

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Re-Elect Trent Franks to Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	50197.07	198340.39
(b) Total Contribution Refunds (from Line 20(d))	0	2500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	50197.07	195840.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	33532.01	144392.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	3299
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	33532.01	141093.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	30584.31	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	280586.4	

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

Committee to Re-Elect Trent Franks to Congress

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).....	26975	81013
(ii) Unitemized.....	222.07	9769.05
(iii) TOTAL of contributions from individuals ▶	27197.07	90782.05
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	23000	107558.34
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	50197.07	198340.39
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	3299
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	88.87
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	50197.07	201728.26

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	33532.01	144392.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	15000	20000
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	15000	20000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	2500
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	2500
21. OTHER DISBURSEMENTS	5426.45	5426.45
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	53958.46	172318.46

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	34345.7
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50197.07
25. SUBTOTAL (add Line 23 and Line 24).....	84542.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53958.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	30584.31

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Ken Abramowitz

Mailing Address 411 Harbor Road

City Southport State CT Zip Code 06890-1376

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

Name of Employer NGN Capital Occupation Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF66985

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Ken Abramowitz

Mailing Address 411 Harbor Road

City Southport State CT Zip Code 06890-1376

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

Name of Employer NGN Capital Occupation Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : A-CF66977

Amount of Each Receipt this Period
400

C. Full Name (Last, First, Middle Initial)
Ken Abramowitz

Mailing Address 411 Harbor Road

City Southport State CT Zip Code 06890-1376

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

Name of Employer NGN Capital Occupation Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : A-CF66986

Amount of Each Receipt this Period
1600

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Mr. Jerry Colangelo

Mailing Address 70 E Country Club Drive

City State Zip Code
Phoenix AZ 85014-5435

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

Name of Employer Occupation
JDM Partners, LLC Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : A-CF66973

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Anthony Cordova

Mailing Address 5768 W Columbine Drive

City State Zip Code
Glendale AZ 85304-1835

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

Name of Employer Occupation
Self Employed Printing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF66984

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Jeffrey J Dewit

Mailing Address 8631 W Briles Road

City State Zip Code
Peoria AZ 85383-3692

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

Name of Employer Occupation
ECHOtrade CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : A-CF66952

Amount of Each Receipt this Period
1500

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey J Dewit

Mailing Address 8631 W Briles Road

City Peoria State AZ Zip Code 85383-3692

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

Name of Employer ECHOTrade Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2014

Transaction ID : A-CF66966

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Jana Falic

Mailing Address 150 Harbour Way

City Bal Harbour State FL Zip Code 33154-1333

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF66982

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Leon Falic

Mailing Address 145 Biscay Drive

City Bal Harbour State FL Zip Code 33154-1322

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

Name of Employer Duty Free America Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF66981

Amount of Each Receipt this Period
2600

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

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

5700.00

**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 46
	<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)
Committee to Re-Elect Trent Franks to Congress

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

Mailing Address **PO Box 8020**

City **Garden City** State **NY** Zip Code **11530-8020**

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 **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 06 / 2014

Transaction ID : A-CF66971

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Travis Grantham

Mailing Address **2068 E Tiffany Court**

City **Gilbert** State **AZ** Zip Code **85298-6125**

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

Name of Employer **International Air Response** Occupation **COO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 25 / 2014

Transaction ID : A-CF66979

Amount of Each Receipt this Period
750

C. Full Name (Last, First, Middle Initial)
Jim Johnson

Mailing Address **PO Box 1144**

City **Troy** State **MT** Zip Code **59935-1144**

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

Name of Employer **Chlor Rid** Occupation **Marketing**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF66987

Amount of Each Receipt this Period
100

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

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

3450.00

**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 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Thomas Kreiner

Mailing Address 13756 Keefer Highway

City Sunfield State MI Zip Code 48890-9027

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

Name of Employer Harveys Ag Occupation Sales Agronomist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 15 / 2014

Transaction ID : A-CF66972

Amount of Each Receipt this Period
250

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

Mailing Address 480 Park Avenue # 20H

City New York State NY Zip Code 10022-1613

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

Name of Employer The Langfan Company Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : A-CF66976

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Jan Leighton

Mailing Address 9417 W Avenida Del Sol

City Peoria State AZ Zip Code 85383-1135

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

Name of Employer West Maricopa County Realtor Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 30 / 2014

Transaction ID : A-CF67043

Amount of Each Receipt this Period
475

Earmarked through Votesane Pac.

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

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

1725.00

**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 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Votesane Pac

Mailing Address PO Box 2713

City: Alexandria State: VA Zip Code: 22301-0713

FEC ID number of contributing federal political committee: **C** C00484535

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 950

Date of Receipt: 03 / 04 / 2014

Transaction ID : A-CF67043.e

Amount of Each Receipt this Period: 475

[MEMO ITEM]
Earmarked-Original Details. Total Earmarked via this conduit: \$950.00. PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
Jonathan Lines

Mailing Address 6656 E Mountain View Place

City: Yuma State: AZ Zip Code: 85365-1144

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

Name of Employer: Occupation:
Lines and Lundgreen Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 02 / 21 / 2014

Transaction ID : A-CF66957

Amount of Each Receipt this Period: 1000

C. Full Name (Last, First, Middle Initial)
Norman McClelland

Mailing Address 3111 E Marlette Avenue

City: Phoenix State: AZ Zip Code: 85016-2341

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

Name of Employer: Occupation:
Shamrock Foods Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 02 / 18 / 2014

Transaction ID : A-CF67049

Amount of Each Receipt this Period: 1000

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Steven Nickolas

Mailing Address 21851 N 79th Place

City State Zip Code
Scottsdale AZ 85255-4889

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

Name of Employer Occupation
Healthy Food Products Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014

Transaction ID : A-CF66954

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Constantin Querard

Mailing Address 11330 W Rosewood Drive

City State Zip Code
Avondale AZ 85392-3417

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

Name of Employer Occupation
Discessio LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2014

Transaction ID : A-CF66983

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr Griffith Richard

Mailing Address 3417 Milam Street

City State Zip Code
Houston TX 77002-9531

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

Name of Employer Occupation
Self Employed Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2014

Transaction ID : A-CF67048

Amount of Each Receipt this Period
250

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Michael Rossetti

Mailing Address 6611 Dearborn Drive

City Falls Church State VA Zip Code 22044-1122

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

Name of Employer Akin Gump Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : A-CF66959

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Thomas Tamura

Mailing Address 15321 W Piccadilly Road

City Goodyear State AZ Zip Code 85395-8796

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 **1500**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 25 / 2014

Transaction ID : A-CF66978

Amount of Each Receipt this Period
1500

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

Mailing Address 271 S Yale Court

City Gilbert State AZ Zip Code 85296-1626

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

Name of Employer AZ Rock Products Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : A-CF66953

Amount of Each Receipt this Period
500

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
Steve Twist

Mailing Address 13870 N 98th Place

City State Zip Code
Scottsdale AZ 85260-8853

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

Name of Employer Occupation
Viad Corporation Professional - Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014

Transaction ID : A-CF66955

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Steve Twist

Mailing Address 13870 N 98th Place

City State Zip Code
Scottsdale AZ 85260-8853

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

Name of Employer Occupation
Viad Corporation Professional - Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014

Transaction ID : A-CF66956

Amount of Each Receipt this Period
1000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

3600.00

26975.00

**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 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists

Mailing Address 520 N Northwest Highway

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : A-CF66963

Amount of Each Receipt this Period
 5000

B. Full Name (Last, First, Middle Initial)
Centurylink Inc. Employees PAC

Mailing Address 1099 New York Avenue NW Suite 250

City Washington State DC Zip Code 20001-4836

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : A-CF66960

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Cox Enterprises - COXPAC, INC

Mailing Address 975 F Street NW Suite 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 3500

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : A-CF66961

Amount of Each Receipt this Period
 2500

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

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

8500.00

**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 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Ctia Pac
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 16th Street NW
 Suite 600
 City Washington State DC Zip Code 20036-2225
 FEC ID number of contributing federal political committee. **C** C00262295
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 4100

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2014
Transaction ID : A-CF66962
 Amount of Each Receipt this Period
 1000

B. Express Scripts PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Express Way
 City Saint Louis State MO Zip Code 63121-1824
 FEC ID number of contributing federal political committee. **C** C00365072
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2014
Transaction ID : A-CF66951
 Amount of Each Receipt this Period
 1000

C. Freeport-McMoran Copper & Gold Inc.
 Full Name (Last, First, Middle Initial)
 Mailing Address N Central Avenue
 Citizenship Committee 1
 City Phoenix State AZ Zip Code 85004-0694
 FEC ID number of contributing federal political committee. **C** C00320101
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2014
Transaction ID : A-CF66970
 Amount of Each Receipt this Period
 2500

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial)
General Dynamics Corporation PAC

Mailing Address 2941 Fairview Park Drive
Suite 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2014

Transaction ID : A-CF66968

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
General Dynamics Corporation PAC

Mailing Address 2941 Fairview Park Drive
Suite 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2014

Transaction ID : A-CF66969

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Avenue NW
Suite 500W

City Washington State DC Zip Code 20001-2177

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
8500

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

Transaction ID : A-CF66965

Amount of Each Receipt this Period
2500

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 46
	<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)
Committee to Re-Elect Trent Franks to Congress

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

Mailing Address 2121 Crystal Drive

City State Zip Code
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : A-CF66967

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
WAL-PAC

Mailing Address 702 SW 8th Street

City State Zip Code
Bentonville AR 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
M M / D D / Y Y Y Y
03 / 06 / 2014

Transaction ID : A-CF66964

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Western Energy Alliance

Mailing Address 410 17th Street
Suite 700

City State Zip Code
Denver CO 80202-4469

FEC ID number of contributing federal political committee. **C** C00426569

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : A-CF66958

Amount of Each Receipt this Period
2000

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

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

5000.00

23000.00

**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 OF 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Aristotle Industries		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 4350 Transaction ID : B-E-66995
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Campaign Hosting & Tech Support Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Arizona Republican Party		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 3501 N 24th Street		Amount of Each Disbursement this Period 450 Transaction ID : B-E-66993
City Phoenix State AZ Zip Code 85016-6607	Purpose of Disbursement State Meeting Table & Event Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Arizona Republican Party		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 3501 N 24th Street		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-67000
City Phoenix State AZ Zip Code 85016-6607	Purpose of Disbursement CD 8 List Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5800.00
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 19 OF 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 10459 N 28th Drive		Amount of Each Disbursement this Period 15 Transaction ID : B-E-67021
City Phoenix State AZ Zip Code 85051-1504	Purpose of Disbursement Monthly Bank Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 10459 N 28th Drive		Amount of Each Disbursement this Period 15 Transaction ID : B-E-67028
City Phoenix State AZ Zip Code 85051-1504	Purpose of Disbursement Monthly Bank Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 10459 N 28th Drive		Amount of Each Disbursement this Period 15 Transaction ID : B-E-67027
City Phoenix State AZ Zip Code 85051-1504	Purpose of Disbursement Monthly Bank Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	45.00
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 20 OF 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Camelback Ranch - Glendale			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 10710 W Camelback Road			Amount of Each Disbursement this Period 1188 Transaction ID : B-E-67033
City Phoenix	State AZ	Zip Code 85037-5072	
Purpose of Disbursement Ball Tickets/Food/Beverage		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Campaign Solutions			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 117 N Saint Asaph Street			Amount of Each Disbursement this Period 1425 Transaction ID : B-E-66988
City Alexandria	State VA	Zip Code 22314-3109	
Purpose of Disbursement Web Maintenance & Hosting		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Campaign Solutions			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 117 N Saint Asaph Street			Amount of Each Disbursement this Period 164.2 Transaction ID : B-E-66989
City Alexandria	State VA	Zip Code 22314-3109	
Purpose of Disbursement Fundraising & Credit Card Fees		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	2777.20
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 21 OF 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 787.5 Transaction ID : B-E-66974
City Alexandria State VA Zip Code 22314-3109	Purpose of Disbursement Web Maintenance & Hosting Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) B. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 287.42 Transaction ID : B-E-66975
City Alexandria State VA Zip Code 22314-3109	Purpose of Disbursement Credit Card & Fundraising Fees Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) c. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 358.29 Transaction ID : B-E-67051
City Alexandria State VA Zip Code 22314-3109	Purpose of Disbursement Credit Card & Fundraising Fees Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1433.21
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 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 175 Transaction ID : B-E-67052
City Alexandria State VA Zip Code 22314-3109	Purpose of Disbursement Hosting Fee: Internet Service 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CD Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address PO Box 1877		Amount of Each Disbursement this Period 926.9 Transaction ID : B-E-67012
City Alexandria State VA Zip Code 22313-1877	Purpose of Disbursement Advertising/Facebook 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Central Self Storage		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 5240 W Cactus Road		Amount of Each Disbursement this Period 203.39 Transaction ID : B-E-67014
City Glendale State AZ Zip Code 85304-1947	Purpose of Disbursement Monthly Storage Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1305.29
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 46	
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Central Self Storage		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 5240 W Cactus Road		Amount of Each Disbursement this Period 203.39 Transaction ID : B-E-67032
City Glendale	State AZ	
Zip Code 85304-1947	Purpose of Disbursement Monthly Storage Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Central Self Storage		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 5240 W Cactus Road		Amount of Each Disbursement this Period 203.39 Transaction ID : B-E-67031
City Glendale	State AZ	
Zip Code 85304-1947	Purpose of Disbursement Monthly Storage Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Click & Pledge		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 2200 Kraft Drive Suite 1175		Amount of Each Disbursement this Period 23.05 Transaction ID : B-E-67020
City Blacksburg	State VA	
Zip Code 24060-6704	Purpose of Disbursement Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	429.83
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 OF 46	
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Essex & Orange, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 7047 E Greenway Parkway Suite 150		Amount of Each Disbursement this Period 1083.31 Transaction ID : B-E-67003
City Scottsdale State AZ Zip Code 85254-8109	Purpose of Disbursement Fundraising & Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Essex & Orange, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 7047 E Greenway Parkway Suite 150		Amount of Each Disbursement this Period 75 Transaction ID : B-E-67010
City Scottsdale State AZ Zip Code 85254-8109	Purpose of Disbursement Fundraising & Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Essex & Orange, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 7047 E Greenway Parkway Suite 150		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-67011
City Scottsdale State AZ Zip Code 85254-8109	Purpose of Disbursement Fundraising & Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2158.31
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 26 OF 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 2320 W Peoria Avenue		Amount of Each Disbursement this Period 162.67
City Phoenix State AZ Zip Code 85029-4753	Purpose of Disbursement Shipping Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-67018
State: District:		

Full Name (Last, First, Middle Initial) B. Hirsch Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 7788 E Oakshore Drive		Amount of Each Disbursement this Period 780
City Scottsdale State AZ Zip Code 85258-3489	Purpose of Disbursement Fundraising & Consulting 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-66998
State: District:		

Full Name (Last, First, Middle Initial) C. Hirsch Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 7788 E Oakshore Drive		Amount of Each Disbursement this Period 1083.31
City Scottsdale State AZ Zip Code 85258-3489	Purpose of Disbursement Fundraising & Consulting 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-67002
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2025.98
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 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. J2 Global Communication (J Connect)			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 6922 Hollywood Boulevard Floor 5			Amount of Each Disbursement this Period 165 Transaction ID : B-E-67017
City Los Angeles	State CA	Zip Code 90028-6125	
Purpose of Disbursement Annual Computer Fax		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Maricopa County Republican Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2014
Mailing Address 3501 N 24th Street			Amount of Each Disbursement this Period 50 Transaction ID : B-E-67005
City Phoenix	State AZ	Zip Code 85016-6607	
Purpose of Disbursement Table - County Meeting		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Nova Information Services			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 7300 Chapman Highway			Amount of Each Disbursement this Period 71 Transaction ID : B-E-67022
City Knoxville	State TN	Zip Code 37920-6612	
Purpose of Disbursement Merchant Fee		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	286.00
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 28 OF 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Nova Information Services		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 71 Transaction ID : B-E-67023
City Knoxville	State TN	
Zip Code 37920-6612	Purpose of Disbursement Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Nova Information Services		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 7300 Chapman Highway		Amount of Each Disbursement this Period 71 Transaction ID : B-E-67024
City Knoxville	State TN	
Zip Code 37920-6612	Purpose of Disbursement Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Palomar Hotel		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 2 E Jefferson Street		Amount of Each Disbursement this Period 2116.91 Transaction ID : B-E-67038
City Phoenix	State AZ	
Zip Code 85004-2573	Purpose of Disbursement Food & Beverage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2258.91
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 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Premier Graphics		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 4141 W Clarendon Avenue		Amount of Each Disbursement this Period 288.08
City Phoenix State AZ Zip Code 85019-3616	Purpose of Disbursement Printing - Banner 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-66992
State: District:		

Full Name (Last, First, Middle Initial) B. Renaissance Hotel		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 50 E Adams Street		Amount of Each Disbursement this Period 2513.17
City Phoenix State AZ Zip Code 85004-2329	Purpose of Disbursement Food & Beverage 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-67042
State: District:		

Full Name (Last, First, Middle Initial) c. The Congressional Institute		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 401 Wythe Street # 103		Amount of Each Disbursement this Period 890
City Alexandria State VA Zip Code 22314-1915	Purpose of Disbursement Members Retreat 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-67015
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3691.25
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 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. US PostMaster		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 8155 N Black Canyon Highway		Amount of Each Disbursement this Period 5.6
City Phoenix	State AZ	
Zip Code 85021-4831	Purpose of Disbursement Postage	Transaction ID : B-E-67016
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 10011 N Metro Parkway E		Amount of Each Disbursement this Period 703.01
City Phoenix	State AZ	
Zip Code 85051-1524	Purpose of Disbursement Phone: Wireless	Transaction ID : B-E-67013
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 10011 N Metro Parkway E		Amount of Each Disbursement this Period 1024.04
City Phoenix	State AZ	
Zip Code 85051-1524	Purpose of Disbursement Wireless Phones & Equipment	Transaction ID : B-E-67034
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1732.65
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 46			
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Catherine Kutz			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 18620 Muncaster Road			Amount of Each Disbursement this Period 4589.82	
City Derwood	State MD	Zip Code 20855-1426	Transaction ID : B-E-66994	
Purpose of Disbursement Fundraising & Consulting		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Jesse Scott			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014	
Mailing Address 5015 W Culpepper Drive			Amount of Each Disbursement this Period 709	
City New River	State AZ	Zip Code 85087-3070	Transaction ID : B-E-66991	
Purpose of Disbursement Fundraising & Consulting		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. Daniel Stefanski			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 6342 W Aurora Drive			Amount of Each Disbursement this Period 500	
City Glendale	State AZ	Zip Code 85308-6350	Transaction ID : B-E-66996	
Purpose of Disbursement Campaign Organization		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	5798.82
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 46	
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Daniel Stefanski		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 6342 W Aurora Drive		Amount of Each Disbursement this Period 500 Transaction ID : B-E-66997
City Glendale	State AZ	
Zip Code 85308-6350	Purpose of Disbursement Campaign Organization	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lisa Teschler		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 9104 Kristin Lane		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-66999
City Fairfax	State VA	
Zip Code 22032-1423	Purpose of Disbursement FEC Reporting & Bookkeeping	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	32993.75

**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 46	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Trent Franks		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 6828 W Camino De Oro		Amount of Each Disbursement this Period 10000 Transaction ID : B-R-92
City Peoria	State AZ Zip Code 85383-3213	
Purpose of Disbursement Loan Repayment	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Trent Franks		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 6828 W Camino De Oro		Amount of Each Disbursement this Period 5000 Transaction ID : B-R-93
City Peoria	State AZ Zip Code 85383-3213	
Purpose of Disbursement Loan Repayment	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	15000.00

**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 46	
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Arizona Teenage Republicans		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 1229 N Granite Reef Road		Amount of Each Disbursement this Period 576.45 Transaction ID : B-E-67035
City Scottsdale	State AZ	
Zip Code 85257-4163	Purpose of Disbursement Table for Banquet	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bentivolio For Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address PO Box 886		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-67007
City Walled Lake	State MI	
Zip Code 48390-0886	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name Kerry Bentivolio	Office Sought: <input checked="" 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: MI District:	

Full Name (Last, First, Middle Initial) C. Birman For Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 647		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-67009
City Folsom	State CA	
Zip Code 95763-0647	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name Igor Birman	Office Sought: <input checked="" 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: CA District:	

SUBTOTAL of Disbursements This Page (optional).....	3576.45
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 35 OF 46	
	<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)
Committee to Re-Elect Trent Franks to Congress

Full Name (Last, First, Middle Initial) A. Frank Scaturro For Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 515 Herricks Road Suite 4		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-67008
City New Hyde Park State NY Zip Code 11040-1399	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name Frank Scaturro	Office Sought: <input checked="" 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: NY District:		

Full Name (Last, First, Middle Initial) B. Maricopa County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 3501 N 24th Street		Amount of Each Disbursement this Period 250 Transaction ID : B-E-67004
City Phoenix State AZ Zip Code 85016-6607	Purpose of Disbursement Lincoln Day Lunch Table 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Temple Beth Shalom		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 12202 N 101st Avenue		Amount of Each Disbursement this Period 600 Transaction ID : B-E-67001
City Sun City State AZ Zip Code 85351-3543	Purpose of Disbursement Sponsorship - Fundraising Event 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	5426.45

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10-L49
Committee to Re-Elect Trent Franks to Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) Trent Franks	[PERSONAL FUNDS]	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		
City Peoria	State AZ	ZIP Code 85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000	0	75000

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 08	D 21	Y 2002	M / D / Y 12/31/2006	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	75000.00
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L51**

LOAN SOURCE Full Name (Last, First, Middle Initial) Trent Franks	[PERSONAL FUNDS]	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000	0	50000

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	09 / 04 / 2002	12/31/2006	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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).....	50000.00
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.	

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L52**

LOAN SOURCE Full Name (Last, First, Middle Initial) Trent Franks	[PERSONAL FUNDS]	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000	0	20000

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 / 05 / 2002	12/31/2006	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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).....	▶	20000.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L55**

LOAN SOURCE Full Name (Last, First, Middle Initial) Trent Franks	[PERSONAL FUNDS]	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000	4900	100

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 08 / 09 / 2002	M M / D D / Y Y Y Y 12/31/2006	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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).....	▶	100.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L58**

LOAN SOURCE Full Name (Last, First, Middle Initial) Trent Franks	[PERSONAL FUNDS]	Election: 2000 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2000
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000	20000	30000

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 19 / Y 2002	M / D / Y 12/31/2006			0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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).....	▶	30000.00
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.		

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)

Transaction ID : SC/10-L986

Committee to Re-Elect Trent Franks to Congress

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

[PERSONAL FUNDS]

Election: 2000

Trent Franks

Primary

General

Other (specify) ▼

Primary 2000

Mailing Address

6828 W Camino De Oro

City

State

ZIP Code

Peoria

AZ

85383-3213

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

4000

0

4000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03 / 12 / 2003

/ / 12/31/2006

0.00 % (apr)

Yes No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. 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)..... ▶

4000.00

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.

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)

Transaction ID : SC/10-L987

Committee to Re-Elect Trent Franks to Congress

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

[PERSONAL FUNDS]

Election: 2000

Trent Franks

Primary

General

Other (specify) ▼

Primary 2000

Mailing Address

6828 W Camino De Oro

City

State

ZIP Code

Peoria

AZ

85383-3213

Original Amount of Loan

20000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

20000

TERMS

Date Incurred

01 / 27 / 2003

Date Due

12/31/2006

Interest Rate

0.00 % (apr)

Secured:

Yes No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. 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)..... ▶

20000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Trent Franks to Congress** Transaction ID : **SC/10-L989**

LOAN SOURCE Full Name (Last, First, Middle Initial) Trent Franks	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012
Mailing Address 6828 W Camino De Oro		

City	State	ZIP Code
Peoria	AZ	85383-3213

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000	0	2000

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 02 / D 04 / Y 2011	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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).....	2000.00
TOTALS This Period (last page in this line only).....	201100.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Base Connect, Inc	Nature of Debt (Purpose): Direct Mail
Mailing Address 1155 15th Street NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">34955.53</div>	Transaction ID : SD10-DEBT66385
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">34955.53</div>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Century Data Systems Corp. (BC)	Nature of Debt (Purpose): Data Processing
Mailing Address 1155 15th Street NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">16077.33</div>	Transaction ID : SD10-DEBT64621
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">16077.33</div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Consolidated Mailing Services (BC)	Nature of Debt (Purpose): Printing
Mailing Address 504 Shaw Road Suite 206	
City State Zip Code Sterling VA 20166-9437	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">8070.5</div>	Transaction ID : SD10-DEBT64319
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">8070.5</div>	

1) SUBTOTALS This Period This Page (optional) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">59103.36</div>
2) TOTALS This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists Inc. - Brokerage	Nature of Debt (Purpose): List Rental
Mailing Address 1155 15th Street NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="17079.94"/>	Transaction ID : SD10-DEBT64602
Amount Incurred This Period <input style="width:100%;" type="text" value="0"/>	Payment This Period <input style="width:100%;" type="text" value="0"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="17079.94"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists Inc. - Management	Nature of Debt (Purpose): List Rental
Mailing Address 1155 15th Street NW Suite 410	
City State Zip Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1103.1"/>	Transaction ID : SD10-DEBT64622
Amount Incurred This Period <input style="width:100%;" type="text" value="0"/>	Payment This Period <input style="width:100%;" type="text" value="0"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1103.1"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr Donald Gumpertz	Nature of Debt (Purpose): Refund - Over Contribution Limit
Mailing Address PO Box 2450	
City State Zip Code Toluca Lake CA 91610-0450	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1500"/>	Transaction ID : SD10-DEBT63696
Amount Incurred This Period <input style="width:100%;" type="text" value="0"/>	Payment This Period <input style="width:100%;" type="text" value="0"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1500"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="19683.04"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text" value=""/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="0.00"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Committee to Re-Elect Trent Franks to Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lenora Pusta

Mailing Address 138 W Sunflower Drive

City State Zip Code
Payson AZ 85541-6152

Nature of Debt (Purpose):
Refund - over contribution limit

Outstanding Balance Beginning This Period **700** **Transaction ID : SD10-DEBT63697**

Amount Incurred This Period **0** Payment This Period **0** Outstanding Balance at Close of This Period **700**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	700.00
2) TOTALS This Period (last page this line number only)	79486.40
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	201100.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	280586.40