

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION

JUL 11 12 12

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) BOB STUMP ELECTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00109140
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. BOX 130 AZ-03		
CITY, STATE and ZIP CODE TOLLESON, AZ 85353	STATE/DISTRICT	

4. TYPE OF REPORT

- | | |
|--|--|
| <input type="checkbox"/> April 15 Quarterly Report | <input type="checkbox"/> 12-Day Pre-Election Report for the _____
(Type of Election) |
| <input type="checkbox"/> July 15 Quarterly Report | election on _____ in the State of _____ |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> 30-Day Post-Election Report for the _____
(Type of Election) |
| <input type="checkbox"/> January 31 Year End Report | election on _____ in the State of _____ |
| <input checked="" type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
January 1 through June 30 1997		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	28,885.00	28,885.00
(b) Total Contribution Refunds (from Line 20(d))	-0-	-0-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	28,885.00	28,885.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13,444.79	13,444.79
(b) Total Offsets to Operating Expenditures (from Line 14)	2,008.09	2,008.09
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	11,436.70	11,436.70
8. Cash on Hand at Close of Reporting Period (from Line 27)	100,370.00	
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)	-0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 MARVIN LASSILA, Treasurer	Date
Signature of Treasurer <i>Marvin Lassila</i>	7/3/97

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In Full) BOB STUMP ELECTION COMMITTEE C00109140		Report Covering the Period: From 7/1/97 To 7/1/97	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Realized (use Schedule A)	3,000.00		11(a)II
(ii) Unrealized	345.00		11(a)III
(iii) Total of contributions from individuals	3,345.00	3,345.00	11(a)III
(b) Political Party Committees	750.00	750.00	11(b)
(c) Other Political Committees (such as PACs)	24,790.00	24,790.00	11(c)
(d) The Candidate	-0-	-0-	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	28,885.00	28,885.00	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		-0-	-0-
13. LOANS:			
(a) Made or Guaranteed by the Candidate	-0-	-0-	13(a)
(b) All Other Loans	-0-	-0-	13(b)
(c) TOTAL LOANS (add 13(a) and (b))	-0-	-0-	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		2,008.09	2,008.09
15. OTHER RECEIPTS (Dividends, Interest, etc.)		1,546.88	1,546.88
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		32,439.97	32,439.97
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		13,444.79	13,444.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		-0-	-0-
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	-0-	-0-	19(a)
(b) Of All Other Loans	-0-	-0-	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	-0-	-0-	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	-0-	-0-	20(a)
(b) Political Party Committees	-0-	-0-	20(b)
(c) Other Political Committees (such as PACs)	-0-	-0-	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	-0-	-0-	20(d)
21. OTHER DISBURSEMENTS		9,126.00	9,126.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		22,570.79	22,570.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 90,501.19	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 32,439.97	24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 122,941.16	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 22,570.79	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 100,370.37	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF

1 2

FOR LINE NUMBER

11a1

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NAME OF COMMITTEE (in Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lt. Gen (RET.) John B. Conaway 5126 Woodmire Lane Alexandria, VA 22311	self-employed	5/2/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation consultant	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code D. Michael Murray 601 Pennsylvania NW #1403 North Washington, DC 20004	Murray & Scheer	5/21/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation tax consultant	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code James L. Ervin 206 S. Lee Street Alexandria, VA 22314	BTA, Inc.	5/21/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation consultant	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code William J. Wight 727 23rd Street South #150 Arlington, VA 22202	Bill Wight LLC	6/6/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation consultant	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code J.S. Kimnett 6004 Copely Lane McLean, VA 22101	Kimnett, Coates & McCarthy	6/6/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation consultant	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code G. V. Montgomery 11 Canal Center Plaza #104 Alexandria, VA 22314	Requested	6/6/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation former Congressman	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Richard C. Whitner 8013 Candlewood Drive Alexandria, VA 22314	R.C. Whitner & Associates, Inc.	6/6/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation consulting public relations	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)

1,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

BOB STUMP ELECTION COMMITTEE CDD109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George D. McCarthy 5507 Albia Road Bethesda, MD 20616	Kimmitt, Coates & McCarthy Occupation: consultant	6/6/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul McManus 11 Canal Center Plaza #110 Alexandria, VA 22314	The Spectrum Group self-employed Occupation: CEO	6/6/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 14

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NAME OF COMMITTEE (in Full)

BOB STUMP ELECTION COMMITTEE C00109140.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
4554 N. Central Building c/o Judy Scherer 3140 N. 35th Avenue, #2 Phoenix, AZ 85017	NA	1/16/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): refund	Occupation: NA	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
U. S. West Communications Treasury Operations 5325 Zuni, Rm 679 Denver, CO 80221	NA	1/22/97	714.14
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): refund	Occupation: NA	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,714.14

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 8
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Litton Political Assistance Com. 21240 Burbank Boulevard Woodland Hills, CA 91367	NA	5/2/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Goodyear Good Government Fund 1144 E. Market Street Akron, OH 44316	NA	5/2/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Technologies Corporation Political Action Committee 1401 Eye Street, NW #600 Washington, D. C. 20005	NA	5/2/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hughes Active Citizenship Fund P.O. Box 80028, C-129 Los Angeles, CA 90080	NA	5/2/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Employees of Northrop Grumman 1234 6th Street, #204 Santa Monica, CA 90451	NA	5/2/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Crystal Sugar PAC 101 North Third Street Moorhead, Mn 56560	NA	5/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
McDonnell Douglas Employees PAC 1735 Jefferson Davis Highway Arlington, VA 22202	NA	5/21/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) 4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FMC Corporation Good Government Program 200 E. Randolph Drive Chicago, IL 60601	NA	5/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sunkist Political Action Committee P.O. BOX 5576 Sherman Oaks, CA 91413	NA	5/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ford Motor Company Civic Action Fund The American Road Dearborn, MI 48121	NA	5/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GEC-Marconi Electronic Systems Corp (G-PAC) 164 Totowa Rd Wayne, NJ 07470	NA	5/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Computing Devices, International PAC 8800 Queen Avenue, South Bloomington, MN 55431	NA	5/21/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kaman Corporation Good Government Fund Old Windsor Road Bloomfield, CT 06002	NA	5/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Sugar Beet Growers Association PAC 1156-15th Street NW, Suite 1101 Washington, DC 20005	NA	5/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Action Committee for Rural Electrification (ACRE) 4301 Wilson Boulevard Arlington, VA 22203 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation: NA	5/21/97	500.00
Aggregate Year-to-Date > \$ 500.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PRAXAIR, Inc. PAC P.O. BOX 2958 Danbury, CT 06813 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation: NA	5/21/97	500.00
Aggregate Year-to-Date > \$ 500.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Talley Industries, Inc. PAC 2702 North 44th Street, #100A Phoenix, Arizona 85008 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation: NA	5/21/97	500.00
Aggregate Year-to-Date > \$ 500.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STAR-PAC Natl. Star Rt. Mail Contractors PAC 324 E. Capitol Street, NE Washington, D.C. 20003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation: NA	5/21/97	500.00
Aggregate Year-to-Date > \$ 500.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
APSPAC 400 N. 5th Street Phoenix, AZ 85016 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation: NA	5/21/97	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sundstrand Good Government Program P.O. Box 7003 Rockford, IL 61125 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation: NA	5/22/97	290.00
Aggregate Year-to-Date > \$ 290.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
General Electric PAC 1299 Pennsylvania AV NW #1100 Washington, DC 20004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation: NA	5/22/97	500.00
Aggregate Year-to-Date > \$ 500.00			

SUBTOTAL of Receipts This Page (optional) 3,790.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 8
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TRACOR Political Action Committee 1215 Jefferson Davis Highway #1109 Arlington, VA 22202	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Sugar Cane League PAC P.O. Drawer 938 Thibodaux, LA 70302	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alliant Techsystems, Inc. Employees Citizenship Fund 600 2nd St NE MN11-1210 Hopkins, MN 55343	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CH2M Hill Companies, Ltd. PAC 6060 S. Willow Drive Greenwood Village, CO 80111	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Great Western Financial Corp Good Government Committee 9200 Oakdale Avenue Chatsworth, CA 91311	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MEBA PAF 444 N. Capitol Street, NW #800 Washington, DC 20001	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mortgage Bankers PAC 1125 15th Street, NW #700 Washington, D. C. 20005	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts this Page (optional) 3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 8
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TRW Good Government Fund 1900 Richmond Road Cleveland, OH 44124	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		Aggregate Year-to-Date > \$ 500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A.A.I. Corporation PAC P.O. Box 8006 Hunt Valley, MO 21030	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		Aggregate Year-to-Date > \$ 500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Motorola Employees Good Government Committee 1350 I. Street, NW #400 Washington, DC 20005	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		Aggregate Year-to-Date > \$ 500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chrysler Political Support Committee 1000 Chrysler Drive Auburn, MI 48326	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		Aggregate Year-to-Date > \$ 500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CYMAX PAC P.O. BOX 3299 Englewood, CO 80112	NA	6/6/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		Aggregate Year-to-Date > \$ 1000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Maritime Officers Voluntary Political Fund 650 4th Avenue Brooklyn, NY 11232	NA	6/6/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		Aggregate Year-to-Date > \$ 1000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brown & Williamson Tobacco Employees PAC P.O. BOX 35090 Louisville, KY 40232	NA	6/6/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		Aggregate Year-to-Date > \$ 500.00

SUBTOTAL of Receipts This Page (optional) 4,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee for the Advancement of Cotton P.O. Box 12292 Memphis, TN 38182	NA	6/20/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		
Aggregate Year-to-Date > \$ 500.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Holland & Knight Committee for Effective Government 2100 Pennsylvania Av. NW #400 Washington, DC 20037	NA	6/20/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		
Aggregate Year-to-Date > \$ 500.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip Morris Companies, Inc PAC 120 Park Avenue New York, NY 10017	NA	6/20/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		
Aggregate Year-to-Date > \$ 500.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lockheed Martin Employees PAC 1725 Jefferson Davis Highway #600 Arlington, VA 22202	NA	6/20/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		
Aggregate Year-to-Date > \$ 1000.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NARFE-PAC 1533 New Hampshire Avenue, NW Washington, D. C. 20006	NA	6/20/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		
Aggregate Year-to-Date > \$ 1000.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Contract Services Association of America PAC (C.S.A-P.A.C) 1200 G Street, NW \$370 Washington, DC 20005	NA	6/6/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		
Aggregate Year-to-Date > \$ 500.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Salt River Project Political Involvement Committee P.O. BOX 52025 Phoenix, AZ 85072	NA	6/25/97	(750.00) memo
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NA		
Aggregate Year-to-Date > \$ 750.00			

SUBTOTAL of Receipts This Page (optional) SRP **4,000.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code Raytheon PAC 141 Spring Street Lexington, MA 02173	Name of Employer NA Occupation NA	Date (month, day, year) 5/21/97	Amount of Each Receipt this Period 500.00 g
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 500.00g			
B. Full Name, Mailing Address and ZIP Code Florida Sugar Cane League PAC 115 C Lopez Clewston, FL 33440	Name of Employer NA Occupation NA	Date (month, day, year) 6/6/97	Amount of Each Receipt this Period 500.00 g
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 500.00g			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) 1,000.00 g

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G.V. Montgomery for Congress Committee P.O. BOX 5252 Meridan, MS 39301	NA	6/6/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Jenkins for Congress Committee P.O. Box 70 Jasper, GA 30143	NA	6/6/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NA	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only) 25,540.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bank One P.O. Box 71 Phoenix, AZ 85001-0071	NA	6/30/96	1,546.88
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>interest earned</u>	Occupation: <u>NA</u> Aggregate Year-to-Date: <u>\$ 1,546.88</u>		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: <u>\$</u>		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: <u>\$</u>		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: <u>\$</u>		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: <u>\$</u>		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: <u>\$</u>		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: <u>\$</u>		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,546.88

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressman Bob Stump (candidate) P.O. Box 5 Tolleson, AZ 85353	dinner expenses and gas Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/9/97	427.10
" " " " "	Reimb. Inaugural Day refreshments Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/29/97	27.80
" " " " "	Reimbursement extra Congressional Directories Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/11/97	172.00
Congressional Liquors First & D, SE Washington, DC 20003	Party refreshments snack Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/16/97	241.10
Marriott Catering B339 Rayburn House Office Bldg Washington, DC 20515	catering costs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/23/97	288.00
Morgan and Meredith Dan Morgan, Todd Meredith & Assoc 4451 Brookfield Corporate Drive Chantilly, VA 20151	Party fees/Deposit and final payment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/28/97 6/6/97	2,500.00 1,215.45
All the Kings Flags 3329 N. 24th Street Phoenix, AZ 85016	flag display cases Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/27/97	538.36
U.S.F. & G Insurance HRH Insurance P.O. Box 13058 Phoenix, AZ 85002	commercial Insurance costs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/97	500.00
Capitol Hill Club 300 First Street, SE Washington, D. C. 20003	fundraiser Reception food, beverage & labor fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/19/97	2,117.28

SUBTOTAL of Disbursements This Page (optional)

8,027.09

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BRH Insurance P.O. BOX 13058 Phoenix, Arizona 85002	Insurance/Campaign Van Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/6/97	3,832.85
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

11,859.94

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Arizona Republican Party Maricopa County 3501 North 24th Street Phoenix, AZ 85016	3-Lincoln Day Dinner tickets 2/11 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/10/97	75.00
B. Full Name, Mailing Address and ZIP Code 51st Annual Lincoln Day Dinner Kingman Republican c/o Roy Dunton 86401 118 E Andy Devine, Kingman AZ	Purpose of Disbursement 1 ticket 2/16 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/10/97	Amount of Each Disbursement This Period 20.00
C. Full Name, Mailing Address and ZIP Code Ivory Tusk Club c/o La Velle McCoy, Chairman P.O. Box 275 Flagstaff, AZ 86002	Purpose of Disbursement 1997 Membership Congressman Stump Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/11/97	Amount of Each Disbursement This Period 250.00
D. Full Name, Mailing Address and ZIP Code Coconino County Republicans c/o LaVelle McCoy P.O. Box 1927 Flagstaff, AZ 86002	Purpose of Disbursement 1 Lincoln Day Dinner ticket 2/22 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/20/97	Amount of Each Disbursement This Period 35.00
E. Full Name, Mailing Address and ZIP Code Northwest Valley Republicans c/o Anne Doyle P.O. Box 1562 Sun City, AZ 85372	Purpose of Disbursement tickets lunch table of 10 Get Out the Vote hdqtrs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/20/97	Amount of Each Disbursement This Period 225.00
F. Full Name, Mailing Address and ZIP Code Yavapai County Republicans P.O. Box 21 Prescott, AZ 86302	Purpose of Disbursement Lincoln Day Dinner tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/27/97	Amount of Each Disbursement This Period 105.00
G. Full Name, Mailing Address and ZIP Code Yavapai Trunk 'n Tusk Republican Committee of Yavapai P.O. Box 21 Prescott, AZ 86303	Purpose of Disbursement 1997 Memberships (2) Congressman Stump Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/27/97	Amount of Each Disbursement This Period 300.00
H. Full Name, Mailing Address and ZIP Code Arizona Republican Party 3501 North 24th Street Phoenix, AZ 85016	Purpose of Disbursement tickets table of 8 - 3/27 Hispanic Luncheon Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/13/97	Amount of Each Disbursement This Period 96.00
I. Full Name, Mailing Address and ZIP Code Republican Party of Mohave County c/o Roy Dunton 118 E. Andy Devine Kingman, AZ 86401	Purpose of Disbursement 3/15 ticket 1 Lincoln Day Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/15/97	Amount of Each Disbursement This Period 20.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

BOB STUMP ELECTION COMMITTEE C00109140

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
NRCC 320 First Street, SE Washington, D. C. 20003	Incumbent Support Dues	4/9/97	7,500.00
B. Full Name, Mailing Address and ZIP Code Arizona Republican Party 3501 North 24th Street Phoenix, AZ 85016	2 tickets Bush and Republican Family Reunion Dinner	6/17/97	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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Federal Election Commission
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