

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

PAUL GOSAR FOR CONGRESS

ADDRESS (number and street) ▼

PO Box 2991

Check if different than previously reported. (ACC)

Florence

AZ

85132

2. **FEC IDENTIFICATION NUMBER** ▼

C C00461806

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

AZ

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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 Dr. W. Brian Powley

Signature of Treasurer Dr. W. Brian Powley

*[Electronically Filed]*

Date

/  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**PAUL GOSAR FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	182214.60	889519.17
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	6366.65
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	182214.60	883152.52
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	71726.80	466047.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	2230.07	2817.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	69496.73	463229.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	447081.04	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	14917.28	

**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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**PAUL GOSAR FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	125480.98	502235.98
(ii) Unitemized.....	11368.00	75003.85
(iii) TOTAL of contributions from individuals ▶	136848.98	577239.83
(b) Political Party Committees.....	0.00	1154.34
(c) Other Political Committees (such as PACs).....	45365.62	311125.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	182214.60	889519.17
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	8465.71
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	2230.07	2817.01
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	1.51
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	184444.67	900803.40

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	71726.80	466047.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	3700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2666.65
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6366.65
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	71726.80	472413.65

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	334363.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	184444.67
25. SUBTOTAL (add Line 23 and Line 24).....	518807.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	71726.80
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	447081.04

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Jacqueline Allen**

Mailing Address 6520 N 7th Ave

City Phoenix	State AZ	Zip Code 85103
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Endodontics	Occupation Dentist
---------------------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : SA11AI.15080**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**David Anderson**

Mailing Address 5288 Dawes Ave.

City Alexandria	State VA	Zip Code 22311
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Dentist
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15238**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Christine E. Augustine**

Mailing Address 2744 E Utopia Rd.

City Phoenix	State AZ	Zip Code 85050
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FEC ID number of contributing federal political committee. **C**

Name of Employer DESERT TREE FARM/	Occupation Office Manager
---------------------------------------	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.14916**

Amount of Each Receipt this Period  
250.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew R. Bailey**

Mailing Address 4110 Emery Place NW

City Washington State DC Zip Code 20016

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

Name of Employer VA Occupation Economic Developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15082**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jason Baran**

Mailing Address 4140 N Central Ave. #1090

City Phoenix State AZ Zip Code 85012

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

Name of Employer Salt River Power Occupation Government Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : SA11AI.15062**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Harold Barrett**

Mailing Address 3151 Juniper Lane

City Falls Church State VA Zip Code 22044

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.14918**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Barbara Beddes</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2012	
Mailing Address 4430 Bobcat		<b>Transaction ID : SA11AI.15084</b>	
City Casper	State WY	Zip Code 82604	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Alonzo Bell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2012	
Mailing Address 3507 Malvern Ct.		<b>Transaction ID : SA11AI.15085</b>	
City Alexandria	State VA	Zip Code 22304	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 700.00		

Full Name (Last, First, Middle Initial) <b>C. Tyler Bergien</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2012	
Mailing Address 5055 Lake Lane		<b>Transaction ID : SA11AI.14920</b>	
City Jackson	State WY	Zip Code 83001	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Berman**

Mailing Address 311 Park Avenue

City Falls Church State VA Zip Code 22046

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

Name of Employer Self Occupation DDS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15087**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Janine Bethea**

Mailing Address 5546 Waterford Green Glen

City Marietta State GA Zip Code 30068

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

Name of Employer Bethea Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.14921**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Gerald W. Bird**

Mailing Address 1983 S Rockledge Dr

City Rockledge State FL Zip Code 32955

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

Name of Employer Bird Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.14922**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00



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

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

FOR LINE NUMBER: PAGE 9 OF 127  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John H. Bishop DMD**

Mailing Address 41 Buck Island Pt.

City State Zip Code  
Guntersville AL 35976

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

Name of Employer Occupation  
Motorist Insurance Co. CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 27 2012

**Transaction ID : SA11Al.14924**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Black**

Mailing Address 144 Camino Barranca

City State Zip Code  
El Paso TX 79912

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

Name of Employer Occupation  
ECRM Inc. CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 08 2012

**Transaction ID : SA11Al.15089**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Kristin Bloomquist**

Mailing Address 63333 N Scottsdale Rd #20

City State Zip Code  
Scottsdale AZ 85250

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

Name of Employer Occupation  
Laflamme CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 04 2012

**Transaction ID : SA11Al.15091**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John Boelts**

Mailing Address 1573 E Kuns Court

City Yuma State AZ Zip Code 85365

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.14926**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark Bonsall**

Mailing Address 6 E Cactus Wren Dr.

City Phoenix State AZ Zip Code 85020

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

Name of Employer SRP Occupation General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.15093**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ed Boschma**

Mailing Address 7220 N 387th Ave

City Tonopah State AZ Zip Code 85354

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.15408**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Nektarios Bouzis</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2012
Mailing Address 708 W 8th St.		<b>Transaction ID : SA11AI.15260</b>
City Gillette	State WY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Lola Briggs</b>		Date of Receipt MM / DD / YYYY 05 / 25 / 2012
Mailing Address 11374 E 39th Ln.		<b>Transaction ID : SA11AI.14928</b>
City Yuma	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. Myron Bromberg</b>		Date of Receipt MM / DD / YYYY 05 / 29 / 2012
Mailing Address 7012 Reseda Blvd		<b>Transaction ID : SA11AI.15094</b>
City Reseda	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Bromberg Dental	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Karen Brooks**

Mailing Address 4597 W La Quirta Loop

City Yuma State AZ Zip Code 85364

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : SA11AI.14930**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Terry Buckenheimer**

Mailing Address 3906 W Neptune St

City Tampa State FL Zip Code 33629

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

Name of Employer Buckenheimer Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.15095**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles Bush**

Mailing Address PO Box 976

City Eloy State AZ Zip Code 85131

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.14932**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dr. William Calnon</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2012	
Mailing Address 116 Colby Street		<b>Transaction ID : SA11AI.15096</b>	
City Spencerport	State NY	Zip Code 14559	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Calnon Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Matthew Campbell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2012	
Mailing Address 1601 Elsdon Circle		<b>Transaction ID : SA11AI.15097</b>	
City Carmichael	State CA	Zip Code 95608	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Campbell Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		

Full Name (Last, First, Middle Initial) <b>C. Robert Cannell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2012	
Mailing Address 12394 E Del Norte		<b>Transaction ID : SA11AI.15099</b>	
City Yuma	State AZ	Zip Code 85367	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Self	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Doris Carpenter**

Mailing Address 224 South Mount Vernon Ave.

City Prescott State AZ Zip Code 86303

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

Name of Employer NA Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.14725**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth Carpenter**

Mailing Address 715 W 37th St.

City Yuma State AZ Zip Code 85364

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

Name of Employer Self Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.14934**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Cheek**

Mailing Address 621 Edisto Ct.

City Chapel Hill State NC Zip Code 27514

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 20 / 2012

**Transaction ID : SA11AI.14935**

Amount of Each Receipt this Period  
**250.00**

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Ciraulo**

Mailing Address 15740 E. Jackrabbit Ln

City Fountain Hills State AZ Zip Code 85268

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

Name of Employer EHC, LLC Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2012**

**Transaction ID : SA11AI.14778**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Anna W. Cocklin**

Mailing Address 242 Plaza Ct.

City Prescott State AZ Zip Code 86303

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2012**

**Transaction ID : SA11AI.14783**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kevin S Conroy**

Mailing Address 6605 N 19th Ave Suite B

City Phoenix State AZ Zip Code 85015

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

Name of Employer Allen Endodontic Group Occupation Administrator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 19 / 2012**

**Transaction ID : SA11AI.15100**

Amount of Each Receipt this Period  
**500.00**

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin S Conroy**

Mailing Address 6605 N 19th Ave Suite B

City Phoenix State AZ Zip Code 85015

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

Name of Employer: Allen Endodontic Group Occupation: Administrator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 03 / 2012

**Transaction ID : SA11AI.15101**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Malcolm Craig**

Mailing Address 2057 Al Beasley

City Flagstaff State AZ Zip Code 86001

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 / 01 / 2012

**Transaction ID : SA11AI.15103**

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Sally Cram**

Mailing Address 6341 Linway Terrace

City McLean State VA Zip Code 22101

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

Name of Employer: Cram Dental Occupation: Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 / 19 / 2012

**Transaction ID : SA11AI.15104**

Amount of Each Receipt this Period: 500.00

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

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

1500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rosemary Cudzewicz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2012
Mailing Address 10659 E. Karen Drive		<b>Transaction ID : SA11AI.15106</b>
City Scottsdale	State AZ	
Zip Code 85255		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ben Cumbus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012
Mailing Address 5833 Carmichael Road		<b>Transaction ID : SA11AI.15201</b>
City Montgomery	State AL	
Zip Code 36117		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00	

Full Name (Last, First, Middle Initial) <b>C. Michael A. Curtis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 04 / 2012
Mailing Address 501 E Thomas Rd.		<b>Transaction ID : SA11AI.15202</b>
City Phoenix	State AZ	
Zip Code 85012		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Michael A. Curtis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2012	
Mailing Address 501 E Thomas Rd.		<b>Transaction ID : SA11AI.15108</b>	
City State Zip Code Phoenix AZ 85012	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 1500.00		
Name of Employer Self Occupation Attorney	Election Cycle-to-Date _____ 1500.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Kurt Davis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 04 / 2012	
Mailing Address 5104 N. 32nd Street #115		<b>Transaction ID : SA11AI.15075</b>	
City State Zip Code Phoenix AZ 85015	Amount of Each Receipt this Period _____ 400.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 1400.00		
Name of Employer FirstStrategic Occupation Consultant	Election Cycle-to-Date _____ 1400.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. Lori Delaney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 07 / 2012	
Mailing Address 2531 E Birchwood Pl		<b>Transaction ID : SA11AI.14937</b>	
City State Zip Code Chandler AZ 85249	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 250.00		
Name of Employer Jersey's Occupation Owner	Election Cycle-to-Date _____ 250.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1150.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dr. Joseph A. Devine</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2012	
Mailing Address 219 E 20th Street		<b>Transaction ID : SA11AI.15109</b>	
City Cheyenne	State WY	Zip Code 82001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Devine Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Terry Dickinson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2012	
Mailing Address 105 Kennondale Lane		<b>Transaction ID : SA11AI.14939</b>	
City Richmond	State VA	Zip Code 23226	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mark Dioguardi</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2012	
Mailing Address 2953 N. Manor Dr. W.		<b>Transaction ID : SA11AI.15063</b>	
City Phoenix	State AZ	Zip Code 85014	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Dioguardi Flynn LLP	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dwayne E. Dobson**

Mailing Address 1200 W Queen Creek Rd.

City Chandler	State AZ	Zip Code 85248
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FEC ID number of contributing federal political committee. **C**

Name of Employer Dobson Family Farms	Occupation Rancher
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.14940**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jacque Dobson**

Mailing Address 2040 S Alma School Rd. Ste 1-397

City Chandler	State AZ	Zip Code 85286
------------------	-------------	-------------------

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

Name of Employer Chapo Farms LLC	Occupation Owner
-------------------------------------	---------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.15111**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**William Dougherty**

Mailing Address 200 Little Falls St #506

City Falls Church	State VA	Zip Code 22046
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FEC ID number of contributing federal political committee. **C**

Name of Employer Woolpert Inc.	Occupation VP
-----------------------------------	------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2012

**Transaction ID : SA11AI.15113**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Jeffrey Dow**

Mailing Address 385 River Road

City Benton State ME Zip Code 04901

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

Name of Employer Dow Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : SA11AI.15289**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Frances Dunbar**

Mailing Address PO Box 350

City Chino Valley State AZ Zip Code 88323

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

Name of Employer Self Occupation Rancher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : SA11AI.15115**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Eileen Dunn**

Mailing Address 6324 Telegraph Street

City Yuma State AZ Zip Code 85365

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.15117**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**William F Dunn**

Mailing Address 1129 S Arizona Avenue

City Yuma State AZ Zip Code 85364

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.15236**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Renee Eastman**

Mailing Address 925 N Longfellow St.

City Arlington State VA Zip Code 22205

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

Name of Employer SRP Occupation Direct of Government Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.14942**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Bryan C. Edgar**

Mailing Address 1911 SW Campus Dr.

City Federal Way State WA Zip Code 98023

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

Name of Employer Edgar Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15065**

Amount of Each Receipt this Period  
 300.00

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

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

2550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Norma Edmonds**

Mailing Address 272 Honeysuckle Circle

City State Zip Code  
Prescott AZ 86301

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

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.14797**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Fabio**

Mailing Address 3920 Chain Bridge Rd.

City State Zip Code  
Fairfax VA 22030

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.14944**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Edward Feinberg DMD**

Mailing Address Harwood Building Ste 322

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.14947**

Amount of Each Receipt this Period  
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Loren J Feldner</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2012	
Mailing Address 13009 S 83rd Ct		<b>Transaction ID : SA11AI.15118</b>	
City Palos Ok	State IL	Zip Code 60464	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Dentist		Amount of Each Receipt this Period _____ 1300.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1300.00		

Full Name (Last, First, Middle Initial) <b>B. Patrick Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2012	
Mailing Address 8690 Ferguson Drive		<b>Transaction ID : SA11AI.14949</b>	
City Yuma	State AZ	Zip Code 85365	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Farmer		Amount of Each Receipt this Period _____ 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>C. William Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012	
Mailing Address 4074 N Lorcom Ln		<b>Transaction ID : SA11AI.15120</b>	
City Arlington	State VA	Zip Code 22207	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Ferguson Group	Occupation Chairman		Amount of Each Receipt this Period _____ 500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Robert Ferris**

Mailing Address 475 Maitland Ave.

City Altamonte Springs State FL Zip Code 32701

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

Name of Employer Ferris Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2012**

**Transaction ID : SA11AI.14801**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Louis Filippone**

Mailing Address 6138 Redwood Square Center

City Centreville State VA Zip Code 20121

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

Name of Employer Self Occupation DDS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 18 / 2012**

**Transaction ID : SA11AI.14951**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Darren Flowers**

Mailing Address 2540 W. Princeville Dr.

City Anthem State AZ Zip Code 85086

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

Name of Employer Flowers Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 04 / 2012**

**Transaction ID : SA11AI.14952**

Amount of Each Receipt this Period  
**250.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lisa Forte**

Mailing Address 15036 Fox Branch Ln.

City Midlothian	State VA	Zip Code 23112
--------------------	-------------	-------------------

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

Name of Employer Lidojost LLC	Occupation Managing Member
----------------------------------	-------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.14954**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Foster**

Mailing Address 7227 N Dreamy Draw Dr Ste 2

City Phoenix	State AZ	Zip Code 85020
-----------------	-------------	-------------------

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

Name of Employer Self	Occupation Contractor
--------------------------	--------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.14956**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**W. A. Franke**

Mailing Address 2525 East Camelback Road, #980

City Phoenix	State AZ	Zip Code 85016
-----------------	-------------	-------------------

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

Name of Employer Indigo Partners	Occupation Managing Member
-------------------------------------	-------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.15240**

Amount of Each Receipt this Period  
2500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 127	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Frydrych**

Mailing Address 5345 Oak Aprk Ave.

City Encino State CA Zip Code 91315

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012

**Transaction ID : SA11AI.15204**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Eugene Giannini**

Mailing Address 5104 Rockwood Pkwy NW

City Washington State DC Zip Code 20016

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

Name of Employer Giannini Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.14957**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gingg**

Mailing Address 4037 N Founder Circle

City Buckeye State AZ Zip Code 85396

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.14959**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Zachary Gingg**

Mailing Address PO Box 1210

City Buckeye State AZ Zip Code 85325

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.14946**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Gorman**

Mailing Address 43693 Kenmore Ln.

City South Riding State VA Zip Code 20152

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

Name of Employer Split Rock Occupation Managing Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15206**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Garrett Gouldin**

Mailing Address 1497 Lily Loch Way

City Great Falls State VA Zip Code 22066

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2012

**Transaction ID : SA11AI.14961**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Molly Greene</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 239 W Lamar Rd.		<b>Transaction ID : SA11AI.15077</b>	
City Phoenix	State AZ	Zip Code 85013	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 400.00	
Name of Employer SRP	Occupation Senior Director		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) <b>B. Ronald Hamm</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2012	
Mailing Address 42997 Lago Stella Pl.		<b>Transaction ID : SA11AI.15122</b>	
City Ashburn	State VA	Zip Code 20148	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer The Ferguson Group	Occupation Partner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Siebe Hamstra</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2012	
Mailing Address PO Box 2139		<b>Transaction ID : SA11AI.14963</b>	
City Chandler	State AZ	Zip Code 85244	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Trader		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Randall Hancock**

Mailing Address 115 Aspen Grove Dr W

City State Zip Code  
Evanston WY 82930

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

Name of Employer Occupation  
Hancock Dental Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15272**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert J Hanlon**

Mailing Address 488 E VALLEY PARKWAY

City State Zip Code  
ESCONDIDO CA 92025

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.14965**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**James Harrison**

Mailing Address 4340 N Arcadia Ln.

City State Zip Code  
Phoenix AZ 85018

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.15124**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Shirley Hartman**

Mailing Address 14291 N Anderson Rd.

City Maricopa State AZ Zip Code 85239

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

Name of Employer Self Occupation Rancher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.14967**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Harvey**

Mailing Address 1800 61st St

City Des Moines State IA Zip Code 50322

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.14734**

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Robert Hawke**

Mailing Address 1575 N. Swan #200

City Tucson State AZ Zip Code 85712

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

Name of Employer Hawke Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2012

**Transaction ID : SA11AI.14896**

Amount of Each Receipt this Period  
 200.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**William Hawkins**

Mailing Address 5111 N. Saddle Rock Lan

City State Zip Code  
Phoenix AZ 85018

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

Name of Employer Occupation  
Hawkins Dental Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : SA11AI.14881**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter Hayes**

Mailing Address 3800 E Lincoln Dr. #36

City State Zip Code  
Phoenix AZ 85018

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

Name of Employer Occupation  
SRP Manager of Govt Affairs

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.15125**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bruce Heiden**

Mailing Address PO Box 428

City State Zip Code  
Buckeye AZ 85328

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

Name of Employer Occupation  
Heiden Land & Cattle company Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.15283**

Amount of Each Receipt this Period  
500.00

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

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

1150.00



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

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

FOR LINE NUMBER: PAGE 33 OF 127  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Herald**

Mailing Address 1305 Bates Rd.

City Cottonwood State AZ Zip Code 86326

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

Name of Employer Herald Dental Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2012**

**Transaction ID : SA11AI.14819**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**R.A. Hinkle**

Mailing Address 6711 Whittier Ave #103

City McLean State VA Zip Code 22101

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2012**

**Transaction ID : SA11AI.15279**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**James Hoag**

Mailing Address 5308 E 22nd St.

City Casper State WY Zip Code 85609

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2012**

**Transaction ID : SA11AI.14969**

Amount of Each Receipt this Period  
**250.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Brian Hokanson</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2012
Mailing Address 1512 Low Ct.		<b>Transaction ID : SA11AI.15126</b>
City Gillette	State WY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Holmes</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 610 N Edison St.		<b>Transaction ID : SA11AI.15421</b>
City Arlington	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Consultant	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Tracy Beth Holter</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 2048 E Glenn Dr		<b>Transaction ID : SA11AI.15284</b>
City Phoenix	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Apollo Group	Occupation Director of Internal Audit	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John Hoopes**

Mailing Address 333 W Elliot Rd.

City Chandler State AZ Zip Code 85115

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.14971**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Allison House**

Mailing Address 10615 N. 44th Street

City Phoenix State AZ Zip Code 85028

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

Name of Employer House Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : SA11AI.15071**

Amount of Each Receipt this Period  
 350.00

**C.** Full Name (Last, First, Middle Initial)  
**C A Howlett**

Mailing Address 7616 E Krall St

City Scottsdale State AZ Zip Code 85250

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

Name of Employer Indigo Partners Occupation Investor- Private Equity

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.15208**

Amount of Each Receipt this Period  
 1000.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Carol Hungerford**

Mailing Address 1300 Chara Ave

City State Zip Code  
Gillette WY 82718

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

Name of Employer Occupation  
Hungerford Dental Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2012**

**Transaction ID : SA11A1.15276**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Richard A Hunt**

Mailing Address 6001 N. A1A PMB 8335

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
Consumer Bank President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 08 / 2012**

**Transaction ID : SA11A1.15128**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Bruce Hutchison**

Mailing Address 15010 Starry Night Lane

City State Zip Code  
Centreville VA 20120

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 18 / 2012**

**Transaction ID : SA11A1.15210**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Gordon R Isbell**

Mailing Address 241 South 4th Street

City State Zip Code  
Gadsden AL 35901

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

Name of Employer Occupation  
Isbell Dental Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.14899**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**James Jackson**

Mailing Address 8635 N Oak Forest Dr.

City State Zip Code  
Prescott AZ 86305

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.14973**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lucien S Johnson**

Mailing Address 1951 S. Alafaya Tr.

City State Zip Code  
Orlando FL 32828

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.14975**

Amount of Each Receipt this Period  
250.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Paul Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2012	
Mailing Address PO BOX 224		<b>Transaction ID : SA11AI.15130</b>	
City Yuma	State AZ	Zip Code 85355	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer City of Yuma	Occupation Deputy Mayor		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Gary Kaihara</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2012	
Mailing Address 9804 Thunderhill Ct.		<b>Transaction ID : SA11AI.15132</b>	
City Great Falls	State VA	Zip Code 22066	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Chad Kasperowski</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2012	
Mailing Address 8176 McCauley Way		<b>Transaction ID : SA11AI.14977</b>	
City Lorton	State VA	Zip Code 22079	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Kassoff**

Mailing Address 7604 Rosssdu Ct.

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Wilkes Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.15248**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Hoda Kazemifar**

Mailing Address 10215 Forest Lake Dr.

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.14979**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Kelly**

Mailing Address 7819 Montvale Way

City State Zip Code  
McLean VA 22102

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

Name of Employer Occupation  
Van Scoyoc Associates Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.15134**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Bradley Kincheloe**

Mailing Address 6244 Yellowstone Rd

City Cheyenne State WY Zip Code 82009

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

Name of Employer Kincheloe Dental Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15264**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Gretchen Kitchel**

Mailing Address 7557 E Phantom Way

City Scottsdale State AZ Zip Code 85253

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

Name of Employer SRP Occupation Government Relations

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.14981**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Klein**

Mailing Address 11299 Owings Mills Blvd

City Owings Mills State MD Zip Code 21117

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

Name of Employer Highbridge Capital Occupation Director

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.15250**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Rodney J Klima**

Mailing Address 9807 Flintridge Court

City Fairfax	State VA	Zip Code 22032
-----------------	-------------	-------------------

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

Name of Employer Klima Dental	Occupation Dentist
----------------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15135**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Gary Knight**

Mailing Address 8330 W La Caille

City Peoria	State AZ	Zip Code 85383
----------------	-------------	-------------------

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

Name of Employer Knight Transportation	Occupation Transportation
---	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.15230**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Keith Knight**

Mailing Address 5460 Sunset Lane

City Yorba Linda	State CA	Zip Code 92886
---------------------	-------------	-------------------

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

Name of Employer Knight Transportation	Occupation Executive
---	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.15232**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin P Knight**

Mailing Address 19154 N 107th St

City State Zip Code  
Scottsdale AZ 85255

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

Name of Employer Occupation  
Knight Transportation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.15234**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ram Krishna**

Mailing Address 1376 S Hetteema St.

City State Zip Code  
Yuma AZ 85364

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

Name of Employer Occupation  
Self Orthopedic Surgeon

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.14983**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Georjian Kudyba**

Mailing Address 3636 Ivy Ridge Ct

City State Zip Code  
Buford GA 30519

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

Name of Employer Occupation  
Paul S. Kudyba Jr. DDS Office Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.14985**

Amount of Each Receipt this Period  
250.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Landers**

Mailing Address 956 12th St

City State Zip Code  
Cody WY 82414

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

Name of Employer Occupation  
Landers Dental Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2012**

**Transaction ID : SA11AI.15265**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Barry L Langley**

Mailing Address 1101 Hanging Lantern Circle

City State Zip Code  
Mobile AZ 36695

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2012**

**Transaction ID : SA11AI.15137**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Paul LaRose**

Mailing Address 16602 Meherrin Dr.

City State Zip Code  
Centreville VA 20120

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 18 / 2012**

**Transaction ID : SA11AI.15139**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Edwin Lee</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2012	
Mailing Address 311 Park Avenue		<b>Transaction ID : SA11AI.15212</b>	
City Falls Church	State VA	Zip Code 22046	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation Orthodontist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. William Lessne</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2012	
Mailing Address 3401 N Woodrow St.		<b>Transaction ID : SA11AI.15141</b>	
City Arlington	State VA	Zip Code 22207	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Jonathan Lines</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2012	
Mailing Address 6656 E Mountain View Place		<b>Transaction ID : SA11AI.15143</b>	
City Yuma	State AZ	Zip Code 85365	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Lines and Lundgreen Roofing an	Occupation General Manager		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Loghry**

Mailing Address 16777 S Avenue 2E

City State Zip Code  
Yuma AZ 85365

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

Name of Employer Occupation  
Sunset Nursery Nurserymen

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.14987**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Cheryl Lombard**

Mailing Address 1005 E Hearn Rd.

City State Zip Code  
Phoenix AZ 85022

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

Name of Employer Occupation  
The Nature Conservancy Government Relations Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.14989**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael Lowe**

Mailing Address 400 E Stacey Ln.

City State Zip Code  
Tempe AZ 85284

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

Name of Employer Occupation  
SRP Associate GM

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.14991**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Robert Lynch</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 340 E Palm Ln #140		<b>Transaction ID : SA11AI.15144</b>	
City Phoenix	State AZ	Zip Code 85004	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>B. William MacDonnell</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2012	
Mailing Address 158 Hunter Drive		<b>Transaction ID : SA11AI.15286</b>	
City West Hartford	State CT	Zip Code 06107	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Raymond M Maddox</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 06 / 2012	
Mailing Address 5817 N. Cedar Springs Rd		<b>Transaction ID : SA11AI.14827</b>	
City Muncie	State IN	Zip Code 47304	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Maddox Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 47 OF 127  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Raymond M Maddox**

Mailing Address 5817 N. Cedar Springs Rd

City Muncie State IN Zip Code 47304

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

Name of Employer Maddox Dental Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2012

**Transaction ID : SA11AI.14828**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Manela**

Mailing Address 7841 N Paseo Monserrat

City Tucson State AZ Zip Code 85704

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

Name of Employer Foulk-Manela, PC Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.14993**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Kenneth McDougall**

Mailing Address 1605 9th Ave SE

City Jamestown State ND Zip Code 58401

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

Name of Employer McDougall Dental Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15285**

Amount of Each Receipt this Period  
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ronald McEachern</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 07 / 2012
Mailing Address PO Box 806		<b>Transaction ID : SA11AI.14995</b>
City Arizona City	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer General Manager	Occupation Central Arizona Irrigation & Drainage	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Charles McGinty</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2012
Mailing Address 5059 McClelland Blvd		<b>Transaction ID : SA11AI.15147</b>
City Joplin	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer McGinty Dental	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Aidan McSheffrey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 19 / 2012
Mailing Address 4417 N 38th St.		<b>Transaction ID : SA11AI.14997</b>
City Phoenix	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SRP	Occupation Manager	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 49 OF 127  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Fernando Meza**

Mailing Address 1000 Congress Lane

City McLean State VA Zip Code 22101

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

Name of Employer Vienna Endodontist Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15149**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Miller DDS**

Mailing Address 4102 Dover Rd.

City Richmond State VA Zip Code 23221

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.15151**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**William Miller**

Mailing Address 2125 Meander

City Prescott State AZ Zip Code 86305

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.15146**

Amount of Each Receipt this Period  
 575.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lewis Mitchell Jr.**

Mailing Address 321 Dogwood Circle

City Gasden	State AL	Zip Code 35901
----------------	-------------	-------------------

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

Name of Employer Mitchell Dental	Occupation Dentist
-------------------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.14999**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**George Mohatt**

Mailing Address 147 Scott Dr

City Sheridan	State WY	Zip Code 82801
------------------	-------------	-------------------

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

Name of Employer Mohatt Dental	Occupation Dentist
-----------------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15273**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**James Mollenkopf**

Mailing Address 5807 Kirktree Ct.

City Fairfax	State VA	Zip Code 22032
-----------------	-------------	-------------------

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

Name of Employer Markwest Energy Partners	Occupation Executive
--	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15001**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

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

Mailing Address 7700 Morningside Drive, NW

City Washington State DC Zip Code 20012

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

Name of Employer Drinker Biddle Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.15153**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Morabito**

Mailing Address 729 Lawton St.

City McLean State VA Zip Code 22101

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.15003**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Morrison**

Mailing Address 21541 S 138th St.

City Chandler State AZ Zip Code 85266

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

Name of Employer Self Occupation DDS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.15005**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Gary Mortimer</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2012
Mailing Address 3700 S Old Cherry Rd.		<b>Transaction ID : SA11AI.15155</b>
City Dewey	State AZ	
Zip Code 86327		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Farmer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Nina Mullins</b>		Date of Receipt MM / DD / YYYY 06 / 02 / 2012
Mailing Address PO Box 52025		<b>Transaction ID : SA11AI.15007</b>
City Phoenix	State AZ	
Zip Code 85072		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SRP	Occupation Senior Director	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. Rhett Murray</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2012
Mailing Address 11903 E Yale Way		<b>Transaction ID : SA11AI.15156</b>
City Aurora	State CO	
Zip Code 80014		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Rhett I Murray DDSPC	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A. Gary Myers**  
Full Name (Last, First, Middle Initial)  
Mailing Address 631 Creekview Circle

City Vestavia	State AL	Zip Code 35226
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Dentist
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.15214**

Amount of Each Receipt this Period  
 1000.00

**B. Bettina Nava**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5736 N. 2nd Avenue

City Phoenix	State AZ	Zip Code 85013
-----------------	-------------	-------------------

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

Name of Employer FirstStrategic Communications and Publ	Occupation Partner
--	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.15008**

Amount of Each Receipt this Period  
 250.00

**C. Yehuda Neuberger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1829 Reistertown Rd.

City Pikesville	State MD	Zip Code 21208
--------------------	-------------	-------------------

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

Name of Employer Self	Occupation Investor
--------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.15252**

Amount of Each Receipt this Period  
 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Thuy Ngo</b>		Date of Receipt MM / DD / YYYY 06 / 04 / 2012
Mailing Address 4550 E Bell Rd. Ste 102		<b>Transaction ID : SA11AI.15158</b>
City Phoenix	State AZ	
Zip Code 85032		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Robert Noone</b>		Date of Receipt MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 2115		<b>Transaction ID : SA11AI.15009</b>
City Camp Verde	State AZ	
Zip Code 86322		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Dentist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Kirk Norbo</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2012
Mailing Address PO Box 355		<b>Transaction ID : SA11AI.15216</b>
City Waterford	State VA	
Zip Code 20197		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation DMD	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Nowlin**

Mailing Address 350 E Cornerstone Circle

City State Zip Code  
Casa Grande AZ 85122

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

Name of Employer Occupation  
Self Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.15160**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Merle Nunemaker**

Mailing Address 400 E Red Bridge Rd, Ste 120

City State Zip Code  
Kansas City MO 64131

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15010**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael O'Connor**

Mailing Address 6105 E Shangri La Rd.

City State Zip Code  
Scottsdale AZ 85254

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

Name of Employer Occupation  
Jennings Strouss Salmon Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.15012**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. David Okano</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2012	
Mailing Address 1208 Hilltop Dr., #209		<b>Transaction ID : SA11AI.15263</b>	
City Rock Springs	State AZ	Zip Code 82901	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Paul Olenyn DDS</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2012	
Mailing Address 5229 Dunleigh Dr.		<b>Transaction ID : SA11AI.15079</b>	
City Burke	State VA	Zip Code 22015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) <b>C. Paul Orme</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2012	
Mailing Address HC 63 Box 3042		<b>Transaction ID : SA11AI.15161</b>	
City Mayer	State AZ	Zip Code 85333	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Rancher		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Philip Oro</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 10260 N Camino Valdeflores		<b>Transaction ID : SA11AI.15014</b>	
City Oro Valley	State AZ	Zip Code 85737	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Oro Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. John H Osbeck</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2012	
Mailing Address 706 E Cherry St.		<b>Transaction ID : SA11AI.14744</b>	
City Payson	State AZ	Zip Code 85541	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer LabCorp	Occupation Service Rep		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 341.00		

Full Name (Last, First, Middle Initial) <b>C. John H Osbeck</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2012	
Mailing Address 706 E Cherry St.		<b>Transaction ID : SA11AI.14743</b>	
City Payson	State AZ	Zip Code 85541	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer LabCorp	Occupation Service Rep		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 391.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kent Palcanis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012	
Mailing Address 4130 Cliff Rd. S		<b>Transaction ID : SA11AI.15016</b>	
City Birmingham	State AL	Zip Code 35222	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Osprey Pero Consulting	Occupation Owner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Gerson Panitch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012	
Mailing Address 7604 Glackens Dr.		<b>Transaction ID : SA11AI.15274</b>	
City Potomac	State MD	Zip Code 20854	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer Finnegan	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Pascua Yaqui Tribe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 17 / 2012	
Mailing Address 7474 South Camino De Oeste		<b>Transaction ID : SA11AI.14626</b>	
City Tucson	State AZ	Zip Code 85746	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2500.00	
Name of Employer	Occupation		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Oscar M. Pena**

Mailing Address 1787 E. Desert Garden Dr.

City Tucson State AZ Zip Code 85718

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

Name of Employer Oscar M. Pena DDS, MSD, PC Occupation Endodontist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15017**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark T. Peterson**

Mailing Address 1410 S High Valley Ranch Rd

City Prescott State AZ Zip Code 86303

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

Name of Employer Taco Bell Occupation Franchise Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15241**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Timothy J. Pieper**

Mailing Address 112 Holly Dr.

City Torrington State WY Zip Code 82240

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

Name of Employer Pieper Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.15218**

Amount of Each Receipt this Period  
 1000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Portell**

Mailing Address 6120 Brandon Ave. Ste 314

City Springfield State VA Zip Code 22150

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15019**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sharla Powley**

Mailing Address 41611 N Shadow Creek Way

City Anthem State AZ Zip Code 85086

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

Name of Employer US Airways Occupation Flight Attendant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.15021**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. W. Brian Powley**

Mailing Address 5212 E Larkspur Drive

City Scottsdale State AZ Zip Code 85254

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

Name of Employer Powley Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : SA11AI.15425**

Amount of Each Receipt this Period  
 917.10  
 In-kind - Travel - Hotel, Meals, Transportation

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

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

1417.10

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Rayner**

Mailing Address 14929 W Broadway Rd.

City State Zip Code  
Goodyear AZ 85338

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

Name of Employer Self Occupation Rancher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.15067**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Steven Reitan**

Mailing Address 11814 N. 60th St.

City State Zip Code  
Scottsdale AZ 85254

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

Name of Employer Reitan Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2012

**Transaction ID : SA11AI.15072**

Amount of Each Receipt this Period  
 350.00

**C.** Full Name (Last, First, Middle Initial)  
**Elwood Rice**

Mailing Address 703 medical park drive

City State Zip Code  
mexico MO 65265

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.15023**

Amount of Each Receipt this Period  
 250.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**A. Rizkalla**

Mailing Address 3100 S Machester St #T4

City Falls Church State VA Zip Code 22044

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15163**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Clyde M. Robinson**

Mailing Address 2330 N. Rosemont

City Tucson State AZ Zip Code 85712

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

Name of Employer Robinson Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2012

**Transaction ID : SA11AI.15024**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Steve Roman**

Mailing Address 3022 North Manor Drive East

City Phoenix State AZ Zip Code 85014

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

Name of Employer FirstStrategic Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.15165**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Darellene Roussalis**

Mailing Address 1220 W 30th Street

City Casper State WY Zip Code 82601

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

Name of Employer John Roussalis, Dds Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2012**

**Transaction ID : SA11AI.15267**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**David Rousseau**

Mailing Address 7030 N Wilder Rd.

City Phoenix State AZ Zip Code 85021

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

Name of Employer SRP Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 07 / 2012**

**Transaction ID : SA11AI.15167**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**David Rousseau**

Mailing Address 7030 N Wilder Rd.

City Phoenix State AZ Zip Code 85021

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

Name of Employer SRP Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 04 / 2012**

**Transaction ID : SA11AI.15168**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Will Rousseau**

Mailing Address 3216 N Manor Drive W

City Phoenix State AZ Zip Code 85014

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.15170**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Paul Rovey**

Mailing Address 7711 West Northern Avenue

City Glendale State AZ Zip Code 85303

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : SA11AI.15172**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Tori Sandoval**

Mailing Address 2535 Hualapai Mountain Rd. Ste E

City Kingman State AZ Zip Code 85401

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11AI.15292**

Amount of Each Receipt this Period  
 150.00

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

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

1150.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Sarment**

Mailing Address 4660 Kenmore Ave Ste 312

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Self Occupation Periodontist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2012

**Transaction ID : SA11AI.15026**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**David Sarrett**

Mailing Address 2300 E Cary Ste #529

City State Zip Code  
Richmond VA 23223

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

Name of Employer Self Occupation Dental Consulting

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15028**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Tom Schmitt**

Mailing Address 539 E. Glendale Ave.

City State Zip Code  
Phoenix AZ 85020

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

Name of Employer SELF Occupation Jeweler

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.15174**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Jeanne L Schoemaker**

Mailing Address 105 W. 9th Ave

City Fort Morgan State CO Zip Code 80701

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

Name of Employer Schoemaker Dental Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.15029**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Colin Scott**

Mailing Address 2782 E Villa Park Ct.

City Gilbert State AZ Zip Code 85298

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11AI.15176**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Craig Scott**

Mailing Address 1170 E Manor Dr.

City Casa Grande State AZ Zip Code 85122

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

Name of Employer Self Occupation Investor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11AI.15031**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Craig Scott**

Mailing Address 1170 E Manor Dr.

City State Zip Code  
Casa Grande AZ 85122

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

Name of Employer Self Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.15032**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeff Sevor**

Mailing Address 2295 Lee Road

City State Zip Code  
Winter Park FL 32789

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : SA11AI.15034**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael Shane**

Mailing Address 868 Tweed Ln

City State Zip Code  
Lander WY 82520

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

Name of Employer Shane Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.15036**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 68 OF 127  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jayne M. Shapiro**

Mailing Address 2277 S Spalding Dr #401

City Beverly Hills State CA Zip Code 90212

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

Name of Employer Self Occupation Registered Nurse

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.15038**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Joshua Shein**

Mailing Address 11011 Valley Heights Dr.

City Owings Mills State MD Zip Code 21117

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

Name of Employer 1st Maryland Mortgage Occupation CEO

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.15254**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Shimizu**

Mailing Address 2191 Forest Hills Rd.

City Prescott State AZ Zip Code 86303

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

Name of Employer Self Occupation Sales

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15039**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Sigg**

Mailing Address 325 S Higley Rd.

City Gilbert	State AZ	Zip Code 85296
-----------------	-------------	-------------------

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

Name of Employer Arizona Farm Bureau	Occupation Lobbyist
---	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.14853**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Singer**

Mailing Address 3308 Fallstaff Rd.

City Baltimore	State MD	Zip Code 21215
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FEC ID number of contributing federal political committee. **C**

Name of Employer Exelon	Occupation VP
----------------------------	------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.15256**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Deborah Sliz**

Mailing Address 1225 I Street NW Ste 1150

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

Name of Employer Morgan Meguire LLC	Occupation President & CEO
--	-------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.15178**

Amount of Each Receipt this Period  
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. A. J. Smith**

Mailing Address Old Professional Plaza  
3980 South 700 East, Suite 21

City Salt Lake City State UT Zip Code 84107

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

Name of Employer Smith Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15270**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. A. J. Smith**

Mailing Address Old Professional Plaza  
3980 South 700 East, Suite 21

City Salt Lake City State UT Zip Code 84107

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

Name of Employer Smith Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15271**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Cynthia Smith**

Mailing Address 3050 W 13th Pl.

City Yuma State AZ Zip Code 85384

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

Name of Employer CTS Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.15043**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. L.E. Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2012	
Mailing Address 9531 E Nora Circle		<b>Transaction ID : SA11AI.15180</b>	
City Mesa	State AZ	Zip Code 85207	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Lois Marie Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2012	
Mailing Address P.O. Box 1950		<b>Transaction ID : SA11AI.15068</b>	
City Prescott	State AZ	Zip Code 86302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Unknown	Occupation Unknown		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1425.00		

Full Name (Last, First, Middle Initial) <b>C. Mark Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2012	
Mailing Address 416 E Fairchild Dr.		<b>Transaction ID : SA11AI.15182</b>	
City Highlands Ranch	State CO	Zip Code 80126	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Molycorp	Occupation CEO		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R. Smith**

Mailing Address 6849 E County 9 1/2 St.

City State Zip Code  
Yuma AZ 85365

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

Name of Employer Occupation  
Self Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : SA11AI.15219**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Mary Smith**

Mailing Address 6817 N Cedar Suite 101

City State Zip Code  
Spokane WA 99208

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

Name of Employer Occupation  
Smith Dental Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.15044**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Philip Smith**

Mailing Address PO Box 65717

City State Zip Code  
Tucson AZ 85728

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

Name of Employer Occupation  
AZOMS Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.14906**

Amount of Each Receipt this Period  
200.00

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

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

1450.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Robert L Smith Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2012	
Mailing Address 007 E Commerce St		<b>Transaction ID : SA11AI.15041</b>	
City Hernando	State MS	Zip Code 38632	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Randolph Alan Snyder</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 12 / 2012	
Mailing Address 1325 W. 16th Street, ste.#1		<b>Transaction ID : SA11AI.15199</b>	
City Yuma	State AZ	Zip Code 85364	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 950.00	
Name of Employer Snyder Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Randolph Alan Snyder</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2012	
Mailing Address 1325 W. 16th Street, ste.#1		<b>Transaction ID : SA11AI.15045</b>	
City Yuma	State AZ	Zip Code 85364	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Snyder Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<b>TOTAL</b> This Period (last page this line number only).....	1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 127	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Spinks**

Mailing Address 1684 W. Satinwood Dr.

City Phoenix	State AZ	Zip Code 85045
-----------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Real Estate Broker
-----------------------------------	----------------------------------

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		04		2012

**Transaction ID : SA11AI.15046**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark Spinks**

Mailing Address 1684 W. Satinwood Dr.

City Phoenix	State AZ	Zip Code 85045
-----------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Real Estate Broker
-----------------------------------	----------------------------------

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		26		2012

**Transaction ID : SA11AI.14860**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**William Stacy**

Mailing Address 2731 E Capricorn Pl.

City Chandler	State AZ	Zip Code 85259
------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		07		2012

**Transaction ID : SA11AI.15048**

Amount of Each Receipt this Period  
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**William Stambaugh**

Mailing Address 4425 Jumping Cactus Rd.

City Winkleman State AZ Zip Code 85292

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2012**

**Transaction ID : SA11AI.14907**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Stern**

Mailing Address 6534 Ryanlynn Drive

City Fairfax Station State VA Zip Code 22039

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

Name of Employer Self Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 18 / 2012**

**Transaction ID : SA11AI.15050**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Frederic Sterritt**

Mailing Address 464 South Horizon Way

City Neshanic Station State NJ Zip Code 08853

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

Name of Employer Sterritt Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2012**

**Transaction ID : SA11AI.15288**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alvin W. Stevens Jr.**

Mailing Address 1721 Crosswood Lane

City Birmingham State AL Zip Code 35216

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11Al.15052**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**J.O. Stewart Jr.**

Mailing Address 124 W Castellano Ste 213

City El Paso State TX Zip Code 79912

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

Name of Employer Stewart Holdings Occupation President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : SA11Al.15243**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Marlene Stewart**

Mailing Address 124 W Castellano Ste 213

City El Paso State TX Zip Code 79902

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : SA11Al.15245**

Amount of Each Receipt this Period  
 2500.00

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bill Strickler</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 04 / 2012
Mailing Address 4610 E Ardmore Rd		<b>Transaction ID : SA11AI.15054</b>
City State Zip Code Phoenix AZ 85044	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer Occupation Smart Health Director of Business Development	Amount of Each Receipt this Period _____ 500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Tina Strickler</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 04 / 2012
Mailing Address 4610 E Ardmore Rd.		<b>Transaction ID : SA11AI.14885</b>
City State Zip Code Phoenix AZ 85044	Amount of Each Receipt this Period _____ 150.00	
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer Occupation Practice MoJo Manager	Amount of Each Receipt this Period _____ 450.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Tina Strickler</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 04 / 2012
Mailing Address 4610 E Ardmore Rd.		<b>Transaction ID : SA11AI.14886</b>
City State Zip Code Phoenix AZ 85044	Amount of Each Receipt this Period _____ 150.00	
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer Occupation Practice MoJo Manager	Amount of Each Receipt this Period _____ 600.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 550.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Tina Strickler**

Mailing Address 4610 E Ardmore Rd.

City Phoenix	State AZ	Zip Code 85044
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FEC ID number of contributing federal political committee. **C**

Name of Employer Practice MoJo	Occupation Manager
-----------------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.14887**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Edward Strittmatter**

Mailing Address 5957 Centreville Crest Ln.

City Centreville	State VA	Zip Code 20121
---------------------	-------------	-------------------

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

Name of Employer Self	Occupation Dentist
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.15184**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Zack Studstill**

Mailing Address 501 Arrowhead Drive

City Montgomery	State AL	Zip Code 36117
--------------------	-------------	-------------------

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

Name of Employer Studstill Dental	Occupation Dentist
--------------------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
563.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.15423**

Amount of Each Receipt this Period  
563.88  
In-kind - Hotel Accomodations

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

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

1213.88

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Carol Summerhays**

Mailing Address 6635 Flanders Drive Suite E

City San Diego State CA Zip Code 92121

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

Name of Employer Summerhays Dental Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 08 / 2012**

**Transaction ID : SA11AI.15055**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Holly Swager**

Mailing Address 6602 E. Redfield Road

City Scottsdale State AZ Zip Code 85254

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

Name of Employer EndoArt PLLC Occupation Office Manager

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 02 / 2012**

**Transaction ID : SA11AI.15057**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Arnie G. Sybrant**

Mailing Address 3505 Robertson Road

City Casper State WY Zip Code 82604

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

Name of Employer Sybrant Dental Occupation Dentist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2012**

**Transaction ID : SA11AI.15220**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Tankersley**

Mailing Address 1404 Riversedge Rd.

City Newport News	State VA	Zip Code 23606
----------------------	-------------	-------------------

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

Name of Employer Self	Occupation Dentist
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.14910**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Thelander**

Mailing Address 922 East Ranch Rd.

City Tempe	State AZ	Zip Code 85284
---------------	-------------	-------------------

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

Name of Employer Tempe Farming Co.	Occupation Vice President
---------------------------------------	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11AI.15058**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Thelander**

Mailing Address 922 East Ranch Rd.

City Tempe	State AZ	Zip Code 85284
---------------	-------------	-------------------

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

Name of Employer Tempe Farming Co.	Occupation Vice President
---------------------------------------	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.15185**

Amount of Each Receipt this Period  
500.00

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

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

950.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dr. Bart Thompson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2012	
Mailing Address 7497 Desert Cove		<b>Transaction ID : SA11AI.15186</b>	
City Scottsdale	State AZ	Zip Code 85260	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Thompson Dental	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Frank Thompson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2012	
Mailing Address 7601 E. Clear Sky Trail		<b>Transaction ID : SA11AI.14751</b>	
City Prescott	State AZ	Zip Code 86314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. James H Thompson DMD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 23 / 2012	
Mailing Address 5969 Madra Ave.		<b>Transaction ID : SA11AI.15188</b>	
City San Diego	State CA	Zip Code 92120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. James H Thompson DMD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012	
Mailing Address 5969 Madra Ave.		<b>Transaction ID : SA11AI.15189</b>	
City San Diego	State CA	Zip Code 92120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Phillip Townsend</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2012	
Mailing Address 4620 Laguna Dam Rd.		<b>Transaction ID : SA11AI.15221</b>	
City Yuma	State AZ	Zip Code 85365	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Sunland Chemical CO.	Occupation President		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Donald Trawick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2012	
Mailing Address 13613 Winterberry Rdg		<b>Transaction ID : SA11AI.15074</b>	
City Midlothian	State VA	Zip Code 23112	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1850.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Gena Trimble**

Mailing Address PO Box 62452

City Phoenix State AZ Zip Code 85082

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

Name of Employer SRP Occupation Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.15191**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Tyree**

Mailing Address 2134 S Copperview Way

City Yuma State AZ Zip Code 85965

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

Name of Employer Yuma County School Occupation Superintendent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.15070**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Chris Udall**

Mailing Address 8266 E Posada Ave.

City Mesa State AZ Zip Code 85212

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

Name of Employer Agri-Business Council of Arizo Occupation Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : SA11AI.14868**

Amount of Each Receipt this Period  
 100.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alex Vakula**

Mailing Address PO Box 3500

City State Zip Code  
Prescott AZ 86302

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2012

**Transaction ID : SA11AI.14869**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Ken Versman**

Mailing Address 2900 s peoria st

City State Zip Code  
aurora CO 80014

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

Name of Employer ken versman dds Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2012

**Transaction ID : SA11AI.15192**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Grant Ward**

Mailing Address 707 N Hosick Circle

City State Zip Code  
Mesa AZ 85201

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

Name of Employer Maricopa-Stanfield Irrigation Occupation General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.14913**

Amount of Each Receipt this Period  
200.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Weidner**

Mailing Address 10648 Canterbury Rd.

City State Zip Code  
Fairfax Station VA 22039

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

Name of Employer Occupation  
ACERT Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA11AI.15223**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Joshua Weintraub**

Mailing Address 10407 Stevenson Rd.

City State Zip Code  
Stevenson MD 21153

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

Name of Employer Occupation  
Self DDS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012

**Transaction ID : SA11AI.15225**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Jay R Wells III**

Mailing Address 2510 Applegate Road

City State Zip Code  
Bethel Park PA 15102

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

Name of Employer Occupation  
Liberty Health Care Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2012

**Transaction ID : SA11AI.15193**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dr. Jay R Wells III</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2012	
Mailing Address 2510 Applegate Road		<b>Transaction ID : SA11AI.14872</b>	
City Bethel Park	State PA	Zip Code 15102	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Liberty Health Care	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1400.00		

Full Name (Last, First, Middle Initial) <b>B. David Whiston</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2012	
Mailing Address 6400 Arlington Blvd.		<b>Transaction ID : SA11AI.15195</b>	
City Falls Church	State VA	Zip Code 22042	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation DMD		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Shawn R. Whitman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2012	
Mailing Address 3524 Saylor Place		<b>Transaction ID : SA11AI.15227</b>	
City Alexandria	State VA	Zip Code 22304	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Kountoupes Consulting	Occupation VP		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bruce Wiener</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2012	
Mailing Address 12276 Greenleaf Ave.		<b>Transaction ID : SA11AI.15258</b>	
City Potomac	State MD	Zip Code 20854	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation CRNA		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Jerald Wienke</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012	
Mailing Address PO Box 990		<b>Transaction ID : SA11AI.15196</b>	
City Kingman	State AZ	Zip Code 86402	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Wienke Debtal	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Bernadette Wolfswinkel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2012	
Mailing Address 1121 W Warner Rd Se 108		<b>Transaction ID : SA11AI.15247</b>	
City Tempe	State AZ	Zip Code 85258	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Self	Occupation Real Estate		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 127
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Roger Wood</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2012	
Mailing Address 1237 Providence Knoll Dr.		<b>Transaction ID : SA11AI.15229</b>	
City Richmond	State VA	Zip Code 23236	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Greg Wuertz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2012	
Mailing Address 12008 N Hazeldine Rd.		<b>Transaction ID : SA11AI.15198</b>	
City Casa Grande	State AZ	Zip Code 85194	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation FArmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Cheryl Zittle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 04 / 2012	
Mailing Address 3015 W Iron Wood Circle		<b>Transaction ID : SA11AI.15060</b>	
City Chandler	State AZ	Zip Code 85226	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer SRP	Occupation Manager		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	125480.98



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 Connecticut Avenue NW  
Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2012**

**Transaction ID : SA11C.14670**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)**

Mailing Address 1111 NORTH FAIRFAX ST.

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2012**

**Transaction ID : SA11C.14627**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN PUBLIC POWER ASSOCIATION, PUBLIC OWNERSHIP OF ELECTRIC RESOURCES PAC**

Mailing Address 1875 CONNECTICUT AVENUE NW  
SUITE 1200

City WASHINGTON State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C C00161570**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 19 / 2012**

**Transaction ID : SA11C.14671**

Amount of Each Receipt this Period  
**500.00**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY FOR RADIATION ONCOLOGY PAC AKA ASTRO PAC**

Mailing Address 8280 WILLOW OAKS CORPORATE DRIVE  
SUITE 500

City State Zip Code  
FAIRFAX VA 22031

FEC ID number of contributing federal political committee. **C C00384602**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11C.14667**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ARCH COAL INC. POLITICAL ACTION COMMITTEE (ARCHPAC)**

Mailing Address CITYPLACE ONE

City State Zip Code  
ST. LOUIS MO 63141

FEC ID number of contributing federal political committee. **C C00167668**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14668**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Arizona Cotton Growers Association**

Mailing Address 4139 East Broadway Road

City State Zip Code  
Phoenix AZ 85040

FEC ID number of contributing federal political committee. **C C00033795**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11C.14619**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ARIZONA DAIRYMEN POLITICAL ACTION COMMITTEE (ADPAC)**

Mailing Address P.O. BOX 26877

City TEMPE State AZ Zip Code 85285

FEC ID number of contributing federal political committee. **C** C00085019

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11C.14618**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**ARIZONA LIBERTY PROJECT PAC LLC**

Mailing Address 1684 W SATINWOOD DR

City PHOENIX State AZ Zip Code 85045

FEC ID number of contributing federal political committee. **C** C00493999

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11C.14645**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ARIZONA WESTSIDE DISTRICTS PAC**

Mailing Address 1850 N CENTRAL AVENUE SUITE 1100

City PHONENIX State AZ Zip Code 85004

FEC ID number of contributing federal political committee. **C** C00415539

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11C.14620**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 92 OF 127  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BRACEPAC**

Mailing Address 2000 K STREET, NW  
SUITE 500

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00021295**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 07 / 2012

**Transaction ID : SA11C.14633**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BRYAN CAVE LLP POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F Street NW  
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00332643**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2012

**Transaction ID : SA11C.14666**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
COMMITTEE FOR/ADV OF SE COTTON (CASC) SOUTHERN COTTONGROWERS INC/SE COTTON GINNERS ASSN

Mailing Address 139 PROMINENCE COURT  
STE. 110

City DAWSONVILLE State GA Zip Code 30534

FEC ID number of contributing federal political committee. **C C00300426**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 07 / 2012

**Transaction ID : SA11C.14622**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Deloitte Federal PAC**

Mailing Address **PO Box 365**

City **Washington** State **DC** Zip Code **20044**

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 07 / 2012**

**Transaction ID : SA11C.14641**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**DICKSTEIN SHAPIRO LLP PAC**

Mailing Address **1825 EYE STREET, NW**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00110197**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 07 / 2012**

**Transaction ID : SA11C.14639**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**FREEPORT-MCMORAN COPPER & GOLD INC. CITIZENSHIP COMMITTEE**

Mailing Address **1 NORTH CENTRAL AVENUE**

City **PHOENIX** State **AZ** Zip Code **85004**

FEC ID number of contributing federal political committee. **C C00320101**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2012**

**Transaction ID : SA11C.14665**

Amount of Each Receipt this Period  
**2000.00**

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

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

**5000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11C.14663**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14662**

Amount of Each Receipt this Period  
 1365.62

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP**

Mailing Address 412 FIRST STREET, SE, SUITE 300

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14657**

Amount of Each Receipt this Period  
 2000.00

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

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

4365.62

**SCHEDULE A (FEC Form 3)  
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	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC**

Mailing Address P.O. BOX 3799

City State Zip Code  
VISTA CA 92085

FEC ID number of contributing federal political committee. **C** C00450320

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11C.14659**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City State Zip Code  
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2012

**Transaction ID : SA11C.14643**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 KING STREET  
SUITE 600

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14655**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 127
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)

Mailing Address 9110 EAST NICHOLS AVENUE

City State Zip Code  
CENTENNIAL CO 80112

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2012

**Transaction ID : SA11C.14656**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 Executive Circle

City State Zip Code  
Irving TX 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 16 / 2012

**Transaction ID : SA11C.14632**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
NELSON MULLINS RILEY & SCARBOROUGH, LLP FEDERAL POLITICAL COMMITTEE

Mailing Address 1320 MAIN STREET, 17TH FLOOR

City State Zip Code  
COLUMBIA SC 29201

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 07 / 2012

**Transaction ID : SA11C.14637**

Amount of Each Receipt this Period  
500.00

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

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

8000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PETE SESSIONS FOR CONGRESS**

Mailing Address PO BOX 823047

City State Zip Code  
DALLAS TX 75382

FEC ID number of contributing federal political committee. **C** C00303305

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2012

**Transaction ID : SA11C.14624**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**PINNACLE WEST CAPITAL CORPORATION PAC**

Mailing Address 801 Pennsylvania Ave NW  
Suite 214

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 07 / 2012

**Transaction ID : SA11C.14642**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City State Zip Code  
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 19 / 2012

**Transaction ID : SA11C.14654**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE ( SRPPIC)

Mailing Address PO BOX 52025 ISB336

City State Zip Code  
PHOENIX AZ 85072

FEC ID number of contributing federal political committee. **C** C00048579

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11C.14629**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE ( SRPPIC)

Mailing Address PO BOX 52025 ISB336

City State Zip Code  
PHOENIX AZ 85072

FEC ID number of contributing federal political committee. **C** C00048579

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11C.14630**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
SOUTHWEST GAS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 5241 SPRING MOUNTAIN ROAD

City State Zip Code  
LAS VEGAS NV 89150

FEC ID number of contributing federal political committee. **C** C00076737

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2012

**Transaction ID : SA11C.14631**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**SCHEDULE A (FEC Form 3)  
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 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TEVA PHARMACEUTICALS USA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 25 MASSACHUSETTS AVENUE, NW  
SUITE 440

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00434811**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14651**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**TEXTILE RENTAL SERVICES ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (TRSAPAC)**

Mailing Address 1800 DIAGONAL ROAD SUITE 200

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00279828**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14649**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F STREET, NW  
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14653**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TREY GOWDY FOR CONGRESS**

Mailing Address PO BOX 3324

City State Zip Code  
SPARTANBURG SC 29304

FEC ID number of contributing federal political committee. **C** C00462523

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 20 / 2012

**Transaction ID : SA11C.14635**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11C.14647**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2000.00

45365.62

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A. Commercial Property Services Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 16237

City Tampa State FL Zip Code 33687

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA14.15290**

Amount of Each Receipt this Period

Charged in Error

**B. Hyatt Hotels**

Full Name (Last, First, Middle Initial)  
Mailing Address 9805 Q Street

City Omaha State NE Zip Code 68127

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012

**Transaction ID : SA14.15307**

Amount of Each Receipt this Period

Refund of Hotel Stay

**C. Melissa Moore**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 16237

City Tampa State FL Zip Code 33687

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
 Commercial Property Services IT

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012

**Transaction ID : SA14.15304**

Amount of Each Receipt this Period

Charged in Error

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="1992.85"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value="1992.85"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Arizona Dental Association</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 3193 N Drinkwater Blvd		Amount of Each Disbursement this Period 346.49 <b>Transaction ID : SB17.15361</b>
City Scottsdale	State AZ	
Zip Code 85251	Purpose of Disbursement Event Catering Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Arizona Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 3501 N. 24th Street		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.15387</b>
City Phoenix	State AZ	
Zip Code 85016	Purpose of Disbursement Event Registration	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : SB17.15362</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1004.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 95.06 Transaction ID : SB17.15363
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 5.99 Transaction ID : SB17.15364
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 39.72 Transaction ID : SB17.15365
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	95.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 4.48 <b>Transaction ID : SB17.15366</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 0.87 <b>Transaction ID : SB17.15367</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 48.30 <b>Transaction ID : SB17.15368</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	53.65
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 39.02
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : SB17.15369
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 2.01
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : SB17.15370
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 0.68
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : SB17.15371
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	41.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : SB17.15372</b>
City American Fork State UT Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 31.20 <b>Transaction ID : SB17.15373</b>
City American Fork State UT Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 36.96 <b>Transaction ID : SB17.15374</b>
City American Fork State UT Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	76.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 67.52 <b>Transaction ID : SB17.15375</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 43.71 <b>Transaction ID : SB17.15376</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Authorize.net Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 915 South 500 East, Suite 200		Amount of Each Disbursement this Period 19.38 <b>Transaction ID : SB17.15377</b>
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	130.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bulleri Building Account</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address P.O. Box 472		Amount of Each Disbursement this Period 1411.75 <b>Transaction ID : SB17.15308</b>
City Prescott	State AZ	
Zip Code 86302	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 181.09 <b>Transaction ID : SB17.15313</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Matthew Dobler</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 801 Canary Ct.		Amount of Each Disbursement this Period 367.60 <b>Transaction ID : SB17.15413</b>
City Lake Elsinore	State CA	
Zip Code 92530	Purpose of Disbursement Reimbursement of Airfare	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1960.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Expedia, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 333 108th Avenue NE		Amount of Each Disbursement this Period 7.00
City Bellevue State WA Zip Code 98004	Purpose of Disbursement Booking Fee	
Candidate Name	Category/Type	<b>Transaction ID : SB17.15349</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Expedia, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 333 108th Avenue NE		Amount of Each Disbursement this Period 7.00
City Bellevue State WA Zip Code 98004	Purpose of Disbursement Booking Fee	
Candidate Name	Category/Type	<b>Transaction ID : SB17.15350</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 7001 Tower Rd		Amount of Each Disbursement this Period 819.60
City Denver State CO Zip Code 80249	Purpose of Disbursement Airfare	
Candidate Name	Category/Type	<b>Transaction ID : SB17.15351</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	833.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Frontier Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2012
Mailing Address 7001 Tower Rd		Amount of Each Disbursement this Period 1258.60
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Airfare	Transaction ID : SB17.15352
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Frontier Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2012
Mailing Address 7001 Tower Rd		Amount of Each Disbursement this Period 40.00
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Airfare	Transaction ID : SB17.15353
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Maude Gosar</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2012
Mailing Address 7485 Rain Valley Rd.		Amount of Each Disbursement this Period 1951.50
City Flagstaff	State AZ	
Zip Code 86004	Purpose of Disbursement First Ladies Event - Airfare, Hotel	Transaction ID : SB17.15415
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3250.10
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Hieu Tran &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012	
Mailing Address PO Box 11494			Amount of Each Disbursement this Period 1250.00	
City Tempe	State AZ	Zip Code 85284	Transaction ID : SB17.15316	
Purpose of Disbursement Accounting		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Hieu Tran &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012	
Mailing Address PO Box 11494			Amount of Each Disbursement this Period 1250.00	
City Tempe	State AZ	Zip Code 85284	Transaction ID : SB17.15317	
Purpose of Disbursement Accounting		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Hieu Tran &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address PO Box 11494			Amount of Each Disbursement this Period 1250.00	
City Tempe	State AZ	Zip Code 85284	Transaction ID : SB17.15318	
Purpose of Disbursement Accounting		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Hilton</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 7930 Jones Branch Drive, Suite 110		Amount of Each Disbursement this Period 87.67
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement Hotel Stay	Transaction ID : SB17.15354
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. J&amp;R Graphics and Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 638 West Indian School Road		Amount of Each Disbursement this Period 9864.33
City Phoenix	State AZ	
Zip Code 85013	Purpose of Disbursement Road Signs	Transaction ID : SB17.15392
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jim Knupp</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 1641 E Chaparral Dr.		Amount of Each Disbursement this Period 3000.00
City Casa Grande	State AZ	
Zip Code 85122	Purpose of Disbursement Payroll	Transaction ID : SB17.15295
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12952.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jim Knupp</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 1641 E Chaparral Dr.		Amount of Each Disbursement this Period 695.25 <b>Transaction ID : SB17.15297</b>
City Casa Grande	State AZ	
Zip Code 85122	Purpose of Disbursement Reimbursements	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jim Knupp</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1641 E Chaparral Dr.		Amount of Each Disbursement this Period 445.70 <b>Transaction ID : SB17.15299</b>
City Casa Grande	State AZ	
Zip Code 85122	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Jim Knupp</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 1641 E Chaparral Dr.		Amount of Each Disbursement this Period 305.00 <b>Transaction ID : SB17.15300</b>
City Casa Grande	State AZ	
Zip Code 85122	Purpose of Disbursement Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1445.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. M.G. Marshall &amp; Co. LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 1 E Camelback Rd Ste 550.		Amount of Each Disbursement this Period 1104.00 <b>Transaction ID : SB17.15320</b>
City Phoenix State AZ Zip Code 85012	Purpose of Disbursement Petitions	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. M.G. Marshall &amp; Co. LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 1 E Camelback Rd Ste 550.		Amount of Each Disbursement this Period 1104.00 <b>Transaction ID : SB17.15321</b>
City Phoenix State AZ Zip Code 85012	Purpose of Disbursement Petitions	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Moore Information</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 2130 SW Jefferson, Suite 200		Amount of Each Disbursement this Period 7900.00 <b>Transaction ID : SB17.15393</b>
City Portland State OR Zip Code 97201	Purpose of Disbursement Polling	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10108.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mr Video</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 2333 Distribution Circle		Amount of Each Disbursement this Period 328.60
City Silver Springs	State MD	
Zip Code 20910	Purpose of Disbursement Video Production	Transaction ID : SB17.15395
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 144 2nd St,		Amount of Each Disbursement this Period 600.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : SB17.15379
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 144 2nd St,		Amount of Each Disbursement this Period 249.53
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : SB17.15380
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1178.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012		
Mailing Address 144 2nd St,			Amount of Each Disbursement this Period 537.36		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.15381		
Purpose of Disbursement Credit Card Merchant Fees		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Dr. W. Brian Powley</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012		
Mailing Address 5212 E Larkspur Drive			Amount of Each Disbursement this Period 917.10		
City Scottsdale	State AZ	Zip Code 85254	Transaction ID : SB17.15426		
Purpose of Disbursement In-kind - Travel - Hotel, Meals, Transportation		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Prescott Frontier Days, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012		
Mailing Address PO Box 2037			Amount of Each Disbursement this Period 500.00		
City Prescott	State AZ	Zip Code 86302	Transaction ID : SB17.15390		
Purpose of Disbursement Event Registration		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1954.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Revolis</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012		
Mailing Address 7185 Navajo Rd #P			Amount of Each Disbursement this Period 1350.00		
City San Diego	State CA	Zip Code 92119	Transaction ID : SB17.15322		
Purpose of Disbursement Political Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Revolis</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012		
Mailing Address 7185 Navajo Rd #P			Amount of Each Disbursement this Period 2500.00		
City San Diego	State CA	Zip Code 92119	Transaction ID : SB17.15323		
Purpose of Disbursement Political Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Revolis</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012		
Mailing Address 7185 Navajo Rd #P			Amount of Each Disbursement this Period 150.00		
City San Diego	State CA	Zip Code 92119	Transaction ID : SB17.15324		
Purpose of Disbursement Ad Design		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Revolis</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 7185 Navajo Rd #P		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.15325</b>
City San Diego	State CA Zip Code 92119	
Purpose of Disbursement Political Consulting	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Revolis</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 7185 Navajo Rd #P		Amount of Each Disbursement this Period 451.74 <b>Transaction ID : SB17.15356</b>
City San Diego	State CA Zip Code 92119	
Purpose of Disbursement Airfare	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Roundtable Strategies LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 154 W 5th St #219		Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : SB17.15327</b>
City Tempe	State AZ Zip Code 85281	
Purpose of Disbursement Campaign Management	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10951.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sign King of Arizona LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012		
Mailing Address 325 S Westwood Dr 1.			Amount of Each Disbursement this Period 3107.93		
City Mesa	State AZ	Zip Code 85210	Transaction ID : SB17.15397		
Purpose of Disbursement Yard Signs		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Smart Practice</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012		
Mailing Address 3400 E. McDowell Rd.			Amount of Each Disbursement this Period 917.75		
City Phoenix	State AZ	Zip Code 85008	Transaction ID : SB17.15398		
Purpose of Disbursement Printed Promotional Items		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Smart Practice</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2012		
Mailing Address 3400 E. McDowell Rd.			Amount of Each Disbursement this Period 287.14		
City Phoenix	State AZ	Zip Code 85008	Transaction ID : SB17.15399		
Purpose of Disbursement Printed Promotional Items		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4312.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Smart Practice</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 3400 E. McDowell Rd.		Amount of Each Disbursement this Period 57.43
City Phoenix	State AZ	
Zip Code 85008	Purpose of Disbursement Printed Promotional Items	<b>Transaction ID : SB17.15400</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Smart Practice</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 3400 E. McDowell Rd.		Amount of Each Disbursement this Period 2947.60
City Phoenix	State AZ	
Zip Code 85008	Purpose of Disbursement Printed Promotional Items	<b>Transaction ID : SB17.15401</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Snell &amp; Wilmer</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 400 East Van Buren Street		Amount of Each Disbursement this Period 2500.00
City Phoenix	State AZ	
Zip Code 85004	Purpose of Disbursement Legal Fees	<b>Transaction ID : SB17.15330</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5505.03
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sony Style</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address Online		Amount of Each Disbursement this Period 215.49
City Online	State AZ Zip Code 85018	
Purpose of Disbursement Supplies	Category/Type	<b>Transaction ID : SB17.15332</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 2625 S Woodlands Vlg Blvd #100		Amount of Each Disbursement this Period 0.39
City Flagstaff	State AZ Zip Code 86001	
Purpose of Disbursement Supplies	Category/Type	<b>Transaction ID : SB17.15333</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 2625 S Woodlands Vlg Blvd #100		Amount of Each Disbursement this Period 57.63
City Flagstaff	State AZ Zip Code 86001	
Purpose of Disbursement Supplies	Category/Type	<b>Transaction ID : SB17.15334</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	273.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Zack Studstill</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 501 Arrowhead Drive		Amount of Each Disbursement this Period 563.88 <b>Transaction ID : SB17.15424</b>
City Montgomery	State AL	
Zip Code 36117	Purpose of Disbursement In-kind - Hotel Accomodations	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Property Conference Center</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 1251 W Gila Bend Hwy		Amount of Each Disbursement this Period 1079.60 <b>Transaction ID : SB17.15386</b>
City Casa Grande	State AZ	
Zip Code 85222	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Summit Consulting Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 3230 E Broadway Rd C260		Amount of Each Disbursement this Period 596.40 <b>Transaction ID : SB17.15403</b>
City Phoenix	State AZ	
Zip Code 85040	Purpose of Disbursement Fundraising Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2239.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Summit Consulting Group</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012		
Mailing Address 3230 E Broadway Rd C260			Amount of Each Disbursement this Period 1709.89		
City Phoenix	State AZ	Zip Code 85040	Transaction ID : SB17.15404		
Purpose of Disbursement Fundraising Fees		Category/ Type 003			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. The Summit Consulting Group</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012		
Mailing Address 3230 E Broadway Rd C260			Amount of Each Disbursement this Period 1439.80		
City Phoenix	State AZ	Zip Code 85040	Transaction ID : SB17.15402		
Purpose of Disbursement Fundraising Fees		Category/ Type 003			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012		
Mailing Address 77 W. Wacker Drive			Amount of Each Disbursement this Period 614.80		
City Chicago	State IL	Zip Code 60601	Transaction ID : SB17.15358		
Purpose of Disbursement Airfare		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3764.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 127		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 268.10
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Airfare	<b>Transaction ID : SB17.15359</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 387.60
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Airfare	<b>Transaction ID : SB17.15360</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. X-Tra Space Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 531 S Granite St.		Amount of Each Disbursement this Period 76.50
City Prescott	State AZ	
Zip Code 86303	Purpose of Disbursement Storage Unit Rental	<b>Transaction ID : SB17.15343</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	732.20
<b>TOTAL</b> This Period (last page this line number only).....	70614.68

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Hammond & Associates**

Nature of Debt (Purpose):  
Fundraising Services

Mailing Address P.O. Box 368

City State Zip Code  
Falls Church VA 22040

Outstanding Balance Beginning This Period

7500.00

Transaction ID : SD10.11368

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Integrated Web Strategy**

Nature of Debt (Purpose):  
Ad Purchase

Mailing Address 5330 N 12th St.

City State Zip Code  
Phoenix AZ 85012

Outstanding Balance Beginning This Period

110.00

Transaction ID : SD10.14600

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Integrated Web Strategy**

Nature of Debt (Purpose):  
Video Production

Mailing Address 5330 N 12th St.

City State Zip Code  
Phoenix AZ 85012

Outstanding Balance Beginning This Period

850.00

Transaction ID : SD10.14601

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

8460.00

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

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Integrated Web Strategy</b>		Nature of Debt (Purpose): Email Sends and Facebook Ads
Mailing Address 5330 N 12th St.		
City	State	Zip Code
Phoenix	AZ	85012

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.14602</b>	
<input type="text" value="4645.21"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4645.21"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Integrated Web Strategy</b>		Nature of Debt (Purpose): Video Production
Mailing Address 5330 N 12th St.		
City	State	Zip Code
Phoenix	AZ	85012

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.14603</b>	
<input type="text" value="1600.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1600.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ROBERT WADE ROBINSON II</b>		Nature of Debt (Purpose): Fundraising Meeting Expenses
Mailing Address 11039 E. HARRIS HAWK TRAIL		
City	State	Zip Code
SCOTTSDALE	AZ	85262

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.11499</b>	
<input type="text" value="212.07"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="212.07"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="6457.28"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 127 OF 127
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Summit Consulting Group</b>	Nature of Debt (Purpose): Fundraising Fees
Mailing Address 3230 E Broadway Rd C260	
City State Zip Code Phoenix AZ 85040	

Outstanding Balance Beginning This Period 1439.80	<b>Transaction ID : SD10.14563</b>	
Amount Incurred This Period 0.00	Payment This Period 1439.80	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Summit Consulting Group</b>	Nature of Debt (Purpose): Fundraising Fees
Mailing Address 3230 E Broadway Rd C260	
City State Zip Code Phoenix AZ 85040	

Outstanding Balance Beginning This Period 596.40	<b>Transaction ID : SD10.14562</b>	
Amount Incurred This Period 0.00	Payment This Period 596.40	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Summit Consulting Group</b>	Nature of Debt (Purpose): Fundraising Fees
Mailing Address 3230 E Broadway Rd C260	
City State Zip Code Phoenix AZ 85040	

Outstanding Balance Beginning This Period 1709.89	<b>Transaction ID : SD10.14560</b>	
Amount Incurred This Period 0.00	Payment This Period 1709.89	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	14917.28
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	14917.28