

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 07 APR 19 PH 2:11

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: if typing, type over the lines Pederson 2006

ADDRESS (number and street) PO BOX 34144 Phoenix AZ 85067

2. FEC IDENTIFICATION NUMBER C00414664 3. IS THIS REPORT NEW (N) OR AMENDED (A) AZ DO

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 01 01 2007 through 03 31 2007

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 Lois Flan Signature of Treasurer Date 04 02 2007

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

27929153414

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Pederson 2006

Report Covering the Period:

From:

MM DD YYYY  
01 01 2007

To:

MM DD YYYY  
03 31 2007

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	7500.00	143010.00
(b) Total Contribution Refunds (From Line 20(d)).....	-1000.00	-800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8500.00	143810.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	15063.12	396117.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	6340.86	26688.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8722.26	369431.36
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	164.86	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	2533729.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

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

27020153415

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name  
Pederson 2008

Report Covering the Period:

From:

MM DD YYYY  
01 01 2007

To:

MM DD YYYY  
03 31 2007

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).....	0.00	12175.00
(ii) Unitemized.....	0.00	2235.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	14410.00
(b) Political Party Committees.....	0.00	100.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	7500.00	128500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	7500.00	143010.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	1269.34
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.).....	6340.86	26886.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.80
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13840.86	170986.14

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	15063.12	396117.36
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
30. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	-1000.00	-800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	-1000.00	-800.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	14063.12	395317.36

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	387.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13840.86
25. SUBTOTAL (add Line 23 and Line 24).....	14228.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14063.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	164.88

27020255417

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5/38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 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)  
Pederson 2006

A. Full Name (Last, First, Middle Initial)  
James E. Pederson

Mailing Address 318 W Rose Ln

City Phoenix State AZ Zip Code 85013-1529

FEC ID number of contributing federal political committee: C

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-In Date ▼  
120500.00

Date of Receipt  
01 12 2007

Transaction ID: 11d-01-02473-06377

Amount of Each Receipt this Period  
7500.00

Candidate Personal Funds  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....	7500.00
TOTAL This Period (last page this line number only) .....	7500.00

27020153410

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

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

FOR LINE NUMBER: PAGE 6 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pederson 2008

A. Full Name (Last, First, Middle Initial)  
QWest Communications  
Mailing Address P.O. Box 29060  
City Phoenix State AZ Zip Code 85038-9060  
FEC ID number of contributing federal political committee: C  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify)   
Election Cycle to Date 6353.15  
Date of Receipt 01 / 08 / 2007  
Transaction ID: 14-01-02457-08355  
Amount of Each Receipt this Period 759.96  
Refund of Deposit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)

B. Full Name (Last, First, Middle Initial)  
QWest Communications  
Mailing Address P.O. Box 29060  
City Phoenix State AZ Zip Code 85038-9060  
FEC ID number of contributing federal political committee: C  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify)   
Election Cycle to Date 5593.18  
Date of Receipt 01 / 08 / 2007  
Transaction ID: 14-01-02457-08356  
Amount of Each Receipt this Period 255.69  
Refund of Deposit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)

C. Full Name (Last, First, Middle Initial)  
The Verde Independent  
Mailing Address 116 S. Main St  
City Cottonwood State AZ Zip Code 86328  
FEC ID number of contributing federal political committee: C  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify)   
Election Cycle to Date 289.32  
Date of Receipt 01 / 08 / 2007  
Transaction ID: 14-01-02458-08357  
Amount of Each Receipt this Period 289.32  
Refund of Overpayment  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)

SUBTOTAL of Receipts This Page (optional) 1284.97  
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pederson 2006

**A. OWest Communications**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 28060  
 City Phoenix State AZ Zip Code 85038-8060  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify)   
 Election Cycle-to-Date 7980.44  
 Date of Receipt 01 / 10 / 2007  
 Transaction ID: 14-01-02459-06358  
 Amount of Each Receipt this Period 1607.29  
 Refund of Deposit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**B. R.L. Hayden & Co., Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Attn: Mark Spector  
 13052 E. Poinsettia Drive  
 City Scottsdale State AZ Zip Code 85259  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify)   
 Election Cycle-to-Date 1789.00  
 Date of Receipt 01 / 12 / 2007  
 Transaction ID: 14-01-02474-08378  
 Amount of Each Receipt this Period 700.00  
 Refund of Deposit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**C. OWest Communications**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 28060  
 City Phoenix State AZ Zip Code 85038-9080  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify)   
 Election Cycle-to-Date 8220.66  
 Date of Receipt 01 / 31 / 2007  
 Transaction ID: 14-01-02500-08408  
 Amount of Each Receipt this Period 280.22  
 Refund of Deposit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2567.51  
 TOTAL This Period (last page this line number only)

27020153420

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

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

FOR LINE NUMBER: PAGE 8 / 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pederson 2006

**A.** Full Name (Last, First, Middle Initial)  
APS  
Mailing Address P.O. Box 2907  
City Phoenix State AZ Zip Code 85062  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 2488.38  
Date of Receipt 02 12 2007  
Transaction ID: 14-01-02501-06410  
Amount of Each Receipt this Period 144.02  
Refund of Deposit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))

**B.** Full Name (Last, First, Middle Initial)  
APS  
Mailing Address P.O. Box 2907  
City Phoenix State AZ Zip Code 85062  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 2344.36  
Date of Receipt 01 18 2007  
Transaction ID: 14-01-02523-06432  
Amount of Each Receipt this Period 2344.36  
Refund of Deposit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional) 2488.38  
TOTAL This Period (last page this line number only) 6340.86

27020153421



**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 8/38
	<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)  
Pederson 2008

Full Name (Last, First, Middle Initial) <b>A. Kelly Consulting Alliance, LLC</b>		Transaction ID: 17-01-02458-08353 Date of Disbursement 01 / 01 / 2007	
Mailing Address P.O. Box 90847		Amount of Each Disbursement this Period 3000.00	
City Phoenix State AZ Zip Code 85066	Purpose of Disbursement Constituent Services Consultant Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category Type	

Full Name (Last, First, Middle Initial) <b>B. Kelly Consulting Alliance, LLC</b>		Transaction ID: 17-01-02456-06354 Date of Disbursement 01 / 01 / 2007	
Mailing Address P.O. Box 90847		Amount of Each Disbursement this Period 1800.00	
City Phoenix State AZ Zip Code 85066	Purpose of Disbursement Constituent Services Consultant Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category Type	

Full Name (Last, First, Middle Initial) <b>C. Greater Tucson Leadership</b>		Transaction ID: 17-01-02533-06442 Date of Disbursement 01 / 01 / 2007	
Mailing Address 5151 E. Broadway #1800		Amount of Each Disbursement this Period -80.00	
City Tucson State AZ Zip Code 85711	Purpose of Disbursement State Lost Check Paid on Later Invoice Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category Type	

SUBTOTAL of Disbursements This Page (optional)	4720.00
TOTAL This Period (last page this line number only)	

27020153422

**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)

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17 20a  18 20b  19a 20c  19b 21

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NAME OF COMMITTEE (In Full)  
Pederson 2006

A. CompuPay

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: 17-01-02534-06443  
Date of Disbursement: 01 / 01 / 2007

Mailing Address 2700 North Central Avenue #1100

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Payroll Fee Error

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: -95.47

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Mark L. Bergman

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: 17-01-02535-0000  
Date of Disbursement: 01 / 01 / 2007

Mailing Address 571 Hill Grove Rd.

City Manakin Sabote State VA Zip Code 23103

Purpose of Disbursement See Memo Items

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: -86.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. La Quinta (Tucson)

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: 17-01-02535-05444  
Date of Disbursement: 01 / 01 / 2007

Mailing Address 750 W. Starr Pass Blvd

City Tucson State AZ Zip Code 85719

Purpose of Disbursement Lodging - State Local Check

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: -86.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) ..... -162.28

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

27020153423

**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 11 / 38	
	<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)  
Pederson 2006

Full Name (Last, First, Middle Initial) A. Mark L. Bergman		Transaction ID: 17-01-02536-0000	
Mailing Address 571 Hill Grove Rd.		Date of Disbursement 01 / 01 / 2007	
City Manakin Sabota	State VA	Zip Code 23103	Amount of Each Disbursement this Period -40.00
Purpose of Disbursement See Memo Items		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: 17-01-02536-06445	
Mailing Address 17000 Cantrell Road		Date of Disbursement 01 / 01 / 2007	
City Little Rock	State AR	Zip Code 72223	Amount of Each Disbursement this Period -40.00
Purpose of Disbursement Telephone - State Last Check		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		(MEMO ITEM)
State: District:			

Full Name (Last, First, Middle Initial) C. Stephen T. Mollodtch		Transaction ID: 17-01-02536-0000	
Mailing Address 14823 N. 21st Pl.		Date of Disbursement 01 / 01 / 2007	
City Phoenix	State AZ	Zip Code 85022	Amount of Each Disbursement this Period -107.90
Purpose of Disbursement See Memo Items		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	-147.90
TOTAL This Period (last page this line number only) .....	

27020153424

**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 12 / 38	
	<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)  
Pederson 2008

Full Name (Last, First, Middle Initial) <b>A. Border's Books - Phoenix</b>		Transaction ID: 17-01-02538-06448 Date of Disbursement 01 / 01 / 2007	
Mailing Address 4555 East Cactus Road		Amount of Each Disbursement this Period -7.90	
City Phoenix State AZ Zip Code 85032	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>(MEMO ITEM)</b>	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Cingular Wireless</b>		Transaction ID: 17-01-02538-06447 Date of Disbursement 01 / 01 / 2007	
Mailing Address 17000 Cantrell Road		Amount of Each Disbursement this Period -100.00	
City Little Rock State AR Zip Code 72223	Purpose of Disbursement Telephone	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>(MEMO ITEM)</b>	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Hotel Weatherford</b>		Transaction ID: 17-01-02538-06449 Date of Disbursement 01 / 01 / 2007	
Mailing Address 23 N. Leroux		Amount of Each Disbursement this Period -54.07	
City Flagstaff State AZ Zip Code 86001	Purpose of Disbursement Conference Room Rental	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	-54.07
TOTAL This Period (last page this line number only)	

27020153425

**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 13 / 38
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 18a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Pederson 2006

Full Name (Last, First, Middle Initial) <b>A. American Express Card Services</b>		Transaction ID: 17-01-02516-06425
Mailing Address PO Box 360001		Date of Disbursement 01 / 02 / 2007
City FL Lauderdale	State FL	Zip Code 33336-0001
Purpose of Disbursement Merchant Fee	Category/ Type	Amount of Each Disbursement this Period 4.50
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) <b>B. American Express Card Services</b>		Transaction ID: 17-01-02517-06426
Mailing Address PO Box 360001		Date of Disbursement 01 / 05 / 2007
City FL Lauderdale	State FL	Zip Code 33336-0001
Purpose of Disbursement Merchant Fee	Category/ Type	Amount of Each Disbursement this Period 0.66
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) <b>C. Mark L. Bergman</b>		Transaction ID: 17-01-02537-06446
Mailing Address 571 Hill Grove Rd.		Date of Disbursement 01 / 05 / 2007
City Manakin Sabote	State VA	Zip Code 23103
Purpose of Disbursement Telephone - State Lost Check	Category/ Type	Amount of Each Disbursement this Period -40.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

SUBTOTAL of Disbursements This Page (optional)	-34.84
TOTAL This Period (last page this line number only)	

27020153426

**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)

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

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NAME OF COMMITTEE (In Full)  
Pederson 2008

Full Name (Last, First, Middle Initial) <b>A. VeriSign Payment Services</b>		Transaction ID: 17-01-02518-08427
Mailing Address 487 E. Middlefield Road		Date of Disbursement MM / DD / YYYY 01 / 11 / 2007
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Merchant Fee	Amount of Each Disbursement this Period 47.69	
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess <input type="checkbox"/> Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADT Security</b>		Transaction ID: 17-01-02460-06361
Mailing Address P.O. Box 371956		Date of Disbursement MM / DD / YYYY 01 / 12 / 2007
City Pittsburgh	State PA	Zip Code 15250-7956
Purpose of Disbursement Alarm System	Amount of Each Disbursement this Period 110.74	
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess <input type="checkbox"/> Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. APS</b>		Transaction ID: 17-01-02481-06363
Mailing Address P.O. Box 2907		Date of Disbursement MM / DD / YYYY 01 / 12 / 2007
City Phoenix	State AZ	Zip Code 85062
Purpose of Disbursement Utilities	Amount of Each Disbursement this Period 144.02	
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess <input type="checkbox"/> Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	302.45
<b>TOTAL</b> This Period (last page this line number only) .....	

27020153427

**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 15 / 36
	<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)  
Pederson 2008

Full Name (Last, First, Middle Initial) <b>A. Canon Financial Services, Inc</b>		Transaction ID: 17-01-02462-06364 Date of Disbursement 01 / 12 / 2007	
Mailing Address P.O. Box 4004		Amount of Each Disbursement this Period 1805.36	
City Carol Stream State IL Zip Code 60197	Purpose of Disbursement Copier Lease	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Canon Financial Services, Inc</b>		Transaction ID: 17-01-02462-06365 Date of Disbursement 01 / 12 / 2007	
Mailing Address P.O. Box 4004		Amount of Each Disbursement this Period 1502.51	
City Carol Stream State IL Zip Code 60197	Purpose of Disbursement Copier Lease	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Canon Financial Services, Inc</b>		Transaction ID: 17-01-02482-06366 Date of Disbursement 01 / 12 / 2007	
Mailing Address P.O. Box 4004		Amount of Each Disbursement this Period 2.41	
City Carol Stream State IL Zip Code 60197	Purpose of Disbursement Copier Lease	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	3110.28
TOTAL This Period (last page this line number only)	

27020153428

**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 18 / 38
	<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)  
Paderson 2006

**A. Chase Card Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 9001950  
City Louisville State KY Zip Code 40250-1950  
Purpose of Disbursement See Memo Items  
Candidate Name  
Office Sought:  House  Senate  President  
State: District: Disbursement For: 2006  
 Primary  General  Other (specify) ▼  
Category/Type

Transaction ID: 17-01-02463-0000  
Date of Disbursement 01 / 12 / 2007  
Amount of Each Disbursement this Period \$039.75  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B. Enterprise Rent-A-Car**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E. Rental Car Way  
City Phoenix State AZ Zip Code 85034  
Purpose of Disbursement Rental Car  
Candidate Name  
Office Sought:  House  Senate  President  
State: District: Disbursement For: 2006  
 Primary  General  Other (specify) ▼  
Category/Type

Transaction ID: 17-01-02463-06367  
Date of Disbursement 01 / 12 / 2007  
Amount of Each Disbursement this Period 1360.00  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
**[MEMO ITEM]**

**C. S & B Public Solutions, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1000 Potomac St, NW Ste. 500  
City Washington State DC Zip Code 20007  
Purpose of Disbursement Travel Per Diem  
Candidate Name  
Office Sought:  House  Senate  President  
State: District: Disbursement For: 2006  
 Primary  General  Other (specify) ▼  
Category/Type

Transaction ID: 17-01-02463-08408  
Date of Disbursement 01 / 12 / 2007  
Amount of Each Disbursement this Period 683.13  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... 3039.75  
**TOTAL** This Period (last page this line number only) .....

27020153429



**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 17 / 38

17 20a  18 20b  19a 20c  19b 21

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NAME OF COMMITTEE (In Full)  
Pederson 2006

**A. Constant Contact**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: 17-01-02483-06405  
Date of Disbursement: 01 / 12 / 2007

Mailing Address: 1801 Trapelo Rd.  
Sta. #329

City: Waltham State: MA Zip Code: 02451

Purpose of Disbursement: \_\_\_\_\_  
Email Blast Services \_\_\_\_\_  
Candidate Name \_\_\_\_\_

Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: 30.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

**B. Chase Card Services**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: 17-01-02483-06404  
Date of Disbursement: 01 / 12 / 2007

Mailing Address: PO Box 9001950

City: Louisville State: KY Zip Code: 40250-1950

Purpose of Disbursement: \_\_\_\_\_  
Bank Fees \_\_\_\_\_  
Candidate Name \_\_\_\_\_

Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: 111.62

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

**C. Alamo Rent A Car**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: 17-01-02483-06403  
Date of Disbursement: 01 / 12 / 2007

Mailing Address: PO Box 22776

City: FT. Lauderdale State: FL Zip Code: 33336

Purpose of Disbursement: \_\_\_\_\_  
Rental Car \_\_\_\_\_  
Candidate Name \_\_\_\_\_

Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: 685.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) ..... 0.00

TOTAL This Period (last page this line number only) ..... 0.00

27020153430

**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)

<input checked="" type="checkbox"/> 17 2(a)	<input type="checkbox"/> 18 2(b)	<input type="checkbox"/> 19a 2(c)	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Pederson 2008

A. City Of Phoenix - Water Services Dept.

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 29663

City Phoenix State AZ Zip Code 85038-9663

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: 17-01-02464-06368

Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

37.69

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B. Cox Communications

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 78071

City Phoenix State AZ Zip Code 85062

Purpose of Disbursement  
Cable

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: 17-01-02465-06369

Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

569.44

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C. Perkins Coie

Full Name (Last, First, Middle Initial)

Mailing Address 1201 3rd Ave.  
40th Fl.

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: 17-01-02466-06370

Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

391.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

998.13

TOTAL This Period (last page this line number only)

27020153431

**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)

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17     18     19a     18b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Pederson 2006

**A. Pitney Bowes - Purchase Power**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 856042

City Louisville State KY Zip Code 40285

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 17-01-02467-06371  
Date of Disbursement 01 / 12 / 2007

Amount of Each Disbursement this Period 98.77

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B. QWest Communications**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 29060

City Phoenix State AZ Zip Code 85038-9060

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 17-01-02468-06372  
Date of Disbursement 01 / 12 / 2007

Amount of Each Disbursement this Period 67.74

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C. UPS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 884820

City Los Angeles State CA Zip Code 90188-4820

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 17-01-02470-06374  
Date of Disbursement 01 / 12 / 2007

Amount of Each Disbursement this Period 3.13

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	159.64
TOTAL This Period (last page this line number only)	

27020153432

**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)

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17 20a  18 20b  19a 20c  19b 21

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NAME OF COMMITTEE (In Full)  
Pederson 2008

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address P.O. Box 4001

City State Zip Code  
Inglewood CA 90313-4001

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. CompuPay**

Mailing Address 2700 North Central Avenue #1100

City State Zip Code  
Phoenix AZ 85004

Purpose of Disbursement  
Tax Preparation Fees

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. VeriSign Payment Services**

Mailing Address 487 E. Middlefield Road

City State Zip Code  
Mountain View CA 94043

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 17-01-02471-06375  
Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

1249.96

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Transaction ID: 17-01-02519-06428  
Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

132.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Transaction ID: 17-01-02520-06429  
Date of Disbursement

01 / 26 / 2007

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1431.96

TOTAL This Period (last page this line number only)

27020153433

**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 / 38

17  18  19a  19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)  
Pedarson 2006

**A. VeriSign Payment Services**

Full Name (Last, First, Middle Initial)  
VeriSign Payment Services

Transaction ID: 17-01-02526-06435  
Date of Disbursement  
02 / 13 / 2007

Mailing Address 487 E. Middlefield Road

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Merchant Fee

Candidate Name

Amount of Each Disbursement this Period  
35.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
State: District Other (specify) ▼

Category/Type

**B. VeriSign Payment Services**

Full Name (Last, First, Middle Initial)  
VeriSign Payment Services

Transaction ID: 17-01-02527-06436  
Date of Disbursement  
03 / 13 / 2007

Mailing Address 487 E. Middlefield Road

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Merchant Fee

Candidate Name

Amount of Each Disbursement this Period  
35.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
State: District Other (specify) ▼

Category/Type

**C. IRS**

Full Name (Last, First, Middle Initial)  
IRS

Transaction ID: 17-01-02524-06433  
Date of Disbursement  
03 / 15 / 2007

Mailing Address 1973 N. Rulon White Blvd.

City Ogden State UT Zip Code 84404

Purpose of Disbursement Income Tax Return

Candidate Name

Amount of Each Disbursement this Period  
1796.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
State: District Other (specify) ▼

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 1866.35

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

27020153434

**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)

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17  18  19a  19b  
20a 20b 20c 21

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NAME OF COMMITTEE (in Full)

Poderson 2008

Full Name (Last, First, Middle Initial)

A. Paul Hegarty

Mailing Address 6238 N 30th Place

City State Zip Code  
Phoenix AZ 85016

Purpose of Disbursement  
See Memo Items

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 17-01-02541-0000

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

-218.15

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Clarion Hotel - Randolph Park

Mailing Address 102 N Alvernon Way

City State Zip Code  
Tucson AZ 85711

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 17-01-02541-00454

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

-91.63

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

(MEMO ITEM)

Full Name (Last, First, Middle Initial)

C. Target - Broadway

Mailing Address 5255 E. Broadway

City State Zip Code  
Tucson AZ 85711

Purpose of Disbursement  
Event Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 17-01-02541-00455

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

-44.88

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

(MEMO ITEM)

SUBTOTAL of Disbursements This Page (optional)

-218.15

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)

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17  18  19a  19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)  
Pederson 2008

Full Name (Last, First, Middle Initial)  
A. Home Depot-Tucson

Mailing Address 3688 E. Broadway Blvd

City Tucson State AZ Zip Code 85718

Purpose of Disbursement  
Event Supplies  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: 17-01-02541-06456  
Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

-45.75

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
B. Risky Business

Mailing Address 250 S Craycroft

City Tucson State AZ Zip Code 85711

Purpose of Disbursement  
Travel Meals  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: 17-01-02541-06457  
Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

-35.89

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
C. KTNN/KVRX Navajo Nation Radio

Mailing Address P.O. Box 2569

City Window Rock State AZ Zip Code 86515

Purpose of Disbursement  
Radio Ads  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: 17-01-02542-06458  
Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

-1442.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

-1442.00

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 24 / 36

17  18  19a  19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)  
Pederson 2008

A. Full Name (Last, First, Middle Initial)  
KTNM/KWRX Navajo Nation Radio

Mailing Address P.O. Box 2589

City Window Rock State AZ Zip Code 86515

Purpose of Disbursement  
Radio Ads

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: 17-01-02542-06459  
Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

-77.25

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address P.O. Box 4001

City Inglewood State CA Zip Code 90313-4001

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: 17-01-02543-06460  
Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

1235.09

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)  
Pederson Group, Inc.

Mailing Address 2800 N. Central Ave. Ste 1500

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement  
Conference Room Rental

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: 17-01-02547-06466  
Date of Disbursement

03 / 31 / 2007

Amount of Each Disbursement this Period

-15.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1142.84

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 25 / 38	
	<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)  
Pederson 2006

Full Name (Last, First, Middle Initial) A. Pederson Group, Inc.		Transaction ID: 17-01-02547-06467 Date of Disbursement 03 / 31 / 2007	
Mailing Address 2800 N. Central Ave. Ste 1500		Amount of Each Disbursement this Period -15.00	
City Phoenix State AZ Zip Code 85004	Purpose of Disbursement Conference Room Rental Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) B. Pederson Group, Inc.		Transaction ID: 17-01-02547-06468 Date of Disbursement 03 / 31 / 2007	
Mailing Address 2800 N. Central Ave. Ste 1500		Amount of Each Disbursement this Period -15.00	
City Phoenix State AZ Zip Code 85004	Purpose of Disbursement Conference Room Rental Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	-30.00
TOTAL This Period (last page this line number only)	14692.18

27020153438

**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)

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

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NAME OF COMMITTEE (In Full)  
Pederson 2006

A. Full Name (Last, First, Middle Initial)  
Greg Valladao

Mailing Address 6035 N. 2nd Ave.

City Phoenix State AZ Zip Code 85013

Purpose of Disbursement  
State Unpledged Check

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: 20a-D1-02532-06441  
Date of Disbursement  
01 / 01 / 2007

Amount of Each Disbursement this Period  
-1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	-1000.00
TOTAL This Period (last page this line number only) .....	-1000.00

27020153439

**SCHEDULE C (FEG Form 3 )**  
**LOANS**

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

PAGE 27/38

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
Pederson 2006

Transaction ID: 10-000001

LOAN SOURCE Full Name (Last, First, Middle Initial)

James R. Pederson

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address 1545 W. Glenn Dr.

City Phoenix State AZ ZIP Code 85021

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
700000.00	0.00	700000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 10 18 2006	20061231	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶

700000.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

27020153440

**SCHEDULE C (FEC Form 3 )**

**LOANS**

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

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
Pederson 2006

Transaction ID: 10-000002

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
James R. Pederson

Mailing Address 1545 W. Glenn Dr.

City Phoenix State AZ ZIP Code 85021

Election:  
 Primary  
 General  
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1328729.00	0.00	1328729.00

**TERMS**

Date Incurred: MM/DD/YYYY     
Date Due:   
Interest Rate:  % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)

**TOTALS** This Period (last page in this line only)

Carry outstanding balance only to LINE 3, Schedule C, for this line. If no Schedule D, carry forward to appropriate line of Summary.

27020153441

**SCHEDULE C (FEC Form 3 )**

**LOANS**

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

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
Pederson 2006

Transaction ID: 10-000003

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) James R. Pederson	<b>Election:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1545 W. Glenn Dr.	
City Phoenix State AZ ZIP Code 85021	

Original Amount of Loan 505000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 505000.00
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred MM DD YYYY 10 30 2008	Date Due 20081231	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	505000.00
<b>TOTALS</b> This Period (last page in this line only) .....	2533729.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

27020153442

Form/Schedule: SA114 Personal Funds Contributions  
Transaction ID: 11d-01-02473-06377

Form/Schedule: SB17 Reported in Error from 00/15/2006  
Transaction ID: 17-01-02534-06443

27020153443

Form/Schedule: **5817** State Lost Check  
Transaction ID: **17-01-02535-06444**

Form/Schedule: **3817** State Lost Check  
Transaction ID: **17-01-02535-06445**

27020153444

Form/Schedule: 9917 State Lost Check  
Transaction ID: 17-01-02537-06446

Form/Schedule: 9917 Uncashed Check - Paid twice in Error  
Transaction ID: 17-01-02538-06447

27020153445





Form/Schedule: 9917      Uncashed Check - Paid twice in Error  
Transaction ID: 17-01-02538-06448

Form/Schedule: 9917      Uncashed Check - Conference Room not used  
Transaction ID: 17-01-02538-06449

27020153446

Form/Schedule: **SB17**      State Lost Check  
Transaction ID: 17-01-02541-06454

Form/Schedule: **SB17**      State Lost Check  
Transaction ID: 17-01-02541-06455

27020153447

---

Form/Schedule: SB17 State Lost Check  
Transaction ID: 17-01-02541-06456

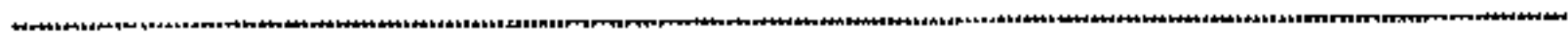
Form/Schedule: SB17 State Lost Check  
Transaction ID: 17-01-02541-06457

27020153440

Form/Schedule: 8817      Uncashed State Check - Time not used.  
Transaction ID: 17-01-02542-06458

Form/Schedule: 8817      Uncashed State Check - Time not used.  
Transaction ID: 17-01-02542-06459

27020153449



Form/Schedule: 9917 State Lost Check Re-issued 03/31/2007  
Transaction ID: 17-01-02547-06468

Form/Schedule: 9917 State Lost Check Re-issued 03/31/2007  
Transaction ID: 17-01-02547-06467

27020153450

Form Schedule SB17 State Lot Check Re-issued 03/14/2007  
Transaction ID: 17-01-02547-06468

27920153451

OPEN

ROUTING MARK

POSTNET INDICATOR

FULL TO ORDER

# 1-800-CALLDHL

1-800-225-5345

WWW.DHLUSA.COM

OfficeMax - Shipment Label

Waybill: 71412230651



Page 1 of 1

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Washington, DC 20510  
UNITED STATES

Attention To: The Secretary Of The Senate  
Phone #: 602-295-7598



From (Company):  
OFFICEMAX RETAIL 0899  
1314 E FLORENCE BLVD  
CASA GRANDE, AZ 85222  
UNITED STATES  
Sent by: Daniel Tarris  
Phone #: 602-296-7696

www.dhl.com

Description:  
Weight (lbs.): 1  
Pieces: 1 of 1  
Dimensions: 0 x 0 x 0  
Protection:  
Bill Shipment To: Sender  
Ship Ret:

Service:  
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Special Service:

Route:  
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FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

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DATE PREPARED 04-19-07

27020153453





27020153454