

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Defending Rural Arizona PAC

ADDRESS (number and street) 7509 NW Tiffany Springs Parkway Suite 300 Kansas City MO 64153
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00635680
3. IS THIS REPORT NEW OR AMENDED (A)
[x] (N)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 08 / 09 / 2018 through 09 / 30 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Arends, Joel, ,

Type or Print Name of Treasurer Arends, Joel, , Signature of Treasurer [Electronically Filed] Date 10 / 10 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Defending Rural Arizona PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="88205.53"/>	<input type="text" value="88205.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="106607.09"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="63269.86"/>	<input type="text" value="181469.86"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="169876.95"/>	<input type="text" value="269675.39"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="115290.16"/>	<input type="text" value="215088.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="54586.79"/>	<input type="text" value="54586.79"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name

**Defending Rural Arizona PAC**

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

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) Itemized (use Schedule A).....	62500.00	180500.00
(ii) Unitemized .....	0.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	62500.00	180700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	62500.00	180700.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	769.86	769.86
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	63269.86	181469.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	63269.86	181469.86

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	10911.80	38534.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10911.80	38534.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	103608.55	175784.40
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	769.86	769.86
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	- 0.05	- 0.05
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	115290.16	215088.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	115290.16	215088.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	62500.00	180700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	62500.00	180700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10911.80	38534.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10911.80	38534.39

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Defending Rural Arizona PAC**

**A. Bryan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9541 Southwest Barbur Blvd.  
 City Portland State OR Zip Code 97219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 10 / 2018  
**Transaction ID : SA11AI.4349**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**B. Casey, J, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Canyon Crest Drive  
 City Corona Del Mar State CA Zip Code 92625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Business Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2018  
**Transaction ID : SA11AI.4348**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Ham, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4304 S Mills Street  
 City Independence State MO Zip Code 64055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2018  
**Transaction ID : SA11AI.4351**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Defending Rural Arizona PAC**

**A. Hillman, Tatnall, Lea, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 504 W Bleeker Street  
 City Aspen State CO Zip Code 81611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 88000.00

Date of Receipt 09 / 13 / 2018  
**Transaction ID : SA11AI.4354**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**B. Merrick, Garth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 S. Avondale Ave.  
 City Amarillo State TX Zip Code 79106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Requested Occupation (for Individual) CEO/Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2018  
**Transaction ID : SA11AI.4352**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	51000.00
<b>TOTAL</b> This Period (last page this line number only).....	62500.00

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

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

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Defending Rural Arizona PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Arends, Joel, , ,

Mailing Address P.O. Box 1246

City State Zip Code  
Sioux Falls SD 57101

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

Name of Employer (for Individual) Occupation (for Individual)  
Arends Law, P.C. Treasurer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
769.86

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2018

**Transaction ID : SA13.4356**

Amount of Each Receipt this Period  
769.86

Memo Item  
On demand loan

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	769.86
<b>TOTAL</b> This Period (last page this line number only).....▶	769.86



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Defending Rural Arizona PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot, Inc.**

Mailing Address P O Box 83414

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement  
Fee for online credit card contribution

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 09 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.4358**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot, Inc.**

Mailing Address P O Box 83414

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement  
Fee for online credit card contribution

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 10 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.4359**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot, Inc.**

Mailing Address P O Box 83414

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement  
Fee for online credit card contribution

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 24 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.4360**  
Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Defending Rural Arizona PAC**

Full Name (Last, First, Middle Initial)

**A. Benta, LLC**

Mailing Address 439 Glen Avenue

City Council Bluffs State IA Zip Code 51503

Purpose of Disbursement  
Travel Expenses

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4371**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 1000 Walnut

City Kansas City State MO Zip Code 64105

Purpose of Disbursement  
Outgoing wire fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4363**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 1000 Walnut

City Kansas City State MO Zip Code 64105

Purpose of Disbursement  
Outgoing wire fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4364**  
Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Defending Rural Arizona PAC**

Full Name (Last, First, Middle Initial) <b>A. Commerce Bank</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2018
Mailing Address 1000 Walnut		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4368</b> Amount of Each Disbursement this Period [ ] 64.00
City Kansas City	State MO	Zip Code 64105
Purpose of Disbursement Bank service fees		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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>B. Commerce Bank</b>		Date of Disbursement MM / DD / YYYY 09 / 13 / 2018
Mailing Address 1000 Walnut		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4366</b> Amount of Each Disbursement this Period [ ] 40.00
City Kansas City	State MO	Zip Code 64105
Purpose of Disbursement Outgoing wire fee		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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>C. Commerce Bank</b>		Date of Disbursement MM / DD / YYYY 09 / 20 / 2018
Mailing Address 1000 Walnut		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4367</b> Amount of Each Disbursement this Period [ ] 40.00
City Kansas City	State MO	Zip Code 64105
Purpose of Disbursement Outgoing wire fee		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 144.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Defending Rural Arizona PAC**

**A. Commerce Bank Credit Card Payment Center**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 414084

City Kansas City State MO Zip Code 64141

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4338

Amount of Each Disbursement this Period: 2685.60

Memo Item

**B. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. Wacker Dr.

City Chicago State IL Zip Code 60606

Purpose of Disbursement Airline ticket and baggage fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4338.c

Amount of Each Disbursement this Period: 941.60

Memo Item

**C. Waldorf Astoria**

Full Name (Last, First, Middle Initial)

Mailing Address 2400 E. Missouri Ave.

City Phoenix State AZ Zip Code 85016

Purpose of Disbursement Hotel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4338.

Amount of Each Disbursement this Period: 611.60

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2685.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Defending Rural Arizona PAC**

Full Name (Last, First, Middle Initial)

**A. National Car Rental**

Mailing Address 1805 E. Sky Harbor Cir S

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Car Rental

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 29 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.4338.5**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Residence Inn by Marriott**

Mailing Address 100 N. humphreys St.

City Flagstaff State AZ Zip Code 86001

Purpose of Disbursement  
Hotel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement  
MM / DD / YYYY  
08 / 30 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.4338.5**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Data Orbital Consulting, LLC**

Mailing Address 1616 E. Indian School Road  
Suite 480

City Phoenix State AZ Zip Code 85016

Purpose of Disbursement  
Data Analysis

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.4370**  
Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Defending Rural Arizona PAC**

Full Name (Last, First, Middle Initial)  
**A. Law Office of James C. Thomas III**

Date of Disbursement  
MM / DD / YYYY  
09 / 06 / 2018

Mailing Address 7509 NW Tiffany Springs Parkway  
Suite 300

City Kansas City State MO Zip Code 64153

Purpose of Disbursement Legal and Reporting Services  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number  
C  
Transaction ID : SB21B.4369  
Amount of Each Disbursement this Period  
3772.80

Memo Item

Full Name (Last, First, Middle Initial)  
**B. The Rainmakers**

Date of Disbursement  
MM / DD / YYYY  
09 / 13 / 2018

Mailing Address P O Box 1082

City Springfield State VA Zip Code 22151

Purpose of Disbursement Fundraising Consulting Services  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number  
C  
Transaction ID : SB21B.4372  
Amount of Each Disbursement this Period  
1700.50

Memo Item

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

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number  
C  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5473.30

**TOTAL** This Period (last page this line number only)..... ▶ 10791.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Defending Rural Arizona PAC**

Full Name (Last, First, Middle Initial)

**A. Arends, Joel, , ,**

Mailing Address P.O. Box 1246

City  
Sioux Falls

State  
SD

Zip Code  
57101

Purpose of Disbursement  
Repayment of loan

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB26.4357**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Defending Rural Arizona PAC**

**A. Arends, Joel, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1246

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
Check processed by bank incorrectly

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB29.4373

Amount of Each Disbursement this Period: - 0.05

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ - 0.05

**TOTAL** This Period (last page this line number only)..... ▶ - 0.05



**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Defending Rural Arizona PAC** Transaction ID : **SC/10.4356**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Arends, Joel, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 1246				
City Sioux Falls	State SD	ZIP Code 57101		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
769.86	769.86	0.00

**TERMS**

Date Incurred MM / DD / YYYY 08 / 14 / 2018	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------------	-------------------------------	---

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

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

<b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
<b>TOTALS</b> This Period (last page in this line only) .....	0.00

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Defending Rural Arizona PAC
FEC IDENTIFICATION NUMBER
C C00635680

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Benta, LLC
Mailing Address 439 Glen Avenue
City Council Bluffs State IA Zip Code 51503
Purpose of Expenditure Travel expenses for media crew
Category/Type 004
Date of Public Distribution/Dissemination 08/27/2018
Amount 934.34
Transaction ID: SE.4320
Date of Disbursement or Obligation 08/27/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 161912.80
Disbursement For: Primary General
Other (specify)

Full Name of Payee Benta, LLC
Mailing Address 439 Glen Avenue
City Council Bluffs State IA Zip Code 51503
Purpose of Expenditure Canvassing, Etc.
Date of Public Distribution/Dissemination 09/19/2018
Amount 10000.00
Transaction ID: SE.4326
Date of Disbursement or Obligation 09/19/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 10000.00
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 10934.34
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Arends, Joel, , , [Electronically Filed]
Signature Date 10/10/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Defending Rural Arizona PAC
FEC IDENTIFICATION NUMBER
C C00635680

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Bullhorn Communication
Mailing Address: 2345 Pinhigh Ct
City: Colorado Springs, State: CO, Zip Code: 80907
Purpose of Expenditure: Media Production
Category/Type: 004
Amount: 6175.00
Transaction ID: SE.4295
Date of Disbursement or Obligation: 08/10/2018
Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ] President [ ]
District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought: 78900.85
Disbursement For: Primary [X] General [ ] Other (specify)

Full Name of Payee: Data Orbital Consulting, LLC
Mailing Address: 1616 E. Indian School Road Suite 480
City: Phoenix, State: AZ, Zip Code: 85016
Purpose of Expenditure: Data Analysis
Category/Type:
Amount: 1500.00
Transaction ID: SE.4303
Date of Disbursement or Obligation: 08/14/2018
Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ] President [ ]
District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought: 108224.45
Disbursement For: Primary [X] General [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 7675.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Arends, Joel, ,
Signature

[Electronically Filed]

Date 10/10/2018

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Defending Rural Arizona PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00635680                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Hotel Granduca</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 14 / 2018		
Mailing Address 1080 Uptown Park Blvd.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">769.86</div>		
City Houston	State TX	Zip Code 77056			
Purpose of Expenditure Hotel expenses for media production crew		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>SE.4307</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 14 / 2018		
Name of Federal Candidate: ROGERS, WENDY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">108994.31</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Red State Productions</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 14 / 2018		
Mailing Address P.O. Box 1246			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">27823.60</div>		
City Sioux Falls	State SD	Zip Code 57101			
Purpose of Expenditure Radio advertisement, production and placement		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4299</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 13 / 2018		
Name of Federal Candidate: ROGERS, WENDY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">106724.45</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">28593.46</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Arends, Joel, , ,*  
Signature

**[Electronically Filed]**

Date M M / D D / Y Y Y Y Y Y  
10 / 10 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Defending Rural Arizona PAC
FEC IDENTIFICATION NUMBER
C C00635680

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Red State Productions
Mailing Address: P.O. Box 1246
City: Sioux Falls, State: SD, Zip Code: 57101
Purpose of Expenditure: Radio advertisement, production and placement
Category/Type:
Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X]
Office Sought: [X] House, District: 01, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 130653.46
Disbursement For: [X] Primary, 2018

Full Name of Payee: Red State Productions
Mailing Address: P.O. Box 1246
City: Sioux Falls, State: SD, Zip Code: 57101
Purpose of Expenditure: Digital Advertisement production and placement
Category/Type: 004
Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X]
Office Sought: [X] House, District: 01, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 145815.96
Disbursement For: [X] Primary, 2018

(a) SUBTOTAL of Itemized Independent Expenditures ..... 36821.65
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Arends, Joel, , , [Electronically Filed] Date: 10 / 10 / 2018

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Defending Rural Arizona PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00635680
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Red State Productions</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address P.O. Box 1246			Amount <input type="text"/>		
City Sioux Falls	State SD	Zip Code 57101	Transaction ID : <b>SE.4315</b>		
Purpose of Expenditure Digital advertisement production and placement		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: SMITH, STEVE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Rocky Hayes Design, LLC</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2116 S. Monticello Ave			Amount <input type="text"/>		
City Sioux Falls	State SD	Zip Code 57106	Transaction ID : <b>SE.4290</b>		
Purpose of Expenditure Post cards and door hangrs		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: ROGERS, WENDY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Arends, Joel, , ,*

*[Electronically Filed]*

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Defending Rural Arizona PAC
FEC IDENTIFICATION NUMBER
C C00635680

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Telephone Town Hall Meeting
Mailing Address 958 Coneflower Dr
City Golden State CO Zip Code 80401
Purpose of Expenditure Text messages Category/Type 004
Name of Federal Candidate: ROGERS, WENDY, , , Support
Office Sought: House District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought 165784.40
Disbursement For: Primary 2018

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate: Support Oppose
Office Sought: House District: State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 3871.60, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 103608.55

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Arends, Joel, , ,

[Electronically Filed]

Date 10 / 10 / 2018

Signature