

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

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

1. NAME OF COMMITTEE IN FULL <b>WENDYROGERS.ORG</b>			
ADDRESS (number and street) 2700 S Woodlands Village Blvd			
CITY Flagstaff	STATE AZ	ZIP CODE 86001-7114	
2. NAME OF CANDIDATE ROGERS, WENDY, , ,		3. OFFICE SOUGHT (State and District) House AZ 09	
		4. FEC IDENTIFICATION NUMBER C00510958	
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME</b> Garthwait, Robert, , Mr., Sr.			
MAILING ADDRESS PO Box 1367		Name of Employer Cly Del Mfg. Co	
CITY Waterbury		Date (month, day, year) 08/10/2018	
STATE CT	ZIP CODE 06721-1367	Amount 1000.00	
		Transaction ID : 632DEC9A480E24F70	
		Occupation Chairman	
<b>B. FULL NAME</b> Russell, Bryon, , Mr.,			
MAILING ADDRESS 22 N. Breakerpoint Pl		Name of Employer Olympic Medical Physicians	
CITY Port Angeles		Date (month, day, year) 08/11/2018	
STATE WA	ZIP CODE 98363-8376	Amount 1500.00	
		Transaction ID : 686B969C95FFB45C1	
		Occupation Physician	
<b>C. FULL NAME</b> Frey, Kent, , ,			
MAILING ADDRESS 5329 Green Valley Dr		Name of Employer Frey Electric	
CITY Clarence		Date (month, day, year) 08/11/2018	
STATE NY	ZIP CODE 14031-1232	Amount 2200.00	
		Transaction ID : 67D9B7760DCB64B9	
		Occupation Electrical Contractor	
<b>D. FULL NAME</b>			
MAILING ADDRESS		Name of Employer	
CITY		Date (month, day, year)	
STATE	ZIP CODE	Amount	
		Occupation	
<b>E. FULL NAME</b>			
MAILING ADDRESS		Name of Employer	
CITY		Date (month, day, year)	
STATE	ZIP CODE	Amount	
		Occupation	
SIGNATURE (optional) Curtis, Elizabeth, , ,		DATE 08/12/2018	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
[Electronically Filed]			

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