line 23 and Line 24).....	490349.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	105891.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	384458.08

27020190767

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

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

FOR LINE NUMBER: PAGE 5 / 42

(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)
American Academy of Sleep Medicine PAC

Mailing Address 6301 Bandel Road, Ste. 101

City State Zip Code
Rochester MN 55901

FEC ID number of contributing federal political committee. **C** C00331462

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2007

Transaction ID: 70326.C74705

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)
C.R. Bard, Inc. PAC

Mailing Address 730 Central Avenue

City State Zip Code
New Providence NJ 07974

FEC ID number of contributing federal political committee. **C** C00359125

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 08 / 2007

Transaction ID: 70227.C74696

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)
Drinker Biddle PAC

Mailing Address 1500 K Street NW, Suite 1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00370759

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 08 / 2007

Transaction ID: 70227.C74694

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) ▶ 5000.00

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

27020190768

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

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

FOR LINE NUMBER: PAGE 6 / 42

(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

Full Name (Last, First, Middle Initial)
A. Natl Marine Manufacturers Assoc. PAC

Mailing Address 444 N. Capital St., NW, Ste. 645

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00245548

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 70326.C74706

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)	▶	6000.00

27020190769

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

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

FOR LINE NUMBER: PAGE 7 / 42

(check only one)

<input checked="" 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 type="checkbox"/>	14	<input type="checkbox"/>	15
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Renee Paul

Mailing Address 4227 E. Vernon Ave.

City Phoenix State AZ Zip Code 85008

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

Name of Employer Axberg, Hartberg, and Willis
Occupation Investment Advisor

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	7

Transaction ID: 70326.C74718

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)	▶	500.00

27020190770

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

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

FOR LINE NUMBER: PAGE 8 / 42

(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)
Camelback Community Bank

Mailing Address 2777 E. Camelback Road

City State Zip Code
Phoenix AZ 85016-

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

Name of Employer Occupation
Bank Interest N/A

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
0 1 / 1 2 / 2 0 0 7

Transaction ID: 70227.C74693

Amount of Each Receipt this Period
470.00

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

B. Full Name (Last, First, Middle Initial)
FLS Connect, LLC

Mailing Address 7300 Hudson Blvd #270

City State Zip Code
Saint Paul MN 55128-

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70326.C74712

Amount of Each Receipt this Period
55020.10

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

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

Mailing Address P.O. Box 29039

City State Zip Code
Phoenix AZ 85038-9060

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
0 3 / 0 2 / 2 0 0 7

Transaction ID: 70326.C74719

Amount of Each Receipt this Period
665.70

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) ▶ **56155.80**

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

27020190771

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

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

FOR LINE NUMBER: PAGE 9 / 42

(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

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)
Republican National Committee

Mailing Address 310 First Street, S. E.

City Washington State DC Zip Code 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 ▼
11746.22

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3		/	2	6		/	2	0	0	7		

Transaction ID: 70326.C74721

Amount of Each Receipt this Period
11746.22

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)

11746.22

TOTAL This Period (last page this line number only)

67902.02

27020190772

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

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

FOR LINE NUMBER: PAGE 10 / 42

(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)
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 ▼
1383.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 0 2 / 0 5 / 2 0 0 7
 Transaction ID: 70326.C74707
 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 ▼
1438.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 0 2 / 0 5 / 2 0 0 7
 Transaction ID: 70326.C74708
 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)

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 ▼
1576.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 0 2 / 0 5 / 2 0 0 7
 Transaction ID: 70326.C74709
 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) ▶

27020190773

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

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

FOR LINE NUMBER: PAGE 11 / 42

(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)
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 ▼
2156.38

Date of Receipt
M M / D D / Y Y Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70326.C74713

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 ▼
2294.38

Date of Receipt
M M / D D / Y Y Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70326.C74714

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 ▼
2349.38

Date of Receipt
M M / D D / Y Y Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70326.C74715

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) ▶

27020190774

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

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

FOR LINE NUMBER: PAGE 12 / 42

(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. Senate Majority Fund

Full Name (Last, First, Middle Initial)
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 ▼
2929.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2007
Transaction ID: 70404.C74724
 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. Senate Majority Fund

Full Name (Last, First, Middle Initial)
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 ▼
3067.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2007
Transaction ID: 70404.C74723
 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. Senate Majority Fund

Full Name (Last, First, Middle Initial)
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 ▼
3122.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2007
Transaction ID: 70404.C74722
 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) ▶ **2318.52**

27020190775

**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 13 / 42	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Aristotle Publishing		Transaction ID: 70326.E9395	
Mailing Address 205 Pennsylvania Avenue, SE		Date of Disbursement 03 / 21 / 2007	
City Washington	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 1725.00
Purpose of Disbursement COMPUTER SOFTWARE		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) ▼		COMPUTER SOFTWARE
State: District:			

Full Name (Last, First, Middle Initial) B. Arizona Department of Revenue		Transaction ID: 70120.E9316	
Mailing Address P.O. Box 29079		Date of Disbursement 01 / 06 / 2007	
City Phoenix	State AZ	Zip Code 85038-9079	Amount of Each Disbursement this Period 166.15
Purpose of Disbursement PAYROLL TAXES		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) ▼		PAYROLL TAXES
State: District:			

Full Name (Last, First, Middle Initial) C. Arizona Department of Revenue		Transaction ID: 70120.E9318	
Mailing Address P.O. Box 29079		Date of Disbursement 01 / 06 / 2007	
City Phoenix	State AZ	Zip Code 85038-9079	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement ESTIMATED TAXES		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) ▼		ESTIMATED TAXES
State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	2891.15
TOTAL This Period (last page this line number only)	▶	

27020190776

**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 / 42
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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. Arizona Department of Revenue Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 29079 City Phoenix State AZ Zip Code 85038-9079 Purpose of Disbursement INCOME TAXES Candidate Name 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) ▼		Transaction ID: 70326.E9388 Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2007 Amount of Each Disbursement this Period 2230.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INCOME TAXES
---	--	---

B. Auto-Owners Insurance Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 30315 City Lansing State MI Zip Code 48909-7815 Purpose of Disbursement INSURANCE Candidate Name 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) ▼		Transaction ID: 70227.E9361 Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2007 Amount of Each Disbursement this Period 431.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INSURANCE
--	--	---

C. Bank of America Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 37291 City Baltimore State MD Zip Code 21297- Purpose of Disbursement SEE BELOW Candidate Name 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) ▼		Transaction ID: 70120.E9326 Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2007 Amount of Each Disbursement this Period 579.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
--	--	---

SUBTOTAL of Disbursements This Page (optional)	3241.71
TOTAL This Period (last page this line number only)	

27020190777

**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 / 42

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

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

Full Name (Last, First, Middle Initial) A. Starving Students		Transaction ID: 70120.E9327 Date of Disbursement MM / DD / YYYY 01 / 16 / 2007
Mailing Address 2211 West 1st Street		Amount of Each Disbursement this Period 579.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tempe State AZ Zip Code 85281-	[MEMO ITEM] MEMO: MOVING EXPENSES	
Purpose of Disbursement MOVING EXPENSES		Category/ Type
Candidate Name		
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) ▼	

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 70326.E9385 Date of Disbursement MM / DD / YYYY 03 / 05 / 2007
Mailing Address P.O. Box 37291		Amount of Each Disbursement this Period 90.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Baltimore State MD Zip Code 21297-	ANNUAL FEES	
Purpose of Disbursement ANNUAL FEES		Category/ Type
Candidate Name		
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) ▼	

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 70326.E9392 Date of Disbursement MM / DD / YYYY 03 / 21 / 2007
Mailing Address P.O. Box 37291		Amount of Each Disbursement this Period 16.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Baltimore State MD Zip Code 21297-	CREDIT CARD FEES	
Purpose of Disbursement CREDIT CARD FEES		Category/ Type
Candidate Name		
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) ▼	

SUBTOTAL of Disbursements This Page (optional)	106.50
TOTAL This Period (last page this line number only)	

27020190778

**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 16 / 42
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Todd Baughman		Transaction ID: 70105.E9307 Date of Disbursement <input type="text" value="01"/> <input type="text" value="02"/> / <input type="text" value="2007"/>	
Mailing Address 7628 W. Julie Dr.		Amount of Each Disbursement this Period <input type="text" value="417.98"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES	
City Glendale	State AZ		Zip Code 85308-
Purpose of Disbursement WAGES			<input type="text" value="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. Todd Baughman		Transaction ID: 70120.E9319 Date of Disbursement <input type="text" value="01"/> <input type="text" value="06"/> / <input type="text" value="2007"/>	
Mailing Address 7628 W. Julie Dr.		Amount of Each Disbursement this Period <input type="text" value="85.89"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW	
City Glendale	State AZ		Zip Code 85308-
Purpose of Disbursement SEE BELOW			<input type="text" value="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) C. Staples		Transaction ID: 70120.E9320 Date of Disbursement <input type="text" value="01"/> <input type="text" value="06"/> / <input type="text" value="2007"/>	
Mailing Address 1801 E. Camelback Road		Amount of Each Disbursement this Period <input type="text" value="85.89"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TAX FORMS	
City Phoenix	State AZ		Zip Code 85016-
Purpose of Disbursement TAX FORMS			<input type="text" value="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:			

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="503.87"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

27020190779

**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 / 42

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

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

Full Name (Last, First, Middle Initial) A. Todd Baughman		Transaction ID: 70227.E9350	
Mailing Address 7628 W. Julie Dr.		Date of Disbursement MM / DD / YYYY 02 / 02 / 2007	
City Glendale	State AZ	Zip Code 85308-	Amount of Each Disbursement this Period 649.93
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. Todd Baughman		Transaction ID: 70326.E9375	
Mailing Address 7628 W. Julie Dr.		Date of Disbursement MM / DD / YYYY 02 / 28 / 2007	
City Glendale	State AZ	Zip Code 85308-	Amount of Each Disbursement this Period 247.14
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) C. Camelback At 22nd, LLC		Transaction ID: 70120.E9322	
Mailing Address 2200 East Camelback Road Suite 101		Date of Disbursement MM / DD / YYYY 01 / 08 / 2007	
City Phoenix	State AZ	Zip Code 85016-	Amount of Each Disbursement this Period 1159.68
Purpose of Disbursement RENT		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) ▼		RENT
State: District:			

SUBTOTAL of Disbursements This Page (optional)	2056.75
TOTAL This Period (last page this line number only)	

27020190780

**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 18 / 42

<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

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

Full Name (Last, First, Middle Initial) A. Camelback At 22nd, LLC		Transaction ID: 70326.E9391 Date of Disbursement MM / DD / YYYY 03 / 21 / 2007
Mailing Address 2200 East Camelback Road Suite 101		Amount of Each Disbursement this Period 2319.36
City Phoenix State AZ Zip Code 85016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT	Category/ Type	RENT
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. Camelback Community Bank		Transaction ID: 70120.E9317 Date of Disbursement MM / DD / YYYY 01 / 06 / 2007
Mailing Address 2777 E. Camelback Road		Amount of Each Disbursement this Period 342.19
City Phoenix State AZ Zip Code 85016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TAXES	Category/ Type	TAXES
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) C. Camelback Community Bank		Transaction ID: 70120.E9315 Date of Disbursement MM / DD / YYYY 01 / 06 / 2007
Mailing Address 2777 E. Camelback Road		Amount of Each Disbursement this Period 3182.12
City Phoenix State AZ Zip Code 85016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL TAXES	Category/ Type	PAYROLL TAXES
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:		

SUBTOTAL of Disbursements This Page (optional) ▶	5843.67
TOTAL This Period (last page this line number only) ▶	

27020190781

**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 19 / 42
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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. Camelback Community Bank Full Name (Last, First, Middle Initial) Mailing Address 2777 E. Camelback Road City Phoenix State AZ Zip Code 85016- Purpose of Disbursement INCOME TAX Candidate Name 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) ▼		Transaction ID: 70326.E9387 Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2007 Amount of Each Disbursement this Period 17049.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INCOME TAX
--	--	--

B. Clarence DeLong Full Name (Last, First, Middle Initial) Mailing Address 3811 East Solano Drive City Paradise Valley State AZ Zip Code 85253- Purpose of Disbursement WAGES Candidate Name 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) ▼		Transaction ID: 70105.E9310 Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2007 Amount of Each Disbursement this Period 304.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
--	--	---

C. Clarence DeLong Full Name (Last, First, Middle Initial) Mailing Address 3811 East Solano Drive City Paradise Valley State AZ Zip Code 85253- Purpose of Disbursement WAGES Candidate Name 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) ▼		Transaction ID: 70227.E9352 Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2007 Amount of Each Disbursement this Period 82.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
--	--	--

SUBTOTAL of Disbursements This Page (optional)	17436.49
TOTAL This Period (last page this line number only)	

27020190782

**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 / 42

<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

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

Full Name (Last, First, Middle Initial) A. Clarence DeLong		Transaction ID: 70404.E9403 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2007	
Mailing Address 3811 East Solano Drive		Amount of Each Disbursement this Period 33.90	
City Paradise Valley State AZ Zip Code 85253-	Purpose of Disbursement WAGES	Category/ Type	<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) ▼	WAGES	
State: District:			

Full Name (Last, First, Middle Initial) B. Elan		Transaction ID: 70227.E9371 Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2007	
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 25.00	
City Knoxville State TN Zip Code 37920-	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type	<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) ▼	CREDIT CARD PROCESSING	
State: District:			

Full Name (Last, First, Middle Initial) C. Elan		Transaction ID: 70326.E9400 Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2007	
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 25.00	
City Knoxville State TN Zip Code 37920-	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type	<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) ▼	CREDIT CARD PROCESSING	
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	83.90
TOTAL This Period (last page this line number only) ▶	

27020190783

**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 21 / 42
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Elan

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70602.E9454
Date of Disbursement
03 / 01 / 2007

Amount of Each Disbursement this Period
25.00

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

CREDIT CARD PROCESSING

B. Full Name (Last, First, Middle Initial)
Fed Ex

Mailing Address P. O. Box 7221

City Pasadena State CA Zip Code 91109-7321

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70105.E9313
Date of Disbursement
01 / 04 / 2007

Amount of Each Disbursement this Period
43.43

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

SHIPPING

C. Full Name (Last, First, Middle Initial)
Fed Ex

Mailing Address P. O. Box 7221

City Pasadena State CA Zip Code 91109-7321

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70227.E9360
Date of Disbursement
02 / 05 / 2007

Amount of Each Disbursement this Period
26.66

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

SHIPPING

SUBTOTAL of Disbursements This Page (optional) ▶ 95.09

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

27020190784

**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 22 / 42
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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. Fed Ex Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 7221 City Pasadena State CA Zip Code 91109-7321 Purpose of Disbursement SHIPPING Candidate Name 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) ▼		Transaction ID: 70326.E9380 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7 Amount of Each Disbursement this Period 41.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SHIPPING
---	--	--

B. Frontier Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 3609 City Kingman State AZ Zip Code 86402-3609 Purpose of Disbursement TELEPHONE Candidate Name 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) ▼		Transaction ID: 70120.E9330 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 79.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE
--	--	---

C. Frontier Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 3609 City Kingman State AZ Zip Code 86402-3609 Purpose of Disbursement TELEPHONE Candidate Name 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) ▼		Transaction ID: 70227.E9368 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7 Amount of Each Disbursement this Period 79.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE
--	--	---

SUBTOTAL of Disbursements This Page (optional)	200.54
TOTAL This Period (last page this line number only)	

27020190785

**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 / 42

<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

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

Full Name (Last, First, Middle Initial) A. Frontier		Transaction ID: 70326.E9393	
Mailing Address P.O. Box 3609		Date of Disbursement MM / DD / YYYY 03 / 21 / 2007	
City Kingman	State AZ	Zip Code 86402-3609	Amount of Each Disbursement this Period 79.60
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:		

Full Name (Last, First, Middle Initial) B. Mitzi Haggard		Transaction ID: 70105.E9309	
Mailing Address 1248 East Victor Hugo Avenue		Date of Disbursement MM / DD / YYYY 01 / 02 / 2007	
City Phoenix	State AZ	Zip Code 85022-4950	Amount of Each Disbursement this Period 152.38
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) C. Mitzi Haggard		Transaction ID: 70227.E9351	
Mailing Address 1248 East Victor Hugo Avenue		Date of Disbursement MM / DD / YYYY 02 / 02 / 2007	
City Phoenix	State AZ	Zip Code 85022-4950	Amount of Each Disbursement this Period 152.38
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:		

SUBTOTAL of Disbursements This Page (optional)	384.36
TOTAL This Period (last page this line number only)	

27020190786

**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 / 42

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

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

Full Name (Last, First, Middle Initial) A. Mitzi Haggard		Transaction ID: 70326.E9376 Date of Disbursement 02 / 28 / 2007	
Mailing Address 1248 East Victor Hugo Avenue		Amount of Each Disbursement this Period 69.26	
City Phoenix	State AZ	Zip Code 85022-4950	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement WAGES		Category/Type	
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:			

Full Name (Last, First, Middle Initial) B. Mitzi Haggard		Transaction ID: 70404.E9401 Date of Disbursement 03 / 31 / 2007	
Mailing Address 1248 East Victor Hugo Avenue		Amount of Each Disbursement this Period 83.12	
City Phoenix	State AZ	Zip Code 85022-4950	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement WAGES		Category/Type	
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:			

Full Name (Last, First, Middle Initial) C. Ikon Office Solutions, S.W Dist.		Transaction ID: 70124.E9340 Date of Disbursement 01 / 24 / 2007	
Mailing Address P.O. Box 7420		Amount of Each Disbursement this Period 4580.20	
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 MACHINE		Category/Type	
Candidate Name		COPIER MACHINE	
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)	4732.58
TOTAL This Period (last page this line number only)	

27020190787

**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 / 42
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Ikon Office Solutions, S.W Dist.		Transaction ID: 70124.E9345 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 7420		Amount of Each Disbursement this Period 131.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Pasadena State CA Zip Code 91109-7420	<input type="checkbox"/> Category/Type	
Purpose of Disbursement COPIER MAINTENANCE Candidate Name		COPIER MAINTENANCE
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) ▼	

Full Name (Last, First, Middle Initial) B. Ikon Office Solutions, S.W Dist.		Transaction ID: 70227.E9358 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 7420		Amount of Each Disbursement this Period 240.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Pasadena State CA Zip Code 91109-7420	<input type="checkbox"/> Category/Type	
Purpose of Disbursement COPIER MAINTENANCE Candidate Name		COPIER MAINTENANCE
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) ▼	

Full Name (Last, First, Middle Initial) C. Ikon Office Solutions, S.W Dist.		Transaction ID: 70227.E9367 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address P.O. Box 7420		Amount of Each Disbursement this Period 64.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Pasadena State CA Zip Code 91109-7420	<input type="checkbox"/> Category/Type	
Purpose of Disbursement COPIER MAINTENANCE Candidate Name		COPIER MAINTENANCE
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	435.87
TOTAL This Period (last page this line number only) ▶	

27020190788

**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

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

Full Name (Last, First, Middle Initial) A. JL Church Tech Consulting Services, LLC		Transaction ID: 70124.E9346 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address 1970 N. Hartford Street #66		Amount of Each Disbursement this Period 54.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chandler State AZ Zip Code 85225-	COMPUTER SERVICES	
Purpose of Disbursement COMPUTER SERVICES 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. JL Church Tech Consulting Services, LLC		Transaction ID: 70126.E9348 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7
Mailing Address 1970 N. Hartford Street #66		Amount of Each Disbursement this Period 475.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chandler State AZ Zip Code 85225-	COMPUTER SERVICES	
Purpose of Disbursement COMPUTER SERVICES 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) C. JL Church Tech Consulting Services, LLC		Transaction ID: 70326.E9389 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 1970 N. Hartford Street #66		Amount of Each Disbursement this Period 332.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chandler State AZ Zip Code 85225-	COMPUTER MAINTENANCE	
Purpose of Disbursement COMPUTER MAINTENANCE 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) ▶	861.54
TOTAL This Period (last page this line number only) ▶	

27020190789

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 42

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

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

Full Name (Last, First, Middle Initial) A. Sarah Morgan		Transaction ID: 70120.E9314	
Mailing Address 829-A East Cochise Drive		Date of Disbursement 01 / 06 / 2007	
City Phoenix	State AZ	Zip Code 85020-	Amount of Each Disbursement this Period 761.84
Purpose of Disbursement SALARY		<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:	SALARY		

Full Name (Last, First, Middle Initial) B. Sarah Morgan		Transaction ID: 70227.E9354	
Mailing Address 829-A East Cochise Drive		Date of Disbursement 02 / 02 / 2007	
City Phoenix	State AZ	Zip Code 85020-	Amount of Each Disbursement this Period 300.00
Purpose of Disbursement PETTY CASH		<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:	PETTY CASH		

Full Name (Last, First, Middle Initial) C. Sarah Morgan		Transaction ID: 70227.E9353	
Mailing Address 829-A East Cochise Drive		Date of Disbursement 02 / 02 / 2007	
City Phoenix	State AZ	Zip Code 85020-	Amount of Each Disbursement this Period 761.84
Purpose of Disbursement SALARY		<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:	SALARY		

SUBTOTAL of Disbursements This Page (optional)	1823.68
TOTAL This Period (last page this line number only)	

27020190790

**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

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. 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 SALARY
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: 70326.E9377
Date of Disbursement
02 / 28 / 2007
Amount of Each Disbursement this Period
761.84
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
SALARY

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: 70404.E9402
Date of Disbursement
03 / 31 / 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: 70105.E9311
Date of Disbursement
01 / 04 / 2007
Amount of Each Disbursement this Period
70.02
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶ 1593.70
TOTAL This Period (last page this line number only) ▶

27020190791

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 42

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

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

<p>A. Qwest</p> <p>Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 29039</p>		<p>Transaction ID: 70227.E9370 Date of Disbursement MM / DD / YYYY 02 / 27 / 2007</p>
<p>City Phoenix State AZ Zip Code 85038-9060</p>	<p>Purpose of Disbursement TELEPHONE</p>	<p>Amount of Each Disbursement this Period 137.57</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE</p>

<p>B. Qwest</p> <p>Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 29039</p>		<p>Transaction ID: 70326.E9396 Date of Disbursement MM / DD / YYYY 03 / 26 / 2007</p>
<p>City Phoenix State AZ Zip Code 85038-9060</p>	<p>Purpose of Disbursement TELEPHONE</p>	<p>Amount of Each Disbursement this Period 144.32</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE</p>

<p>C. Qwest Business Services</p> <p>Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 856169</p>		<p>Transaction ID: 70227.E9355 Date of Disbursement MM / DD / YYYY 02 / 05 / 2007</p>
<p>City Louisville State KY Zip Code 40285-</p>	<p>Purpose of Disbursement TELEPHONE SERVICES</p>	<p>Amount of Each Disbursement this Period 111.91</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE SERVICES</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>393.80</p>
<p>TOTAL This Period (last page this line number only)</p>	

27020190792

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

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

FOR LINE NUMBER:
(check only one)

PAGE 30 / 42

<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

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

Full Name (Last, First, Middle Initial) A. Ashley Ragan		Transaction ID: 70227.E9349 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 1916.42	
City Phoenix State AZ Zip Code 85020-	Purpose of Disbursement WAGES	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type WAGES	

Full Name (Last, First, Middle Initial) B. Ashley Ragan		Transaction ID: 70326.E9378 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7	
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 512.75	
City Phoenix State AZ Zip Code 85020-	Purpose of Disbursement WAGES	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type WAGES	

Full Name (Last, First, Middle Initial) C. Ashley Ragan		Transaction ID: 70404.E9404 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 7	
Mailing Address 307 East Royal Palm		Amount of Each Disbursement this Period 1079.77	
City Phoenix State AZ Zip Code 85020-	Purpose of Disbursement WAGES	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type WAGES	

SUBTOTAL of Disbursements This Page (optional) ▶	3508.94
TOTAL This Period (last page this line number only) ▶	(Empty box)

27020190793

**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 / 42

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

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. Reflections Photography

Full Name (Last, First, Middle Initial)
Reflections Photography

Mailing Address 631 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement PHOTOGRAPHY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 70227.E9366
Date of Disbursement 02 / 22 / 2007

Amount of Each Disbursement this Period 14.50

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

PHOTOGRAPHY

B. SCF of Arizona

Full Name (Last, First, Middle Initial)
SCF of Arizona

Mailing Address P.O. Box 33049

City Phoenix State AZ Zip Code 85067-3049

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 70227.E9363
Date of Disbursement 02 / 05 / 2007

Amount of Each Disbursement this Period 452.00

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

INSURANCE

C. Steven H. Gordon & Associates

Full Name (Last, First, Middle Initial)
Steven H. Gordon & Associates

Mailing Address 507 Capitol Court, N.E., #100

City Washington State DC Zip Code 20002-

Purpose of Disbursement FUNDRAISING COMMISSION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 70120.E9329
Date of Disbursement 01 / 16 / 2007

Amount of Each Disbursement this Period 12316.75

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

FUNDRAISING COMMISSION

SUBTOTAL of Disbursements This Page (optional) ▶ 12783.25

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

27020190794

**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 / 42

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

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. Steven H. Gordon & Associates

Full Name (Last, First, Middle Initial)
Steven H. Gordon & Associates

Mailing Address 507 Capitol Court, N.E., #100

City Washington State DC Zip Code 20002-

Purpose of Disbursement MAILING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 70227.E9357
Date of Disbursement 02 / 05 / 2007

Amount of Each Disbursement this Period 4001.79

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

MAILING

B. Steven H. Gordon & Associates

Full Name (Last, First, Middle Initial)
Steven H. Gordon & Associates

Mailing Address 507 Capitol Court, N.E., #100

City Washington State DC Zip Code 20002-

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 70326.E9398
Date of Disbursement 03 / 26 / 2007

Amount of Each Disbursement this Period 314.00

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

TRAVEL

C. Jessica Stiefler

Full Name (Last, First, Middle Initial)
Jessica Stiefler

Mailing Address 8704 Stone Hill Place

City Springfield State VA Zip Code 22153-

Purpose of Disbursement MEMENTOS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 70326.E9399
Date of Disbursement 03 / 26 / 2007

Amount of Each Disbursement this Period 320.00

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

MEMENTOS

SUBTOTAL of Disbursements This Page (optional) ▶ 4635.79

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

27020190795

**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 / 42
	<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	

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

Full Name (Last, First, Middle Initial) A. The Molera Alvarez Group		Transaction ID: 70120.E9321 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 7
Mailing Address 300 West Clarendon, Suite 220		Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix State AZ Zip Code 85013-	CAMPAIGN MANAGEMENT FEES	
Purpose of Disbursement CAMPAIGN MANAGEMENT FEES		Category/ Type
Candidate Name		
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) ▼	

Full Name (Last, First, Middle Initial) B. U.S. Senate Restaurants		Transaction ID: 70120.E9331 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7
Mailing Address First and C Streets, N.E.		Amount of Each Disbursement this Period 650.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20515-	LUNCHEON MEETINGS	
Purpose of Disbursement LUNCHEON MEETINGS		Category/ Type
Candidate Name		
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) ▼	

Full Name (Last, First, Middle Initial) C. United States Postal Service		Transaction ID: 70326.E9382 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 5021 N. 20th Street		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix State AZ Zip Code 85016-	BRM ACCOUNTING FEE	
Purpose of Disbursement BRM ACCOUNTING FEE		Category/ Type
Candidate Name		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	11150.00
TOTAL This Period (last page this line number only) ▶	

27020190796

**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 34 / 42
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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. 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
BOX FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70326.E9394
Date of Disbursement
03 / 21 / 2007

Amount of Each Disbursement this Period
72.00

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

BOX FEES

B. Card Services

Full Name (Last, First, Middle Initial)
Card Services

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: 70227.E9359
Date of Disbursement
02 / 05 / 2007

Amount of Each Disbursement this Period
4602.82

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

SEE BELOW

C. Capital Grille

Full Name (Last, First, Middle Initial)
Capital Grille

Mailing Address 2502 E. Camelback

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement
LUNCHEON MEETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70410.E9419
Date of Disbursement
02 / 05 / 2007

Amount of Each Disbursement this Period
1123.42

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

[MEMO ITEM]
MEMO: LUNCHEON MEETING

SUBTOTAL of Disbursements This Page (optional) ▶ 4674.82

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

27020190797

**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 / 42

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

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. 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: 70410.E9417
Date of Disbursement
02 / 05 / 2007

Amount of Each Disbursement this Period
200.00

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

[MEMO ITEM]
MEMO: MEMENTOS

B. 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: 70410.E9418
Date of Disbursement
02 / 05 / 2007

Amount of Each Disbursement this Period
698.00

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

[MEMO ITEM]
MEMO: AIR TRAVEL

C. U.S. Senate Restaurants

Full Name (Last, First, Middle Initial)
Mailing Address First and C Streets, N.E.

City Washington State DC Zip Code 20515-

Purpose of Disbursement
LUNCHEON MEETINGS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 70410.E9420
Date of Disbursement
02 / 05 / 2007

Amount of Each Disbursement this Period
39.96

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) ▶ 0.00

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

27020190798

**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

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

Full Name (Last, First, Middle Initial) A. Westin La Paloma Hotel		Transaction ID: 70410.E9421	
Mailing Address 3800 East Sunrise Drive		Date of Disbursement 02 / 05 / 2007	
City Tucson	State AZ	Zip Code 85718-	Amount of Each Disbursement this Period 2313.54
Purpose of Disbursement DINNER MEETING/RECEPTION		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) ▼		[MEMO ITEM] MEMO: DINNER MEETING/RECE- PTION
State: District:			

Full Name (Last, First, Middle Initial) B. Card Services		Transaction ID: 70227.E9373	
Mailing Address P.O. Box 13337		Date of Disbursement 02 / 27 / 2007	
City Philadelphia	State PA	Zip Code 19101-	Amount of Each Disbursement this Period 7653.01
Purpose of Disbursement SEE BELOW		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) ▼		SEE BELOW
State: District:			

Full Name (Last, First, Middle Initial) C. Charlie Palmer Steak House		Transaction ID: 70410.E9422	
Mailing Address 101 Constitution Ave. NW		Date of Disbursement 02 / 27 / 2007	
City Washington	State DC	Zip Code 20001-	Amount of Each Disbursement this Period 2123.88
Purpose of Disbursement DINNER MEETING		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) ▼		[MEMO ITEM] MEMO: DINNER MEETING
State: District:			

SUBTOTAL of Disbursements This Page (optional)	7653.01
TOTAL This Period (last page this line number only)	

27020190799

**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

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. 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: 70410.E9423

Date of Disbursement
02 / 27 / 2007

Amount of Each Disbursement this Period
586.20

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: 70120.E9332

Date of Disbursement
01 / 17 / 2007

Amount of Each Disbursement this Period
188.86

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

TELEPHONE

C. 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: 70124.E9344

Date of Disbursement
01 / 24 / 2007

Amount of Each Disbursement this Period
234.11

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

TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶ **422.97**

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

27020190800

**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 38 / 42
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial)
A. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70227.E9369
Date of Disbursement
02 / 27 / 2007

Amount of Each Disbursement this Period
211.82

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

TELEPHONE

Full Name (Last, First, Middle Initial)
B. Wendell Design Group Florists, LLC

Mailing Address 2120 East Sixth Street, Suite 14

City Tempe State AZ Zip Code 85282-

Purpose of Disbursement
FLOWERS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70120.E9323
Date of Disbursement
01 / 08 / 2007

Amount of Each Disbursement this Period
1297.20

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

FLOWERS

SUBTOTAL of Disbursements This Page (optional)	1509.02
TOTAL This Period (last page this line number only)	89023.00

27020190801

**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 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 checked="" type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)
A. The Elizabeth Dole Committee, Inc.

Mailing Address P.O. Box 2918

City Raleigh State NC Zip Code 27602-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Transaction ID: 70326.E9390

Date of Disbursement
MM / DD / YYYY
03 / 21 / 2007

Amount of Each Disbursement this Period
4000.00

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

SUBTOTAL of Disbursements This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	4000.00

27020190802

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

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. Amer Soc of Plastic & Reconst Surgns PAC

Full Name (Last, First, Middle Initial)
Mailing Address 444 East Algonquin Road

City Arlington Heights State IL Zip Code 60005-

Purpose of Disbursement Refund of Contribution
Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Transaction ID: 70105.E9312
Date of Disbursement
01 / 04 / 2007

Amount of Each Disbursement this Period
2500.00

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

B. Mesa Air Group PAC

Full Name (Last, First, Middle Initial)
Mailing Address 410 North 44th Street Suite 700

City Phoenix State AZ Zip Code 85008-

Purpose of Disbursement Refund of Contribution Refund
Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Transaction ID: 70120.E9325
Date of Disbursement
01 / 10 / 2007

Amount of Each Disbursement this Period
3000.00

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

C. Us Airways Group Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-

Purpose of Disbursement Refund of Contribution Partial Refund of
Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Transaction ID: 70125.E9347
Date of Disbursement
01 / 25 / 2007

Amount of Each Disbursement this Period
500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

27020190803

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

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

Full Name (Last, First, Middle Initial)
A. Verizon Communications Inc Gd Gov Club

Mailing Address 1717 Arch Street 47-S

City Philadelphia State PA Zip Code 19103-

Purpose of Disbursement
Refund of Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Transaction ID: 70120.E9333

Date of Disbursement
01 / 17 / 2007

Amount of Each Disbursement this Period
1000.00

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

010
Category/
Type

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	7000.00

27020190804

**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 42 / 42

<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

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. Douglas Durst
Full Name (Last, First, Middle Initial)
Mailing Address 1155 Ave. of the Americas
City New York State NY Zip Code 10036-
Purpose of Disbursement Refund of Contribution
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: 70120.E9336
Date of Disbursement
M M / D D / Y Y Y Y
01 / 17 / 2007
Amount of Each Disbursement this Period
2000.00
 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Thomas Graham
Full Name (Last, First, Middle Initial)
Mailing Address 20 The Trillium
City Pittsburgh State PA Zip Code 15238-
Purpose of Disbursement Refund of Contribution Refund of contrib
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: 70120.E9334
Date of Disbursement
M M / D D / Y Y Y Y
01 / 17 / 2007
Amount of Each Disbursement this Period
2100.00
 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C. Thomas Kempner
Full Name (Last, First, Middle Initial)
Mailing Address c/o Loeb Partners Corp
61 Broadway, 24th Floor
City New York State NY Zip Code 10006-
Purpose of Disbursement Refund of Contribution Refund
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: 70120.E9335
Date of Disbursement
M M / D D / Y Y Y Y
01 / 17 / 2007
Amount of Each Disbursement this Period
1250.00
 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 5350.00
TOTAL This Period (last page this line number only) ▶ 5350.00

27020190805

for source
Box 10210
A2 63004

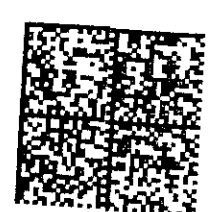
6/9

FIRST CLASS

OF THE RETURN ADDRESS FOLD AT DOTTED LINE
CERTIFIED MAIL™



7005 3110 0002 8576 1307



USPS
CPU
US POSTAGE
\$ 04.64
Mailed From 85254
06/05/2007
031A 0003190204

Office of Public Records
PO Box 5109

Alexandria, VA

22301-0109

X-RAYED
BY THE SENATE
POST OFFICE

SECRETARY OF THE SENATE
07 JUN 12 PM 1:33

SECRETARY OF THE SENATE
07 JUN 12 PM 1:33

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

06-05-07

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 _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

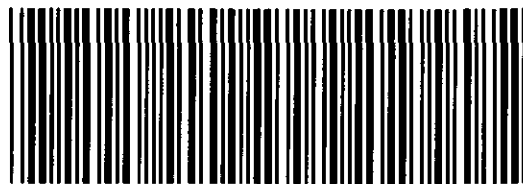
PREPARER

RD

DATE PREPARED

06-12-07

27020190807



27020190808