

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
Gallego For Arizona

ADDRESS (number and street) PO Box 1710
 Check if different than previously reported. (ACC) Phoenix AZ 85001

2. **FEC IDENTIFICATION NUMBER** ▼ C C00558627 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
AZ 07

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 11 / 04 / 2014 in the State of AZ
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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 Rebecca Winger
Signature of Treasurer Rebecca Winger [Electronically Filed] Date 02 / 10 / 2015

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Gallego For Arizona

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))....	51928.80	815202.78
(b) Total Contribution Refunds (from Line 20(d))	0.00	6849.99
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	51928.80	808352.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20787.49	672411.74
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20787.49	672411.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	59596.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	47500.00	

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

Gallego For Arizona

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11680.00	445683.10
(ii) Unitemized.....	3215.47	99890.87
(iii) TOTAL of contributions from individuals ▶	14895.47	545573.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	37033.33	264328.81
(d) The Candidate.....	0.00	5300.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	51928.80	815202.78
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	51928.80	815202.91

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20787.49	672411.74
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	5850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	999.99
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6849.99
21. OTHER DISBURSEMENTS	61000.00	78250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	81787.49	757511.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	89455.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	51928.80
25. SUBTOTAL (add Line 23 and Line 24).....	141383.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	81787.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	59596.32

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Report is amended in response to Request for Additional Information dated 1/6/2015. Committee acknowledges increase in disbursements from original filing to first amendment, which was due to an administrative error. Committee has taken steps to more effectively review and reconcile FEC reports prior to submission in the future. This amendment fixes an error reported on the amendments with the debt owed to Lisa Fernandez, and also provides clarification on the purpose for several of the disbursements. The amendment also corrects the line number for some disbursements.

Form/Schedule:
Transaction ID:

**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 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Barry Aarons

Mailing Address 2323 N Central Ave
Unit 304

City Phoenix State AZ Zip Code 85004-1355

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

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : VNJ3FD7YZC7

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Carmen O Arias

Mailing Address 2047 W Roeser Rd

City Phoenix State AZ Zip Code 85041-3737

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD95DG8

Amount of Each Receipt this Period
15.00

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

Mailing Address 15825 N 9th Ave

City Phoenix State AZ Zip Code 85023-4439

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

Name of Employer Ward, Keenan & Barrett Occupation lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : VNJ3FD8YX10

Amount of Each Receipt this Period
50.00

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

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

165.00

**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 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Anne Bartley

Mailing Address 3580 Clay St

City San Francisco State CA Zip Code 94118-1839

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

Name of Employer self-employed Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FDB5397

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Judith Bernas

Mailing Address 1524 W Tuckey Ln

City Phoenix State AZ Zip Code 85015-1450

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

Name of Employer University of Arizona Occupation Associate Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : VNJ3FDANPM7

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Anthony Cani

Mailing Address 600 N 4th St
Apt 363

City Phoenix State AZ Zip Code 85004-4488

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

Name of Employer Inspire Arizona Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD95C58

Amount of Each Receipt this Period
75.00

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

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

1325.00

**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 8 OF 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Deborah Carstens

Mailing Address 7101 N Desert Fairways Dr

City Paradise Valley State AZ Zip Code 85253-3338

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : VNJ3FD9E4T9

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mario Diaz

Mailing Address 9301 E Adobe Dr

City Scottsdale State AZ Zip Code 85255-5018

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

Name of Employer Mario E Diaz & Associates Occupation GOVERNMENT RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : VNJ3FD867B0

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Barry Dill

Mailing Address 300 W Clarendon Ave Ste 460

City Phoenix State AZ Zip Code 85013-3475

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

Name of Employer FirstStrategic, Communications & Publi Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : VNJ3FD86794

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 9 OF 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Grady Gammage

Mailing Address 12234 S Runing Bear Cout

City Phoenix State AZ Zip Code 85044

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

Name of Employer Gammage & Burham Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : VNJ3FD86745

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Derrick Hall

Mailing Address 6601 E Meadowlark Ln

City Paradise Valley State AZ Zip Code 85253-3620

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

Name of Employer ARIZONA DIAMONDBACKS Occupation PRESIDENT/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : VNJ3FD94633

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2363 S Eileen PI

City Chandler State AZ Zip Code 85286-8526

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

Name of Employer HCI Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : VNJ3FD8C5G5

Amount of Each Receipt this Period
250.00

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 10 OF 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Leo Hernandez

Mailing Address 1368 E Mitchell Dr

City State Zip Code
Phoenix AZ 85014-5159

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

Name of Employer Occupation
R.O.I. Properties, LLC realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD9D988

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Bryan Howard

Mailing Address 3147 E Rose Ln

City State Zip Code
Phoenix AZ 85016-2368

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

Name of Employer Occupation
Planned Parenthood Arizona Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 11 / 2014

Transaction ID : VNJ3FD90725

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mickey Ibarra

Mailing Address 1140 Connecticut Ave NW
Ste 1100

City State Zip Code
Washington DC 20036-4007

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

Name of Employer Occupation
Ibarra Strategy group President & Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : VNJ3FD7M5J9

Amount of Each Receipt this Period
1000.00

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

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

1140.00

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

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

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

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Gary Kaasa

Mailing Address 1612 E Calle Santa Cruz

City State Zip Code
Phoenix AZ 85022-5023

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Campaign Communications Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNJ3FD9E208

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
John P Kaites

Mailing Address 917 W McDowell Rd

City State Zip Code
Phoenix AZ 85007-1729

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Public Policy Partners ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNJ3FD9E224

Amount of Each Receipt this Period

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

Mailing Address 3300 E Stella Ln

City State Zip Code
Paradise Valley AZ 85253-3831

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Village Voice Media Executive Editor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNJ3FD9CT05

Amount of Each Receipt this Period

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

TOTAL 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 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Mike Leal

Mailing Address 2019 W Northview Ave

City Phoenix State AZ Zip Code 85021-7860

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

Name of Employer Navidad, Leal, & Silva Plc Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : VNJ3FD9V2P5

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Courtney LeVinus

Mailing Address 7216 Encanto Dr SE

City Phoenix State AZ Zip Code 85007

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

Name of Employer Capital Consulting Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : VNJ3FD867T8

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Deborah Matwijkow

Mailing Address 307 W Lamar Rd

City Phoenix State AZ Zip Code 85013-1159

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

Name of Employer Self-Employed Occupation Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : VNJ3FD866Y1

Amount of Each Receipt this Period
200.00

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 13 OF 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Deborah Matwijkow

Mailing Address 307 W Lamar Rd

City State Zip Code
Phoenix AZ 85013-1159

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

Name of Employer Occupation
Self-Employed Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : VNJ3FD9E2B5

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Patrick Mitchell

Mailing Address 444 N Capitol St NW
Ste 840

City State Zip Code
Washington DC 20001-1508

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : VNJ3FD7YZN8

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Patrick Neely

Mailing Address 20944 N 70th Dr

City State Zip Code
Glendale AZ 85308-9400

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

Name of Employer Occupation
Retired Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : VNJ3FD8Y0G6

Amount of Each Receipt this Period
50.00

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

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

1300.00

**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 14 OF 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Ron Ober

Mailing Address 10313 North 50th Street

City State Zip Code
Paradise Valley AZ 85253-1061

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

Name of Employer Occupation
Policy Development Group Inc. PUBLIC AFFAIRS CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : VNJ3FD867C8

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jacqueline Sandoval

Mailing Address 5445 N Ormondo Way

City State Zip Code
Litchfield Park AZ 85340-4158

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

Name of Employer Occupation
Arizona House of Representatives Executive Assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VNJ3FD9KBV1

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mark Steinmetz

Mailing Address 8143 E Quarterhorse Trl

City State Zip Code
Scottsdale AZ 85258-1308

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

Name of Employer Occupation
Nature's Medicines President/General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : VNJ3FD94ZK0

Amount of Each Receipt this Period
250.00

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 15 OF 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
Anne Thorne

Mailing Address 915 W Frier Dr

City Phoenix State AZ Zip Code 85021-7140

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

Name of Employer Not Employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD9E1Z2

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jay Thorne

Mailing Address 338 E Orange Dr

City Phoenix State AZ Zip Code 85012-1464

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

Name of Employer Jay Thorne Inc. Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD9E1Y4

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Corey Woods

Mailing Address 5005 S Mill Ave

City Tempe State AZ Zip Code 85282-6807

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

Name of Employer City of Tempe Occupation Councilmember

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : VNJ3FD87BW2

Amount of Each Receipt this Period
100.00

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

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

600.00

11680.00

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

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

FOR LINE NUMBER: PAGE 16 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
AFLAC PAC

Mailing Address **Worldwide Headquarters**
1932 WYNNNTON ROAD

City **Columbus** State **GA** Zip Code **31999-0001**

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VNJ3FDBZBA4

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF TEACHERS STAFF UNION COMMITTEE ON POLITICAL EDUCATION

Mailing Address **555 New Jersey Ave NW**

City **Washington** State **DC** Zip Code **20001-2029**

FEC ID number of contributing federal political committee. **C C00157545**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : VNJ3FD866F3

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address **PO Box 961039**

City **Fort Worth** State **TX** Zip Code **76161-0039**

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : VNJ3FD9CSN8

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)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 OF 47
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

A. Mailing Address 101 Constitution Ave NW
10TH FLOOR WEST
City Washington State DC Zip Code 20001-2133

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	1	4

Transaction ID : VNJ3FD94894

FEC ID number of contributing federal political committee. **C** C00001016

Amount of Each Receipt this Period
 _____,_____,_____ 5000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 _____,_____,_____ 5000.00

B. Full Name (Last, First, Middle Initial)
CENTURYLINK INC. EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1099 New York Ave NW
Ste 250
City Washington State DC Zip Code 20001-4836

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	1	4

Transaction ID : VNJ3FD8FSW5

FEC ID number of contributing federal political committee. **C** C00419911

Amount of Each Receipt this Period
 _____,_____,_____ 1000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 _____,_____,_____ 1000.00

C. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address 1701 John F Kennedy Blvd
Fl 49
City Philadelphia State PA Zip Code 19103-2855

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	1	4

Transaction ID : VNJ3FD93QT2

FEC ID number of contributing federal political committee. **C** C00248716

Amount of Each Receipt this Period
 _____,_____,_____ 1000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 _____,_____,_____ 1000.00

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

_____ 7000.00

TOTAL 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 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Mailing Address 322 4th St NE

City Washington State DC Zip Code 20002-5824

FEC ID number of contributing federal political committee. **C C00387555**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
66.66

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : VNJ3FDBTMD8

Amount of Each Receipt this Period
33.33

* In-Kind: Internet Appeal

B. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F St NW Ste 300

City Washington State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD9CV73

Amount of Each Receipt this Period
2500.00

C. 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 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : VNJ3FD8FTE7

Amount of Each Receipt this Period
5000.00

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

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

7533.33

**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 47
	<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)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial)
JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)

Mailing Address 50 E St SE
Ste 1

City Washington State DC Zip Code 20003-2620

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : VNJ3FDBZBR4

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
NANCY PELOSI FOR CONGRESS

Mailing Address 700 13th St NW
Ste 600

City Washington State DC Zip Code 20005-5998

FEC ID number of contributing federal political committee. **C** C00213512

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : VNJ3FD947W1

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD9CVM6

Amount of Each Receipt this Period
5000.00

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

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

9500.00

**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 20 OF 47
	<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)
Gallego For Arizona

A. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Full Name (Last, First, Middle Initial)
Mailing Address 100 Daingerfield Rd

City Alexandria State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : VNJ3FDBZB54

Amount of Each Receipt this Period
 2500.00

B. SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Full Name (Last, First, Middle Initial)
Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036-1222

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : VNJ3FD8T6Q2

Amount of Each Receipt this Period
 5000.00

C. SHORE PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3157

City Long Branch State NJ Zip Code 07740-3157

FEC ID number of contributing federal political committee. **C** C00410308

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : VNJ3FD9CT88

Amount of Each Receipt this Period
 2500.00

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

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

10000.00

37033.33

**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 21 OF 47			
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 350 W Washington St Ste 308		Amount of Each Disbursement this Period 2.11
City Tempe State AZ Zip Code 85281-1496	Purpose of Disbursement Merchant Fees 003 Category/Type	
Candidate Name ACTBLUE	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	Transaction ID : VNH479WZCF1
State: District:		

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 350 W Washington St Ste 308		Amount of Each Disbursement this Period 8.15
City Tempe State AZ Zip Code 85281-1496	Purpose of Disbursement Merchant Fees 003 Category/Type	
Candidate Name ACTBLUE	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	Transaction ID : VNH479WZCG9
State: District:		

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 350 W Washington St Ste 308		Amount of Each Disbursement this Period 41.14
City Tempe State AZ Zip Code 85281-1496	Purpose of Disbursement Merchant Fees 003 Category/Type	
Candidate Name ACTBLUE	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	Transaction ID : VNH479WZCH7
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	51.40
TOTAL 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 22 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Andy Barr		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 1330 13th St NW Apt 3		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20005-4419	Purpose of Disbursement Communications Consulting Services	Transaction ID : VNH479X0AG4
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Communications
State: District:		

Full Name (Last, First, Middle Initial) B. BJC Public Relations		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 650 N 6th Ave		Amount of Each Disbursement this Period 250.00
City Phoenix	State AZ	
Zip Code 85003-1531	Purpose of Disbursement Office Rent	Transaction ID : VNH479WMDR6
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mary Chlan		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 3848 N 3rd Ave Unit 1063		Amount of Each Disbursement this Period 2000.00
City Phoenix	State AZ	
Zip Code 85013-3458	Purpose of Disbursement Compliance Consulting Services	Transaction ID : VNH479WW123
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4750.00
TOTAL 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 23 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 4502 E Oak St		Amount of Each Disbursement this Period 61.60
City Phoenix	State AZ	
Zip Code 85008-2411	Purpose of Disbursement Office Supplies	Transaction ID : VNH479WB425
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 322 4th St NE		Amount of Each Disbursement this Period 33.33
City Washington	State DC	
Zip Code 20002-5824	Purpose of Disbursement Internet Appeal	Transaction ID : VNJ3FDBTMD8I
Candidate Name COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 151.95
City Menlo Park	State CA	
Zip Code 94025-1456	Purpose of Disbursement Advertising	Transaction ID : VNH479W4RM4
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Facebook
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	246.88
TOTAL 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 24 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 25.65
City Menlo Park	State CA	Zip Code 94025-1456
Purpose of Disbursement Advertising	Category/Type 004	
Candidate Name		Transaction ID : VNH479WCSW1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Facebook
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 65.55
City Menlo Park	State CA	Zip Code 94025-1456
Purpose of Disbursement Advertising	Category/Type 004	
Candidate Name		Transaction ID : VNH479WCSY6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Facebook
State: District:		

Full Name (Last, First, Middle Initial) c. Lisa Fernandez		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 5303 N 7th St Unit 216		Amount of Each Disbursement this Period 4000.00
City Phoenix	State AZ	Zip Code 85014-2899
Purpose of Disbursement Finance Consulting Services	Category/Type 001	
Candidate Name		Transaction ID : VNH479WQ2J1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4091.20
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VNH479WQ2J1

Primary Debt Repayment

Form/Schedule:

Transaction ID:

**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 26 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Fry's Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 4505 E Thomas Rd		Amount of Each Disbursement this Period 750.00 Transaction ID : VNH479W4RK6
City Phoenix	State AZ Zip Code 85018-7614	
Purpose of Disbursement Gas Cards	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fry's Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 4505 E Thomas Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : VNH479W9596
City Phoenix	State AZ Zip Code 85018-7614	
Purpose of Disbursement Gas Cards	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Fry's Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 4505 E Thomas Rd		Amount of Each Disbursement this Period 375.00 Transaction ID : VNH479WB409
City Phoenix	State AZ Zip Code 85018-7614	
Purpose of Disbursement Gas Cards	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1375.00
TOTAL 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 27 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Fry's Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 4505 E Thomas Rd		Amount of Each Disbursement this Period 167.06
City Phoenix	State AZ	
Zip Code 85018-7614	Purpose of Disbursement Food for Fundraiser	Transaction ID : VNH479WB3V9
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fry's Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 4505 E Thomas Rd		Amount of Each Disbursement this Period 1300.00
City Phoenix	State AZ	
Zip Code 85018-7614	Purpose of Disbursement Gas Cards	Transaction ID : VNH479WFR34
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gloria Galeno		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 1414 E Romley Ave		Amount of Each Disbursement this Period 500.00
City Phoenix	State AZ	
Zip Code 85040-2366	Purpose of Disbursement Finance Consulting Services	Transaction ID : VNH479W9570
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Finance
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1967.06
TOTAL 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 28 OF 47			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Gloria Galeno		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 1414 E Romley Ave		Amount of Each Disbursement this Period 1500.00
City Phoenix	State AZ	Zip Code 85040-2366
Purpose of Disbursement Finance Consulting Services	Category/Type 001	
Candidate Name	Transaction ID : VNH479X0AP1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Finance
State: District:		

Full Name (Last, First, Middle Initial) B. Ruben Gallego		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 2305 W Mineral Rd		Amount of Each Disbursement this Period 865.44
City Phoenix	State AZ	Zip Code 85041-9557
Purpose of Disbursement Reimbursement	Category/Type 002	
Candidate Name Ruben Gallego	Transaction ID : VNH479WRV58	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 07		

Full Name (Last, First, Middle Initial) c. Radisson Hotel, Reagan National Airport		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 2020 Jefferson Davis Hwy		Amount of Each Disbursement this Period 783.88
City Arlington	State VA	Zip Code 22202-3601
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Transaction ID : VNH479YDYJ5	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2365.44
TOTAL 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 29 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Michael R Hall		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 916 E Taylor St		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH479X0AM5
City Phoenix	State AZ	
Zip Code 85006-3358	Purpose of Disbursement Campaign Management Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Harland Clarke		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 4303 E Cotton Center Blvd		Amount of Each Disbursement this Period 141.35 Transaction ID : VNH479WCSX8
City Phoenix	State AZ	
Zip Code 85040-8853	Purpose of Disbursement Checks	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Printing of Bank account checks

Full Name (Last, First, Middle Initial) c. J and R Graphics and Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 638 W Indian School Rd		Amount of Each Disbursement this Period 314.07 Transaction ID : VNH479XVHNO
City Phoenix	State AZ	
Zip Code 85013-3136	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Water Bottles

SUBTOTAL of Disbursements This Page (optional).....	955.42
TOTAL 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 30 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. J and R Graphics and Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 638 W Indian School Rd		Amount of Each Disbursement this Period 94.76
City Phoenix	State AZ Zip Code 85013-3136	
Purpose of Disbursement Printing	Category/Type 003	Transaction ID : VNH479WGCA3
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Remit Envelopes	
State: District:		

Full Name (Last, First, Middle Initial) B. Jimmy Johns		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 3110 N Central Ave		Amount of Each Disbursement this Period 286.40
City Phoenix	State AZ Zip Code 85012-2695	
Purpose of Disbursement Food for Volunteers	Category/Type 001	Transaction ID : VNH479WRV24
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Remit Envelopes	
State: District:		

Full Name (Last, First, Middle Initial) c. Josephine's		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 503 N Humphreys St		Amount of Each Disbursement this Period 269.97
City Flagstaff	State AZ Zip Code 86001-3055	
Purpose of Disbursement Dinner Meeting	Category/Type 001	Transaction ID : VNH479X0AT1
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Remit Envelopes	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	651.13
TOTAL 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 31 OF 47			
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. PALERMO'S PIZZA		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 6756 W Camelback Rd		Amount of Each Disbursement this Period 280.23 Transaction ID : VNH479W95B1
City Glendale	State AZ	
Zip Code 85303-6307	Purpose of Disbursement Food for Volunteers	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PALERMO'S PIZZA		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 6756 W Camelback Rd		Amount of Each Disbursement this Period 28.14 Transaction ID : VNH479W95C9
City Glendale	State AZ	
Zip Code 85303-6307	Purpose of Disbursement Food for Volunteers	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Safeway6022524538		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 340 E McDowell Rd		Amount of Each Disbursement this Period 12.08 Transaction ID : VNH479W4RH0
City Phoenix	State AZ	
Zip Code 85004-1533	Purpose of Disbursement Food for Volunteers	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	320.45
TOTAL 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 32 OF 47	
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Safeway6022524538		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 340 E McDowell Rd		Amount of Each Disbursement this Period 37.84 Transaction ID : VNH479WRV32
City Phoenix State AZ Zip Code 85004-1533	Purpose of Disbursement Food for Fundraiser Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Safeway6022524538		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 340 E McDowell Rd		Amount of Each Disbursement this Period 12.08 Transaction ID : VNH479WRV40
City Phoenix State AZ Zip Code 85004-1533	Purpose of Disbursement Water for Volunteers Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Sage Payment Solutions		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 1750 Old Meadow Rd Ste 300		Amount of Each Disbursement this Period 624.74 Transaction ID : VNH479W95D7
City McLean State VA Zip Code 22102-4304	Purpose of Disbursement Merchant Fees Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	674.66
TOTAL 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 33 OF 47			
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 106 W Osborn Rd		Amount of Each Disbursement this Period 28.14
City Phoenix	State AZ	
Zip Code 85013-3909	Purpose of Disbursement Office Supplies	Transaction ID : VNH479W4RF4
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 106 W Osborn Rd		Amount of Each Disbursement this Period 91.50
City Phoenix	State AZ	
Zip Code 85013-3909	Purpose of Disbursement Office Supplies	Transaction ID : VNH479W4RJ8
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 106 W Osborn Rd		Amount of Each Disbursement this Period 91.50
City Phoenix	State AZ	
Zip Code 85013-3909	Purpose of Disbursement Office Supplies	Transaction ID : VNH479W95F3
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	211.14
TOTAL 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 34 OF 47			
	<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)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Antonio Valdovinos		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 916 E Taylor St Back House		Amount of Each Disbursement this Period 1812.34
City Phoenix State AZ Zip Code 85006-3358	Purpose of Disbursement Payroll	001 Category/ Type
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : VNH479WRV16

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 3002 N Central Ave		Amount of Each Disbursement this Period 3.00
City Phoenix State AZ Zip Code 85012-2769	Purpose of Disbursement Bank Fees	001 Category/ Type
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : VNH479WFR50

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 3002 N Central Ave		Amount of Each Disbursement this Period 878.91
City Phoenix State AZ Zip Code 85012-2769	Purpose of Disbursement Payroll Taxes	001 Category/ Type
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : VNH479WRV08

SUBTOTAL of Disbursements This Page (optional).....	2694.25
TOTAL This Period (last page this line number only).....	20354.03

**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 35 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. AIMEE BELGARD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 35		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH479XYEC6
City Willingboro	State NJ	
Zip Code 08046-0035	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name AIMEE BELGARD	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 03		

Full Name (Last, First, Middle Initial) B. APPEL FOR IOWA, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 702		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH479XYEB8
City Des Moines	State IA	
Zip Code 50303-0702	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name STACI APPEL	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 03		

Full Name (Last, First, Middle Initial) c. Arizona Demcoratic Party		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 2910 N Central Ave		Amount of Each Disbursement this Period 5000.00 Transaction ID : VNH479XYEA1
City Phoenix	State AZ	
Zip Code 85012-2704	Purpose of Disbursement Contribution	Category/ Type 012
Candidate Name Arizona Demcoratic Party	Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9000.00
TOTAL 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 36 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. BERA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 582496		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYE43
City Elk Grove State CA Zip Code 95758-0042	Purpose of Disbursement Donation 012 Category/Type	
Candidate Name AMERISH BERA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. CAIN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 1523		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH479XYED4
City Bangor State ME Zip Code 04402-1523	Purpose of Disbursement Donation 012 Category/Type	
Candidate Name EMILY ANN CAIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. CAROL SHEA-PORTER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 453		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYE19
City Rochester State NH Zip Code 03866-0453	Purpose of Disbursement Donation 012 Category/Type	
Candidate Name CAROL SHEA-PORTER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL 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 37 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 18000.00 Transaction ID : VNH479XP7F1
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Unlimited Transfer Category/Type 011	
Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DR. RAUL RUIZ FOR CONGRESS 2012 COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 73373 Country Club Dr Apt 1904		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYE77
City Palm Desert State CA Zip Code 92260-8641	Purpose of Disbursement Donation Category/Type 012	
Candidate Name RAUL DR RUIZ	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 36		

Full Name (Last, First, Middle Initial) c. Enyart for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 308		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479WCD96
City Belleville State IL Zip Code 62222-0309	Purpose of Disbursement Contribution General 2014 Category/Type 012	
Candidate Name Enyart for Congress	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20000.00
TOTAL 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 38 OF 47
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. Friends for Flores		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 420 N Nellis Blvd Ste A3-87		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479WCAM6
City Las Vegas State NV Zip Code 89110-5364	Purpose of Disbursement Contribution 012 Category/ Type	
Candidate Name Lucy Flores	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FRIENDS OF CHERI BUSTOS		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 77		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479WCDB2
City East Moline State IL Zip Code 61244-0077	Purpose of Disbursement Contribution General 2014 012 Category/ Type	
Candidate Name CHERI BUSTOS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 17		

Full Name (Last, First, Middle Initial) C. FRIENDS OF DAN MAFFEI		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 230		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYE51
City Syracuse State NY Zip Code 13201-0230	Purpose of Disbursement Donation 012 Category/ Type	
Candidate Name DANIEL BENJAMIN MR. MAFFEI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 24		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL 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 39 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. FRIENDS OF ELIZABETH ESTY		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 61		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYDX8
City Cheshire State CT Zip Code 06410-0061	Purpose of Disbursement Donation 012 Category/ Type	
Candidate Name ELIZABETH ESTY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CT District: 05		

Full Name (Last, First, Middle Initial) B. FRIENDS OF JOHN BARROW		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 8166		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYDS6
City Savannah State GA Zip Code 31412-8166	Purpose of Disbursement Donation 012 Category/ Type	
Candidate Name JOHN J. BARROW		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 12		

Full Name (Last, First, Middle Initial) C. FRIENDS OF LOIS CAPPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 23940		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYDV2
City Santa Barbara State CA Zip Code 93121-3940	Purpose of Disbursement Donation 012 Category/ Type	
Candidate Name LOIS CAPPS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 24		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL 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 40 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. FRIENDS OF PATRICK MURPHY		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 4521 Pga Blvd # 412		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYE02
City State Zip Code Palm Beach Gardens FL 33418-3997	Purpose of Disbursement Donation	
Candidate Name PATRICK MURPHY	Category/ Type 012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 18		

Full Name (Last, First, Middle Initial) B. FRIENDS OF PETE GALLEGO		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 1781		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479WCCW5
City State Zip Code San Antonio TX 78296-1781	Purpose of Disbursement Contribution General 2014	
Candidate Name PETE GALLEGO	Category/ Type 012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 23		

Full Name (Last, First, Middle Initial) C. GRAHAM FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 310		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH479XYEF0
City State Zip Code Tallahassee FL 32302-0310	Purpose of Disbursement Donation	
Candidate Name GWEN GRAHAM	Category/ Type 012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 02		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL 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 41 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. JOE GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 832225		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479WCCT9
City Miami State FL Zip Code 33283-2225	Purpose of Disbursement Contribution General 2014 Category/Type 012	
Candidate Name JOSE ANTONIO GARCIA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 25		

Full Name (Last, First, Middle Initial) B. JULIA BROWNLEY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 728 W Edna Pl		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479WCDH9
City Covina State CA Zip Code 91722-3222	Purpose of Disbursement Contribution General 2014 Category/Type 012	
Candidate Name JULIA BROWNLEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 26		

Full Name (Last, First, Middle Initial) C. KEEP NICK RAHALL IN CONGRESS COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 64		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYE69
City Beckley State WV Zip Code 25802-0064	Purpose of Disbursement Donation Category/Type 012	
Candidate Name NICK JOE II RAHALL	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV District: 03		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL 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 42 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. KIRKPATRICK FOR ARIZONA		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 12011		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH479XYE35
City Casa Grande State AZ Zip Code 85130-0549	Purpose of Disbursement Donation 012 Category/ Type	
Candidate Name ANN KIRKPATRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 01		

Full Name (Last, First, Middle Initial) B. KUSTER FOR CONGRESS, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 1498		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYDY6
City Concord State NH Zip Code 03302-1498	Purpose of Disbursement Donation 012 Category/ Type	
Candidate Name ANN MCLANE KUSTER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

Full Name (Last, First, Middle Initial) C. KYRSTEN SINEMA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 25879		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYE27
City Tempe State AZ Zip Code 85285-5879	Purpose of Disbursement Donation 012 Category/ Type	
Candidate Name KYRSTEN SINEMA		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 09		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL 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 43 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. KYRSTEN SINEMA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 25879		Amount of Each Disbursement this Period 1000.00
City Tempe State AZ Zip Code 85285-5879	Purpose of Disbursement Donation	Transaction ID : VNH479XYE85
Candidate Name KYRSTEN SINEMA	Category/Type 012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 09		

Full Name (Last, First, Middle Initial) B. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 40138 Sawmill Rd PO BOX 252		Amount of Each Disbursement this Period 1000.00
City Emily State MN Zip Code 56447-2031	Purpose of Disbursement Contribution General 2014	Transaction ID : VNH479WCD15
Candidate Name RICHARD MICHAEL NOLAN	Category/Type 012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 08		

Full Name (Last, First, Middle Initial) C. PATRICK HENRY HAYS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 94886		Amount of Each Disbursement this Period 2000.00
City North Little Rock State AR Zip Code 72190-4886	Purpose of Disbursement Donation	Transaction ID : VNH479XYEN7
Candidate Name PATRICK HENRY HAYS	Category/Type 012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AR District: 02		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL 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 44 OF 47
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. RECCHIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 172 Gravesend Neck Rd		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH479XYE93
City Brooklyn	State NY	
Zip Code 11223-4707	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name DOMENIC M JR RECCHIA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 13	

Full Name (Last, First, Middle Initial) B. RON BARBER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 57715		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH479XXBM5
City Tucson	State AZ	
Zip Code 85732-7715	Purpose of Disbursement Contribution	Category/ Type 012
Candidate Name RONALD BARBER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AZ District: 08	

Full Name (Last, First, Middle Initial) C. SCOTT PETERS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 330 Encinitas Blvd Ste 101		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479WCCY1
City Encinitas	State CA	
Zip Code 92024-8705	Purpose of Disbursement Contribution General 2014	Category/ Type 012
Candidate Name SCOTT PETERS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 52	

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL 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 45 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gallego For Arizona

Full Name (Last, First, Middle Initial) A. SEAN PATRICK MALONEY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 283 E Hill Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYDZ4
City Jeffersonville State NY Zip Code 12748-6708	Purpose of Disbursement Donation <input type="checkbox"/> 012 <input type="checkbox"/> 013 <input type="checkbox"/> 014 <input type="checkbox"/> 015 <input type="checkbox"/> 016 <input type="checkbox"/> 017 <input type="checkbox"/> 018 <input type="checkbox"/> 019 <input type="checkbox"/> 020 <input type="checkbox"/> 021 <input type="checkbox"/> 022 <input type="checkbox"/> 023 <input type="checkbox"/> 024 <input type="checkbox"/> 025 <input type="checkbox"/> 026 <input type="checkbox"/> 027 <input type="checkbox"/> 028 <input type="checkbox"/> 029 <input type="checkbox"/> 030 <input type="checkbox"/> 031 <input type="checkbox"/> 032 <input type="checkbox"/> 033 <input type="checkbox"/> 034 <input type="checkbox"/> 035 <input type="checkbox"/> 036 <input type="checkbox"/> 037 <input type="checkbox"/> 038 <input type="checkbox"/> 039 <input type="checkbox"/> 040 <input type="checkbox"/> 041 <input type="checkbox"/> 042 <input type="checkbox"/> 043 <input type="checkbox"/> 044 <input type="checkbox"/> 045 <input type="checkbox"/> 046 <input type="checkbox"/> 047 <input type="checkbox"/> 048 <input type="checkbox"/> 049 <input type="checkbox"/> 050 <input type="checkbox"/> 051 <input type="checkbox"/> 052 <input type="checkbox"/> 053 <input type="checkbox"/> 054 <input type="checkbox"/> 055 <input type="checkbox"/> 056 <input type="checkbox"/> 057 <input type="checkbox"/> 058 <input type="checkbox"/> 059 <input type="checkbox"/> 060 <input type="checkbox"/> 061 <input type="checkbox"/> 062 <input type="checkbox"/> 063 <input type="checkbox"/> 064 <input type="checkbox"/> 065 <input type="checkbox"/> 066 <input type="checkbox"/> 067 <input type="checkbox"/> 068 <input type="checkbox"/> 069 <input type="checkbox"/> 070 <input type="checkbox"/> 071 <input type="checkbox"/> 072 <input type="checkbox"/> 073 <input type="checkbox"/> 074 <input type="checkbox"/> 075 <input type="checkbox"/> 076 <input type="checkbox"/> 077 <input type="checkbox"/> 078 <input type="checkbox"/> 079 <input type="checkbox"/> 080 <input type="checkbox"/> 081 <input type="checkbox"/> 082 <input type="checkbox"/> 083 <input type="checkbox"/> 084 <input type="checkbox"/> 085 <input type="checkbox"/> 086 <input type="checkbox"/> 087 <input type="checkbox"/> 088 <input type="checkbox"/> 089 <input type="checkbox"/> 090 <input type="checkbox"/> 091 <input type="checkbox"/> 092 <input type="checkbox"/> 093 <input type="checkbox"/> 094 <input type="checkbox"/> 095 <input type="checkbox"/> 096 <input type="checkbox"/> 097 <input type="checkbox"/> 098 <input type="checkbox"/> 099 <input type="checkbox"/> 100	
Candidate Name SEAN PATRICK MALONEY		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 18		

Full Name (Last, First, Middle Initial) B. TIM BISHOP FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 437		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH479XYDT4
City Farmingville State NY Zip Code 11738-0437	Purpose of Disbursement Contribution <input type="checkbox"/> 012 <input type="checkbox"/> 013 <input type="checkbox"/> 014 <input type="checkbox"/> 015 <input type="checkbox"/> 016 <input type="checkbox"/> 017 <input type="checkbox"/> 018 <input type="checkbox"/> 019 <input type="checkbox"/> 020 <input type="checkbox"/> 021 <input type="checkbox"/> 022 <input type="checkbox"/> 023 <input type="checkbox"/> 024 <input type="checkbox"/> 025 <input type="checkbox"/> 026 <input type="checkbox"/> 027 <input type="checkbox"/> 028 <input type="checkbox"/> 029 <input type="checkbox"/> 030 <input type="checkbox"/> 031 <input type="checkbox"/> 032 <input type="checkbox"/> 033 <input type="checkbox"/> 034 <input type="checkbox"/> 035 <input type="checkbox"/> 036 <input type="checkbox"/> 037 <input type="checkbox"/> 038 <input type="checkbox"/> 039 <input type="checkbox"/> 040 <input type="checkbox"/> 041 <input type="checkbox"/> 042 <input type="checkbox"/> 043 <input type="checkbox"/> 044 <input type="checkbox"/> 045 <input type="checkbox"/> 046 <input type="checkbox"/> 047 <input type="checkbox"/> 048 <input type="checkbox"/> 049 <input type="checkbox"/> 050 <input type="checkbox"/> 051 <input type="checkbox"/> 052 <input type="checkbox"/> 053 <input type="checkbox"/> 054 <input type="checkbox"/> 055 <input type="checkbox"/> 056 <input type="checkbox"/> 057 <input type="checkbox"/> 058 <input type="checkbox"/> 059 <input type="checkbox"/> 060 <input type="checkbox"/> 061 <input type="checkbox"/> 062 <input type="checkbox"/> 063 <input type="checkbox"/> 064 <input type="checkbox"/> 065 <input type="checkbox"/> 066 <input type="checkbox"/> 067 <input type="checkbox"/> 068 <input type="checkbox"/> 069 <input type="checkbox"/> 070 <input type="checkbox"/> 071 <input type="checkbox"/> 072 <input type="checkbox"/> 073 <input type="checkbox"/> 074 <input type="checkbox"/> 075 <input type="checkbox"/> 076 <input type="checkbox"/> 077 <input type="checkbox"/> 078 <input type="checkbox"/> 079 <input type="checkbox"/> 080 <input type="checkbox"/> 081 <input type="checkbox"/> 082 <input type="checkbox"/> 083 <input type="checkbox"/> 084 <input type="checkbox"/> 085 <input type="checkbox"/> 086 <input type="checkbox"/> 087 <input type="checkbox"/> 088 <input type="checkbox"/> 089 <input type="checkbox"/> 090 <input type="checkbox"/> 091 <input type="checkbox"/> 092 <input type="checkbox"/> 093 <input type="checkbox"/> 094 <input type="checkbox"/> 095 <input type="checkbox"/> 096 <input type="checkbox"/> 097 <input type="checkbox"/> 098 <input type="checkbox"/> 099 <input type="checkbox"/> 100	
Candidate Name TIMOTHY BISHOP		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	<input type="checkbox"/> 012 <input type="checkbox"/> 013 <input type="checkbox"/> 014 <input type="checkbox"/> 015 <input type="checkbox"/> 016 <input type="checkbox"/> 017 <input type="checkbox"/> 018 <input type="checkbox"/> 019 <input type="checkbox"/> 020 <input type="checkbox"/> 021 <input type="checkbox"/> 022 <input type="checkbox"/> 023 <input type="checkbox"/> 024 <input type="checkbox"/> 025 <input type="checkbox"/> 026 <input type="checkbox"/> 027 <input type="checkbox"/> 028 <input type="checkbox"/> 029 <input type="checkbox"/> 030 <input type="checkbox"/> 031 <input type="checkbox"/> 032 <input type="checkbox"/> 033 <input type="checkbox"/> 034 <input type="checkbox"/> 035 <input type="checkbox"/> 036 <input type="checkbox"/> 037 <input type="checkbox"/> 038 <input type="checkbox"/> 039 <input type="checkbox"/> 040 <input type="checkbox"/> 041 <input type="checkbox"/> 042 <input type="checkbox"/> 043 <input type="checkbox"/> 044 <input type="checkbox"/> 045 <input type="checkbox"/> 046 <input type="checkbox"/> 047 <input type="checkbox"/> 048 <input type="checkbox"/> 049 <input type="checkbox"/> 050 <input type="checkbox"/> 051 <input type="checkbox"/> 052 <input type="checkbox"/> 053 <input type="checkbox"/> 054 <input type="checkbox"/> 055 <input type="checkbox"/> 056 <input type="checkbox"/> 057 <input type="checkbox"/> 058 <input type="checkbox"/> 059 <input type="checkbox"/> 060 <input type="checkbox"/> 061 <input type="checkbox"/> 062 <input type="checkbox"/> 063 <input type="checkbox"/> 064 <input type="checkbox"/> 065 <input type="checkbox"/> 066 <input type="checkbox"/> 067 <input type="checkbox"/> 068 <input type="checkbox"/> 069 <input type="checkbox"/> 070 <input type="checkbox"/> 071 <input type="checkbox"/> 072 <input type="checkbox"/> 073 <input type="checkbox"/> 074 <input type="checkbox"/> 075 <input type="checkbox"/> 076 <input type="checkbox"/> 077 <input type="checkbox"/> 078 <input type="checkbox"/> 079 <input type="checkbox"/> 080 <input type="checkbox"/> 081 <input type="checkbox"/> 082 <input type="checkbox"/> 083 <input type="checkbox"/> 084 <input type="checkbox"/> 085 <input type="checkbox"/> 086 <input type="checkbox"/> 087 <input type="checkbox"/> 088 <input type="checkbox"/> 089 <input type="checkbox"/> 090 <input type="checkbox"/> 091 <input type="checkbox"/> 092 <input type="checkbox"/> 093 <input type="checkbox"/> 094 <input type="checkbox"/> 095 <input type="checkbox"/> 096 <input type="checkbox"/> 097 <input type="checkbox"/> 098 <input type="checkbox"/> 099 <input type="checkbox"/> 100	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	61000.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Gallego For Arizona

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ruben Alonzo	Nature of Debt (Purpose): Campaign Management Consulting
Mailing Address 1026 E Keim Dr	
City State Zip Code Phoenix AZ 85014-1947	

Outstanding Balance Beginning This Period 14000.00	Transaction ID : VNF5Q9HA1X0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mary Chlan	Nature of Debt (Purpose): Compliance Consulting Services
Mailing Address 3848 N 3rd Ave Unit 1063	
City State Zip Code Phoenix AZ 85013-3458	

Outstanding Balance Beginning This Period 4000.00	Transaction ID : VNF5Q9HA1V4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zeshan Dhanani	Nature of Debt (Purpose): Media Consulting Services
Mailing Address 10410 E Saltillo Dr	
City State Zip Code Scottsdale AZ 85255-8652	

Outstanding Balance Beginning This Period 3500.00	Transaction ID : VNF5Q9HA4H1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3500.00

1) SUBTOTALS This Period This Page (optional)	21500.00
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)

Gallego For Arizona

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lisa Fernandez		Nature of Debt (Purpose): Finance Consulting Services
Mailing Address 5303 N 7th St Unit 216		
City State	Zip Code	
Phoenix AZ	85014-2899	

Outstanding Balance Beginning This Period	Transaction ID : VNF5Q9HA1Z6	
16000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	4000.00	12000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Javelina		Nature of Debt (Purpose): Campaign Consulting
Mailing Address 4340 E Indian School Rd Ste 21-421		
City State	Zip Code	
Phoenix AZ	85018-5360	

Outstanding Balance Beginning This Period	Transaction ID : VNF5Q9HA1Y8	
4000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	4000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lake Research Partners Inc		Nature of Debt (Purpose): Polling Consulting
Mailing Address 4722 12th Ave NE Eas		
City State	Zip Code	
Seattle WA	98105-4468	

Outstanding Balance Beginning This Period	Transaction ID : VNF5Q9HA1W2	
10000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10000.00

1) SUBTOTALS This Period This Page (optional)	26000.00
2) TOTALS This Period (last page this line number only)	47500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	47500.00