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FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1240 E MISSOURI
 Check if different than previously reported. (ACG)
PHOENIX AZ 85014

2. FEC IDENTIFICATION NUMBER C00346403
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 Quarterly Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(d) 30-Day Post-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 01 01 2000 through 03 31 2000

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 Edward Wren
Signature of Treasurer *Edward Wren* Date 9 5 2001

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Report Covering the Period: From:

MM	DD	YYYY
01	01	2000

 To:

MM	DD	YYYY
03	31	2000

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>YYYY</td></tr><tr><td>2000</td></tr></table>	YYYY	2000		8011.25
YYYY				
2000				
(b) Cash on Hand at Beginning of Reporting Period	8011.25			
(c) Total Receipts (from Line 19)	7140.00	7140.00		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15151.25	15151.25		
7. Total Disbursements (from Line 20)	10532.99	10532.99		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4618.26	4618.26		
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			

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20433

Toll Free 800-420-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Report Covering the Period:

From:

MM DD YYYY
01 01 2000

To:

MM DD YYYY
03 31 2000

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7140.00	
(ii) Unitemized	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7140.00	7140.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 32, page 4)	7140.00	7140.00
12. Transfers From Affiliated/Other Party Committee	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	7140.00	7140.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	7140.00	7140.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	4276.99	4276.99	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4276.99	4276.99	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00	
24. Independent Expenditure (use Schedule E).....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00	
(b) Political Party Committees.....	0.00	0.00	
(c) Other Political Committees (such as PACs).....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00	
29. Other Disbursements.....	4256.00	4256.00	
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	10532.99	10532.99	
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	10532.99	10532.99	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) from Line 11(d), page 3).....	7140.00	7140.00	
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00	
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	7140.00	7140.00	
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	4276.99	4276.99	
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00	
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	4276.99	4276.99	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 14							
	(check only one)							
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Full Name (Last, First, Middle Initial) A. Assoc. Highway Patrolmen of Arizona		Date of Receipt 03 / 31 / 2000	
Mailing Address 1240 E. Missouri		Amount of Each Receipt this Period 7140.00	
City Phoenix	State AZ	Zip Code 85014	Ind. contributions not exceeding \$200
FEC ID number of contributing federal political committee.		Aggregate Year-to-Date 7140.00	
Name of Employer	Occupation	Transaction ID: SA11A1.4193	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼			

B.

C.

SUBTOTAL of Receipts This Page (optional)	7140.00
TOTAL This Period (last page this line number only)	7140.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 14

21b 22 23 24 25
 26 27 28a 28b 28c 28

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

A. Abacus Executive Suites

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY / /

Mailing Address: 3030 N. 3rd Street Suite 20D
City: Phoenix State: AZ Zip Code: 85012

Purpose of Disbursement: secretarial services
Candidate Name: _____

Category/Type:

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

State: _____ District: _____

Amount of Each Disbursement this Period:

Transaction ID: SB21B.4209

B. Altell fka Cellular One

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY / /

Mailing Address: 4805 E. Thistle Landing Suite 100
City: Phoenix State: AZ Zip Code: 85044

Purpose of Disbursement: phone
Candidate Name: _____

Category/Type:

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

State: _____ District: _____

Amount of Each Disbursement this Period:

Transaction ID: SB21B.4201

C. Altell fka Cellular One

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY / /

Mailing Address: 4805 E. Thistle Landing Suite 100
City: Phoenix State: AZ Zip Code: 85044

Purpose of Disbursement: phone
Candidate Name: _____

Category/Type:

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

State: _____ District: _____

Amount of Each Disbursement this Period:

Transaction ID: SB21B.4199

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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 26 27 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

A. Altell fka Cellular One

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 02 / 02 / 2000

Mailing Address: 4805 E. Thistle Landing Suite 100
City: Phoenix State: AZ Zip Code: 85044

Purpose of Disbursement phone: _____

Candidate Name: _____ Category/Type: _____

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

State: _____ District: _____

Amount of Each Disbursement this Period: 219.00

Transaction ID: SB21B.4202

B. Altell fka Cellular One

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 03 / 03 / 2000

Mailing Address: 4805 E. Thistle Landing Suite 100
City: Phoenix State: AZ Zip Code: 85044

Purpose of Disbursement phone: _____

Candidate Name: _____ Category/Type: _____

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

State: _____ District: _____

Amount of Each Disbursement this Period: 76.85

Transaction ID: SB21B.4208

C. Altell fka Cellular One

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 03 / 28 / 2000

Mailing Address: 4805 E. Thistle Landing Suite 100
City: Phoenix State: AZ Zip Code: 85044

Purpose of Disbursement phone: _____

Candidate Name: _____ Category/Type: _____

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

State: _____ District: _____

Amount of Each Disbursement this Period: 706.54

Transaction ID: SB21B.4210

SUBTOTAL of Receipts This Page (optional) 1002.39

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Full Name (Last, First, Middle Initial)
A. Arizona Hotel & Lodging Association fka AHMA

Mailing Address
1240 E. Missouri

City **Phoenix** State **AZ** Zip Code **85014**

Purpose of Disbursement
rent

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement
01 / 24 / 2000

Amount of Each Disbursement this Period
657.91

Transaction ID: **SB21B.4211**

Full Name (Last, First, Middle Initial)
B. Arizona Hotel & Lodging Association fka AHMA

Mailing Address
1240 E. Missouri

City **Phoenix** State **AZ** Zip Code **85014**

Purpose of Disbursement
rent

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement
03 / 24 / 2000

Amount of Each Disbursement this Period
673.20

Transaction ID: **SB21B.4212**

Full Name (Last, First, Middle Initial)
C. Arizona Hotel & Lodging Association fka AHMA

Mailing Address
1240 E. Missouri

City **Phoenix** State **AZ** Zip Code **85014**

Purpose of Disbursement
rent

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement
03 / 28 / 2000

Amount of Each Disbursement this Period
336.60

Transaction ID: **SB21B.4248**

SUBTOTAL of Receipts This Page (optional) **1667.71**

TOTAL This Period (last page this line number only) **1667.71**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 9 / 14					
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c

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NAME OF COMMITTEE (in Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

A. Arizona Police Association fka APPOA

Full Name (Last, First, Middle Initial)
Mailing Address
5033 N. 19th Avenue #108
City Phoenix State AZ Zip Code 85015

Purpose of Disbursement
executive director fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
Other (specify) ▼

Date of Disbursement: 02 / 03 / 2000

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB21B.4203

B. City of Tempe

Full Name (Last, First, Middle Initial)
Mailing Address
131 E. 5th Street
City Tempe State AZ Zip Code 85281

Purpose of Disbursement
City fees for late filing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
Other (specify) ▼

Date of Disbursement: 02 / 04 / 2000

Amount of Each Disbursement this Period: 40.00

Transaction ID: SB21B.4206

C.

SUBTOTAL of Receipts This Page (optional)	1040.00
TOTAL This Period (last page this line number only)	4276.99

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 26	<input type="checkbox"/> 22 27	<input checked="" type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input type="checkbox"/> 29
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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

A. Kolbe 2000

Full Name (Last, First, Middle Initial)
Kolbe 2000

Mailing Address
P.O. Box 31568
City Tucson State AZ Zip Code 85750

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District

Date of Disbursement
03 / 24 / 2000

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.4219

B. Stump, Bob

Full Name (Last, First, Middle Initial)
Stump, Bob

Mailing Address
P.O. Box 130
City Tolleson State AZ Zip Code 85353

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District

Date of Disbursement
03 / 25 / 2000

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.4221

C.

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 14
	<input type="checkbox"/> 21b <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28a <input type="checkbox"/> 28b <input type="checkbox"/> 28c <input checked="" type="checkbox"/> 29	

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Full Name (Last, First, Middle Initial) A. Arizona Special Olympics		Date of Disbursement 03 / 28 / 2000	
Mailing Address 3816 N. 7th Street City: Phoenix State: AZ Zip Code: 85014		Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement: donation 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: _____		Category/Type: _____ Transaction ID: SB29.4215	

Full Name (Last, First, Middle Initial) B. Bowers Election Committee		Date of Disbursement 01 / 05 / 2000	
Mailing Address 8531 E. Quail City: Mesa State: AZ Zip Code: 85008		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement: contribution Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ State: _____ District: _____		Category/Type: _____ Transaction ID: SB29.4264	

Full Name (Last, First, Middle Initial) C. Bundgaard, Friends of		Date of Disbursement 01 / 08 / 2000	
Mailing Address 5511 W. Northwood Drive City: Phoenix State: AZ Zip Code: 85008		Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement: contribution Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ State: _____ District: _____		Category/Type: _____ Transaction ID: SB29.4265	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b 28	<input type="checkbox"/> 22 27	<input type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input checked="" type="checkbox"/> 29
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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

A. Constitutional Dinner

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY
01 / 20 / 2000

Mailing Address: Serfoma Club, P.O. Box 4245
City: Mesa, State: AZ, Zip Code: 85211

Purpose of Disbursement: Fundraiser
Amount of Each Disbursement this Period: 250.00

Candidate Name: _____ Category/Type: _____

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

State: _____ District: _____ Transaction ID: SB29.4195

B. Gardner, Committee to Elect Mike

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY
01 / 05 / 2000

Mailing Address: 810 W. Diamond
City: Tempe, State: AZ, Zip Code: 85000

Purpose of Disbursement: contribution
Amount of Each Disbursement this Period: 200.00

Candidate Name: _____ Category/Type: _____

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

State: _____ District: _____ Transaction ID: SB29.4286

C. Grosocast, Jeff 2000

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY
01 / 05 / 2000

Mailing Address: P.O. Box B431
City: Phoenix, State: AZ, Zip Code: 85000

Purpose of Disbursement: contribution
Amount of Each Disbursement this Period: 1250.00

Candidate Name: Grosocast, Jeff 2000
Category/Type: _____

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

State: _____ District: _____ Transaction ID: SB29.4262

SUBTOTAL of Receipts This Page (optional) ▶ 1700.00

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

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

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

FOR LINE NUMBER:
(check only one)

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21b 22 23 24 25
 26 27 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

A. Hatch-Miller 2000

Full Name (Last, First, Middle Initial) _____
Date of Disbursement: 01 / 06 / 2000

Mailing Address _____
4055 E. Kelm _____
City: Paradise Valley State: AZ Zip Code: 85253
Amount of Each Disbursement this Period: 200.00

Purpose of Disbursement contribution _____
Candidate Name _____ Category/Type _____

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

State: _____ District: _____ Transaction ID: SB29.4267

B. Jarrett, Committee to Elect Marilyn

Full Name (Last, First, Middle Initial) _____
Date of Disbursement: 01 / 06 / 2000

Mailing Address _____
4228 E. Hope _____
City: Mesa State: AZ Zip Code: 85000
Amount of Each Disbursement this Period: 200.00

Purpose of Disbursement contribution _____
Candidate Name _____ Category/Type _____

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

State: _____ District: _____ Transaction ID: SB29.4268

C. Knaperek 2000 Campaign

Full Name (Last, First, Middle Initial) _____
Date of Disbursement: 01 / 06 / 2000

Mailing Address _____
2028 E. Carmen Street _____
City: Tempe State: AZ Zip Code: 85000
Amount of Each Disbursement this Period: 200.00

Purpose of Disbursement contribution _____
Candidate Name _____ Category/Type _____

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

State: _____ District: _____ Transaction ID: SB29.4268

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b 25	<input type="checkbox"/> 22 27	<input type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input checked="" type="checkbox"/> 29
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NAME OF COMMITTEE (In Full)
ASSOCIATED HIGHWAY PATROLMEN OF ARIZONA

Full Name (Last, First, Middle Initial)
A. Mitchell, Harry for State Senate

Date of Disbursement
01 / 06 / 2000

Mailing Address
1222 E. Verlea Drive

City State Zip Code
Tempe AZ 85000

Purpose of Disbursement contribution
Amount of Each Disbursement this Period
256.00

Candidate Name
Category/Type

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

State: District: Transaction ID: SB29.4270

Full Name (Last, First, Middle Initial)
B. Verkamp 2000

Date of Disbursement
01 / 06 / 2000

Mailing Address
2620 N. Fremont

City State Zip Code
Flagstaff AZ 85000

Purpose of Disbursement contribution
Amount of Each Disbursement this Period
250.00

Candidate Name
Category/Type

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

State: District: Transaction ID: SB29.4271

Full Name (Last, First, Middle Initial)
C. Welers 2000

Date of Disbursement
01 / 06 / 2000

Mailing Address
16022 N. 37th Avenue

City State Zip Code
Phoenix AZ 85005

Purpose of Disbursement contribution
Amount of Each Disbursement this Period
500.00

Candidate Name
Category/Type

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

State: District: Transaction ID: SB29.4272

SUBTOTAL of Receipts This Page (optional)	1006.00
TOTAL This Period (last page this line number only)	4256.00

