

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

DEFENDARIZONA

ADDRESS (number and street) 6635 W. HAPPY VALLEY RD.

▼ STE. A104, #198

Check if different than previously reported. (ACC) GLENDALE AZ 85310

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00668301

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 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

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

<input checked="" type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2018 through M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

OTTENHOFF, BENJAMIN, , ,

Type or Print Name of Treasurer

Signature of Treasurer OTTENHOFF, BENJAMIN, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**DEFENDARIZONA**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="296269.25"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="4049897.65"/>	<input type="text" value="22730647.65"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="4346166.90"/>	<input type="text" value="22730647.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4253012.43"/>	<input type="text" value="22637493.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="93154.47"/>	<input type="text" value="93154.47"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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 20463

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**DEFENDARIZONA**

Report Covering the Period: From:  /  /  To:  /  /

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).....	2196200.00	4267200.00
(ii) Unitemized .....	430.00	1180.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	2196630.00	4268380.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1850000.00	1840000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4046630.00	22668380.00
12. Transfers From Affiliated/Other Party Committees.....	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 37, page 5).....	3267.65	62267.65
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 Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4049897.65	22730647.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4049897.65	22730647.65

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	- 3459879.19	570802.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	- 3459879.19	570802.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	7712791.62	21966590.39
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	100.00	100100.00
(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)).....	100.00	100100.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4253012.43	22637493.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4253012.43	22637493.18

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4046630.00	22668380.00
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	100100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4046530.00	22568280.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	- 3459879.19	570802.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3267.65	62267.65
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	- 3463146.84	508535.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**DEFENDARIZONA**

**A. ARIZONA ROCK PRODUCTS ASSOCIATION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 916 W ADAMS ST

City PHOENIX	State AZ	Zip Code 85007
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2018

**Transaction ID : SA11AI.4778**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**B. FOLEY, WILLIAM, P, , II**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 VILLAGE CENTER CIRCLE

City LAS VEGAS	State NV	Zip Code 89134
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLACK NIGHT FINANCIAL	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2018

**Transaction ID : SA11AI.4788**

Amount of Each Receipt this Period  
100000.00

Memo Item  
CONTRIBUTION

**C. GRIFFIN, KEN, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 S DEARBORN ST  
STE 3200

City CHICAGO	State IL	Zip Code 60603-5585
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITADEL GROUP	Occupation (for Individual) CEO
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2018

**Transaction ID : SA11AI.4749**

Amount of Each Receipt this Period  
2000000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2102700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A. HORN, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4400 W CUSH CANYON LOOP  
 City MARANA State AZ Zip Code 85658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PBMS Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 21 / 2018  
**Transaction ID : SA11AI.4761**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
**CONTRIBUTION**

**B. HORNSTEIN, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 WESTWOOD LANE  
 City WOODBURY State NY Zip Code 11797  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GLOBAL CREDIT ADVISORS, LLC Occupation (for Individual) CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 18 / 2018  
**Transaction ID : SA11AI.4752**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
**CONTRIBUTION**

**C. MARLING, ROBERT, E, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 S TRANQUIL PATH  
 City THE WOODLANDS State TX Zip Code 77380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WFG Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 25 / 2018  
**Transaction ID : SA11AI.4769**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A. MULDOON, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8219 ROUND HILLS CIRCLE  
 City LAS VEGAS State NV Zip Code 89113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RESORT STAY INTERNATIONAL Occupation (for Individual) BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **11 / 02 / 2018**  
**Transaction ID : SA11AI.4785**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**B. NISWONGER, SCOTT, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1508  
 City GREENEVILLE State TN Zip Code 37744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LANDAIR Occupation (for Individual) CHAIRMAN EMERITUS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt **10 / 30 / 2018**  
**Transaction ID : SA11AI.4776**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item CONTRIBUTION

**C. RYAN, HEATHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address SAN ANTONIO 5 NW OF 13TH  
 City CARMEL State CA Zip Code 93921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CONCORDE GROUP CORP Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 29 / 2018**  
**Transaction ID : SA11AI.4774**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A. SUGAR CANE GROWERS COOPERATIVE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 WEST SUGARHOUSE ROAD  
 City BELLE GLADE State FL Zip Code 33430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2018  
**Transaction ID : SA11AI.4767**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**CONTRIBUTION**

**B.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2196200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A. SENATE LEADERSHIP FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 NORTH HILL DRIVE STE 100

City WARRENTON	State VA	Zip Code 20186
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FEC ID number of contributing federal political committee. **C** C00571703

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
18050000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

**Transaction ID : SA11C.4750**

Amount of Each Receipt this Period  
1500000.00

Memo Item  
CONTRIBUTION

**B. SENATE LEADERSHIP FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 NORTH HILL DRIVE STE 100

City WARRENTON	State VA	Zip Code 20186
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FEC ID number of contributing federal political committee. **C** C00571703

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
18300000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

**Transaction ID : SA11C.4781**

Amount of Each Receipt this Period  
250000.00

Memo Item  
CONTRIBUTION

**C. SENATE LEADERSHIP FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 NORTH HILL DRIVE STE 100

City WARRENTON	State VA	Zip Code 20186
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FEC ID number of contributing federal political committee. **C** C00571703

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
18400000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

**Transaction ID : SA11C.4827**

Amount of Each Receipt this Period  
100000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1850000.00
<b>TOTAL</b> This Period (last page this line number only).....	1850000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**CONNECTION STRATEGY, LLC**

Mailing Address **PO BOX 25913**

City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22313</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3267.65**

Date of Receipt  
**10 / 19 / 2018**

**Transaction ID : SA15.4831**

Amount of Each Receipt this Period  
**3267.65**

Memo Item  
**REFUND - PHONE CALLS**

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>3267.65</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>3267.65</b>

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O.BOX 650448

City DALLAS State TX Zip Code 75265

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4822

Amount of Each Disbursement this Period: 276.91

Memo Item

**B. FEDEX**

Full Name (Last, First, Middle Initial)

Mailing Address 3680 HACKS CROSS ROAD

City MEMPHIS State TN Zip Code 38125

Purpose of Disbursement DELIVERY SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4822.c

Amount of Each Disbursement this Period: 276.91

Memo Item

**C. ANEDOT, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 5555 HILTON AVE.

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4807

Amount of Each Disbursement this Period: 401.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 678.11

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A. ANEDOT, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 5555 HILTON AVE.

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4808

Amount of Each Disbursement this Period: 2.80

Memo Item

**B. ANEDOT, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 5555 HILTON AVE.

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4809

Amount of Each Disbursement this Period: 402.00

Memo Item

**C. ANEDOT, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 5555 HILTON AVE.

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4810

Amount of Each Disbursement this Period: 2.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 407.10

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 5555 HILTON AVE.			
City BATON ROUGE	State LA	Zip Code 70808	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Amount of Each Disbursement this Period 2.30	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ANEDOT, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018	
Mailing Address 5555 HILTON AVE.			
City BATON ROUGE	State LA	Zip Code 70808	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Amount of Each Disbursement this Period 400.30	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ANEDOT, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018	
Mailing Address 5555 HILTON AVE.			
City BATON ROUGE	State LA	Zip Code 70808	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Amount of Each Disbursement this Period 4.30	
		<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	406.90
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

**A. ANEDOT, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 5555 HILTON AVE.

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4817

Amount of Each Disbursement this Period: 15.00

Memo Item

**B. ARENA COMMUNICATIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement SEE SCHEDULE E

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4830

Amount of Each Disbursement this Period: - 85224.00

Memo Item

**C. BMO CONSULTING LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4806

Amount of Each Disbursement this Period: 5550.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ - 79659.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4790</b>
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Amount of Each Disbursement this Period [ ] 80.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4791</b>
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Amount of Each Disbursement this Period [ ] 40.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4792</b>
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Amount of Each Disbursement this Period [ ] 20.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 140.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4793</b> Amount of Each Disbursement this Period [ ] 40.00	
City MCCLEAN	State VA	Zip Code 22101	Category/ Type [ ]
Purpose of Disbursement BANK CHARGES		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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 10 / 24 / 2018	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4794</b> Amount of Each Disbursement this Period [ ] 60.00	
City MCCLEAN	State VA	Zip Code 22101	Category/ Type [ ]
Purpose of Disbursement BANK CHARGES		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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4795</b> Amount of Each Disbursement this Period [ ] 40.00	
City MCCLEAN	State VA	Zip Code 22101	Category/ Type [ ]
Purpose of Disbursement BANK CHARGES		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:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 140.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4799</b> Amount of Each Disbursement this Period [ ] 40.00
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4800</b> Amount of Each Disbursement this Period [ ] 20.00
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4801</b> Amount of Each Disbursement this Period [ ] 20.00
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		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:	<input type="checkbox"/> Memo Item	

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

80.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4802</b>
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Amount of Each Disbursement this Period [ ] 20.00
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4803</b>
City MCCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Amount of Each Disbursement this Period [ ] 20.00
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. FREEDOM FORCE, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2018
Mailing Address 1050 CONNECTICUT AVENUE, NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4821</b>
City WASHINGTON	State DC	Zip Code 20035
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period [ ] 5000.00
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:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5040.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. LOVAS CO, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 6635 W. HAPPY VALLEY RD. SUITE A-104, PMB 198		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4818</b> Amount of Each Disbursement this Period 17500.00
City GLENDALE	State AZ	Zip Code 85310
Purpose of Disbursement FUNDRAISING CONSULTING		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. LOVAS CO, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 6635 W. HAPPY VALLEY RD. SUITE A-104, PMB 198		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4819</b> Amount of Each Disbursement this Period 10000.00
City GLENDALE	State AZ	Zip Code 85310
Purpose of Disbursement FUNDRAISING CONSULTING		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MARSON MEDIA</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 330 E THOMAS ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4804</b> Amount of Each Disbursement this Period 5000.00
City PHOENIX	State AZ	Zip Code 85012
Purpose of Disbursement COMMUNICATIONS CONSULTING		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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	32500.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. MARSON MEDIA</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2018
Mailing Address 330 E THOMAS ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4805</b> Amount of Each Disbursement this Period 5000.00
City PHOENIX	State AZ	Zip Code 85012
Purpose of Disbursement COMMUNICATIONS CONSULTING		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. PUBLIC OPINION STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 214 NORTH FAYETTE STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4824</b> Amount of Each Disbursement this Period 27750.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement SURVEY RESEARCH		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PUBLIC OPINION STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 214 NORTH FAYETTE STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4825</b> Amount of Each Disbursement this Period 1899.82
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement TRAVEL		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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	34649.82
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**DEFENDARIZONA**

Full Name (Last, First, Middle Initial) <b>A. RED RIGHT MEDIA</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address PO BOX 2274		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4828</b> Amount of Each Disbursement this Period [REDACTED] - 3159585.52
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement SEE SCHEDULE E		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. RICHARD SALES MEDIA</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 2375 E CAMELBACK RD SUITE 600		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4820</b> Amount of Each Disbursement this Period [REDACTED] 3000.00
City PHOENIX	State AZ	Zip Code 85016
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TARGET ENTERPRISES</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 15260 VENTURA BLVD SUITE 1240		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4829</b> Amount of Each Disbursement this Period [REDACTED] - 297802.50
City SHERMAN OAKS	State CA	Zip Code 91403
Purpose of Disbursement SEE SCHEDULE E		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

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

[REDACTED] - 3454388.02

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

[REDACTED] - 3459879.19



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ARENA COMMUNICATIONS
Mailing Address 1780 SEQUOIA VISTA CIRCLE
City SALT LAKE CITY State UT Zip Code 84104
Purpose of Expenditure POSTAGE / PRINTING / PRODUCTION
Category/Type
Date of Public Distribution/Dissemination 10 / 19 / 2018
Amount 85224.00
Transaction ID : SE.4605
Date of Disbursement or Obligation 10 / 19 / 2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ARENA COMMUNICATIONS
Mailing Address 1780 SEQUOIA VISTA CIRCLE
City SALT LAKE CITY State UT Zip Code 84104
Purpose of Expenditure POSTAGE / PRINTING / PRODUCTION
Category/Type
Date of Public Distribution/Dissemination 10 / 22 / 2018
Amount 80185.00
Transaction ID : SE.4683
Date of Disbursement or Obligation 10 / 22 / 2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 165409.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , [Electronically Filed]

Date 12 / 06 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ARENA COMMUNICATIONS
Mailing Address 1780 SEQUOIA VISTA CIRCLE
City SALT LAKE CITY State UT Zip Code 84104
Purpose of Expenditure POSTAGE / PRINTING / PRODUCTION
Category/Type
Date of Public Distribution/Dissemination 10 / 24 / 2018
Amount 83538.00
Transaction ID : SE.4703
Date of Disbursement or Obligation 10 / 23 / 2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS
Category/Type
Date of Public Distribution/Dissemination 10 / 19 / 2018
Amount 18601.20
Transaction ID : SE.4606
Date of Disbursement or Obligation 10 / 19 / 2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 102139.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, ,

[Electronically Filed]

Date 12 / 06 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS / SMS MESSAGING
Date of Public Distribution/Dissemination 10 / 20 / 2018
Amount 52568.38
Transaction ID : SE.4613
Date of Disbursement or Obligation 10 / 19 / 2018

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Office Sought: House District:
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 13681968.77
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS / SMS MESSAGING
Date of Public Distribution/Dissemination 10 / 22 / 2018
Amount 67702.88
Transaction ID : SE.4684
Date of Disbursement or Obligation 10 / 22 / 2018

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Office Sought: House District:
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 13829856.65
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 120271.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , [Electronically Filed] Date 12 / 06 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS
Date of Public Distribution/Dissemination 10/25/2018
Amount 3055.00
Transaction ID : SE.4719
Date of Disbursement or Obligation 10/25/2018

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS / SMS MESSAGING
Date of Public Distribution/Dissemination 10/29/2018
Amount 81175.53
Transaction ID : SE.4723
Date of Disbursement or Obligation 10/29/2018

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 84230.53
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OTTENHOFF, BENJAMIN, ,

[Electronically Filed]

Date 12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS
Date of Public Distribution/Dissemination 10/31/2018
Amount 138009.00
Transaction ID : SE.4736
Date of Disbursement or Obligation 10/31/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS
Date of Public Distribution/Dissemination 11/02/2018
Amount 44194.00
Transaction ID : SE.4742
Date of Disbursement or Obligation 11/02/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 182203.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OTTENHOFF, BENJAMIN, ,

[Electronically Filed]

Date

12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CONNECTION STRATEGY, LLC
Mailing Address PO BOX 25913
City ALEXANDRIA State VA Zip Code 22313
Purpose of Expenditure PHONE CALLS / SMS MESSAGING
Date of Public Distribution/Dissemination 11 / 05 / 2018
Amount 56351.52
Transaction ID : SE.4745
Date of Disbursement or Obligation 11 / 05 / 2018

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 17835581.86

Full Name of Payee DMM MEDIA
Mailing Address 1911 N. FORT MYER DRIVE STE 400
City ARLINGTON State VA Zip Code 22209
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10 / 18 / 2018
Amount 12669.25
Transaction ID : SE.4596
Date of Disbursement or Obligation 10 / 18 / 2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 13295045.01

(a) SUBTOTAL of Itemized Independent Expenditures 69020.77
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , [Electronically Filed] Date 12 / 06 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee DMM MEDIA
Mailing Address 1911 N. FORT MYER DRIVE STE 400
City ARLINGTON State VA Zip Code 22209
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/19/2018
Amount 2569.80
Transaction ID: SE.4604
Date of Disbursement or Obligation 10/19/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee DMM MEDIA
Mailing Address 1911 N. FORT MYER DRIVE STE 400
City ARLINGTON State VA Zip Code 22209
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/25/2018
Amount 15716.45
Transaction ID: SE.4711
Date of Disbursement or Obligation 10/25/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 18286.25
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OTTENHOFF, BENJAMIN, ,

[Electronically Filed]

Date 12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee DMM MEDIA
Mailing Address 1911 N. FORT MYER DRIVE STE 400
City ARLINGTON State VA Zip Code 22209
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/31/2018
Amount 50.00
Transaction ID: SE.4731
Date of Disbursement or Obligation 10/30/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 17299174.84

Full Name of Payee DMM MEDIA
Mailing Address 1911 N. FORT MYER DRIVE STE 400
City ARLINGTON State VA Zip Code 22209
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 11/01/2018
Amount 50.00
Transaction ID: SE.4739
Date of Disbursement or Obligation 11/01/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 17735036.34

(a) SUBTOTAL of Itemized Independent Expenditures 100.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , [Electronically Filed]

Date 12/06/2018



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EXCELSIOR STRATEGIES LLC
Mailing Address P.O. BOX 711024
City HERNDON State VA Zip Code 20171
Purpose of Expenditure EMAIL MESSAGING
Date of Public Distribution/Dissemination 10/25/2018
Amount 2975.00
Transaction ID : SE.4718
Date of Disbursement or Obligation 10/25/2018

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 15575453.66

Full Name of Payee FP1 DIGITAL, LLC
Mailing Address 1826 JEFFERSON PL, NW
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/18/2018
Amount 224585.38
Transaction ID : SE.4597
Date of Disbursement or Obligation 10/18/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 13519630.39

(a) SUBTOTAL of Itemized Independent Expenditures 227560.38
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OTTENHOFF, BENJAMIN, ,

[Electronically Filed]

Date

12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee FP1 DIGITAL, LLC
Mailing Address 1826 JEFFERSON PL, NW
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/23/2018
Amount 166808.25
Transaction ID: SE.4690
Date of Disbursement or Obligation 10/23/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 15114863.21

Full Name of Payee FP1 DIGITAL, LLC
Mailing Address 1826 JEFFERSON PL, NW
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/23/2018
Amount 166808.25
Transaction ID: SE.4691
Date of Disbursement or Obligation 10/23/2018

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 15281671.46

(a) SUBTOTAL of Itemized Independent Expenditures 333616.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , [Electronically Filed] Date 12/06/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee FP1 DIGITAL, LLC
Mailing Address 1826 JEFFERSON PL, NW
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/25/2018
Amount 187582.50
Transaction ID: SE.4712
Date of Disbursement or Obligation 10/25/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee FP1 DIGITAL, LLC
Mailing Address 1826 JEFFERSON PL, NW
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/30/2018
Amount 189000.00
Transaction ID: SE.4727
Date of Disbursement or Obligation 10/30/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 376582.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , [Electronically Filed] Date 12/06/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RED RIGHT MEDIA
Mailing Address PO BOX 2274
City ARLINGTON State VA Zip Code 22202
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/18/2018
Amount 3159585.52
Transaction ID: SE.4595
Date of Disbursement or Obligation 10/18/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 13282375.76

Full Name of Payee RED RIGHT MEDIA
Mailing Address PO BOX 2274
City ARLINGTON State VA Zip Code 22202
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/23/2018
Amount 1118198.31
Transaction ID: SE.4688
Date of Disbursement or Obligation 10/22/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 14948054.96

(a) SUBTOTAL of Itemized Independent Expenditures 4277783.83
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , [Electronically Filed] Date 12/06/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RED RIGHT MEDIA
Mailing Address PO BOX 2274
City ARLINGTON State VA Zip Code 22202
Purpose of Expenditure MEDIA PLACEMENT
Date of Public Distribution/Dissemination 10/30/2018
Amount 1450440.65
Transaction ID : SE.4726
Date of Disbursement or Obligation 10/26/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee RICHARD SALES MEDIA
Mailing Address 2375 E CAMELBACK RD SUITE 600
City PHOENIX State AZ Zip Code 85016
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/18/2018
Amount 3375.00
Transaction ID : SE.4598
Date of Disbursement or Obligation 10/18/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1453815.65
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OTTENHOFF, BENJAMIN, ,

[Electronically Filed]

Date

12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RICHARD SALES MEDIA
Mailing Address 2375 E CAMELBACK RD SUITE 600
City PHOENIX State AZ Zip Code 85016
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/25/2018
Amount 3375.00
Transaction ID : SE.4713
Date of Disbursement or Obligation 10/25/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee TARGETED VICTORY
Mailing Address 1100 WILSON BLVD FL 10
City ARLINGTON State VA Zip Code 22209
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/23/2018
Amount 297.63
Transaction ID : SE.4699
Date of Disbursement or Obligation 10/23/2018

Name of Federal Candidate: SINEMA, KYRSTEN, ,
Support Oppose
Office Sought: House Senate State: AZ
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3672.63
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, ,

[Electronically Filed]

Date

12/06/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDARIZONA
FEC IDENTIFICATION NUMBER C C00668301

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee TARGETED VICTORY
Mailing Address 1100 WILSON BLVD FL 10
City ARLINGTON State VA Zip Code 22209
Purpose of Expenditure MEDIA PRODUCTION
Name of Federal Candidate: MCSALLY, MARTHA, , ,
Calendar Year-To-Date Per Election for Office Sought 15282266.71
Disbursement For: General 2018

Full Name of Payee TARGET ENTERPRISES
Mailing Address 15260 VENTURA BLVD SUITE 1240
City SHERMAN OAKS State CA Zip Code 91403
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: SINEMA, KYRSTEN, , ,
Calendar Year-To-Date Per Election for Office Sought 17596977.34
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 298100.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 7712791.62

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OTTENHOFF, BENJAMIN, , ,

[Electronically Filed]

Date

12 / 06 / 2018