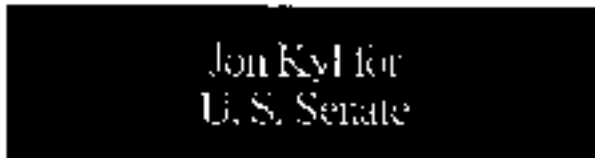


10/10/00 11:04
Jon Kyl for U.S. Senate
P. O. Box 10246
Phoenix, Arizona 85064-0246
(602) 840-0306
Fax: 840-1970

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SECRETARY OF THE SENATE
PUBLIC RECORDS
00 OCT 23 PM 3: 27



Fax

To: Secretary of State From: Clarence DeLong, Treasurer
Fax: (202)224-1851 Date: October 20, 2000
Phone: Pages: 2 Including Cover
Re: 48-Hour Notification CC:
 Urgent For Review Please Comment Please Reply Please Recycle

Comments:

The following is a 48-Hour Notice of contributions from Jon Kyl for US Senate.

Upon receiving this complete fax, please fax a return receipt at (602) 840-1970.

If you have any questions or were unable to receive any pages in this fax please do not hesitate to contact our office at (602) 840-0306.

Clarence DeLong
Treasurer

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

RECEIVED
OFFICE OF THE SENATE
CLERK
OCT 23 PM 3:27

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 Jon Kyl for U.S. Senate	
ADDRESS (number and street) P.O. Box 10246	
CITY, STATE, and ZIP CODE Phoenix, AZ 85064	
2. NAME OF CANDIDATE Jon Kyl	3. OFFICE BOLDING (State and District) AZ/00

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.

4. FEC IDENTIFICATION NUMBER
00279521

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
American Neurological Surgery Political Action Committee P.O. Box 136 Washington, DC 20044-0136		10/23/2000	\$2,000.00
	Occupation		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
KPMG PAC P.O. Box 18254 Washington, DC 20036-9998		10/23/2000	\$1,000.00
	Occupation		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
	Occupation		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
	Occupation		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
	Occupation		

SIGNATURE (optional) <i>Charmaine DeLong</i>	DATE 10/23/2000	For further information contact: Federal Election Commission 900 E Street, N.W., Washington, DC 20469 Toll Free 800-424-9600, Local 202-694-1100
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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

FAX (48-HOUR NOTICES) 10/23/00
Date of Receipt

INSIDE MAIL _____
Date of Receipt

RECEIVED FROM THE LEGISLATIVE RESOURCE
CENTER _____
Date of Receipt

RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date of Receipt

FIRST CLASS MAIL _____
Postmarked

REGISTERED/CERTIFIED MAIL _____
Postmarked

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OTHER (Specify): _____
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 EXPRESS MAIL
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 Postmark and/or Date of Receipt

PG 10/23/00
Preparer Date Prepared