

# 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.

YOPAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE-Election** Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input checked="" type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C)         | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day **POST-Election** Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 J.THOMAS MEIER

Signature of Treasurer J.THOMAS MEIER [Electronically Filed] Date  /  /

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

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

YOPAC

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

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date     |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2012"/>  | <input type="text" value="20777.88"/> | <input type="text" value="20777.88"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="15979.03"/> |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="40500.00"/> | <input type="text" value="41250.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="56479.03"/> | <input type="text" value="62027.88"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="7555.08"/>  | <input type="text" value="13103.93"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="48923.95"/> | <input type="text" value="48923.95"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>     |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

YOPAC

Report Covering the Period: From: 04 / 01 / 2012 To: 06 / 06 / 2012

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 40250.00                      | 40250.00                          |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 40250.00                      | 40250.00                          |
| (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) .....  | 40250.00                      | 40250.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 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.....           | 250.00                        | 1000.00                           |
| 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))..... ▶                        | 40500.00                      | 41250.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 40500.00                      | 41250.00                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 3805.08                       | 9303.93                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 3805.08                       | 9303.93                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 4000.00                       | 7000.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 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 .....  | -250.00                       | -3200.00                          |
| 30. Federal Election Activity (2 U.S.C. §431(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)) ..      | 7555.08                       | 13103.93                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 7555.08                       | 13103.93                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 40250.00                      | 40250.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 40250.00                      | 40250.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ▶ | 3805.08                       | 9303.93                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ▶              | 3805.08                       | 9303.93                           |

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

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

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Sam Geduldig</b>   |   | Date of Receipt   |
| Mailing Address 1519 Pathfinder Ln  |   | <input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2012"/> |
| City<br>McLean  | State<br>VA   | Zip Code<br>22101   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |   | <b>Transaction ID : SA11AI.4326</b>   |
| Name of Employer<br>Clark & Associates  |   | Amount of Each Receipt this Period<br><input type="text" value="250.00"/>                             |
| Occupation<br>Government Affairs  |   | Contribution  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="250.00"/> |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Lori Hietz</b>   |  | Date of Receipt   |
| Mailing Address 260 Yorkshire Rd  |  | <input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City<br>Topeka  | State<br>KS  | Zip Code<br>66606   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |  | <b>Transaction ID : SA11AI.4331</b>   |
| Name of Employer<br>Aviva   |  | Amount of Each Receipt this Period<br><input type="text" value="5000.00"/>                            |
| Occupation<br>Officer   |  | Contribution  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="5000.00"/> |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mark Hietz</b>   |  | Date of Receipt   |
| Mailing Address 260 Yorkshire Rd  |  | <input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City<br>Topeka  | State<br>KS  | Zip Code<br>66606   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |  | <b>Transaction ID : SA11AI.4333</b>   |
| Name of Employer<br>Aviva   |  | Amount of Each Receipt this Period<br><input type="text" value="5000.00"/>                            |
| Occupation<br>Officer   |  | Contribution  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="5000.00"/> |   |

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="10250.00"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text"/>                  |

**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 16                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)  
**A. Ellen Merriman**

Mailing Address 300 W 11th St

City Kansas City State MO Zip Code 64105

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

Name of Employer Self Occupation Community Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 30 / 2012  
**Transaction ID : SA11AI.4337**

Amount of Each Receipt this Period  
5000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Michael A. Merriman**

Mailing Address 300 W 11th St

City Kansas City State MO Zip Code 64105

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

Name of Employer American Life Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 30 / 2012  
**Transaction ID : SA11AI.4335**

Amount of Each Receipt this Period  
5000.00

Contribution

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

Mailing Address 300 W 11th St

City Kansas City State MO Zip Code 64105

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

Name of Employer Self Occupation Community Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 30 / 2012  
**Transaction ID : SA11AI.4339**

Amount of Each Receipt this Period  
5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

**TOTAL** 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:             | PAGE 8 OF 16                 |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)  
**A. Timothy Sotos**

Mailing Address 300 W 11th St

City Kansas City State MO Zip Code 64105

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

Name of Employer CLR Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2012  
**Transaction ID : SA11AI.4341**

Amount of Each Receipt this Period  
5000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Richard Webb**

Mailing Address 315 West 3rd

City Pittsburg State KS Zip Code 66762

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

Name of Employer Watco Companies Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2012  
**Transaction ID : SA11AI.4327**

Amount of Each Receipt this Period  
5000.00

Contribution

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

Mailing Address 315 West 3rd

City Pittsburg State KS Zip Code 66762

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2012  
**Transaction ID : SA11AI.4329**

Amount of Each Receipt this Period  
5000.00

Contribution

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 40250.00 |

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

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

FOR LINE NUMBER: PAGE 9 OF 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
**YOPAC**

Full Name (Last, First, Middle Initial)  
**A. Kay Wolf for State Representative**  
 Mailing Address 8339 Roe  
 City State Zip Code  
 Prairie Village KS 66207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012  
**Transaction ID : SA16.4489**  
 Amount of Each Receipt this Period  
 250.00  
 Contribution Refund

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00  
**TOTAL** This Period (last page this line number only)..... ▶ 250.00

**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"/> 24  | <input type="checkbox"/> 25 | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. Fiorella's Jack Stack BBQ**

Mailing Address 9520 Metcalf Ave

City Overland Park State KS Zip Code 66212

Purpose of Disbursement  
PAC Food & Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2012

Transaction ID : **SB21B.4460**

Amount of Each Disbursement this Period

282.78

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Intercontinental Kansas City At the Plaza**

Mailing Address 401 Ward Parkway

City Kansas City State MO Zip Code 64112

Purpose of Disbursement  
PAC Food & Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2012

Transaction ID : **SB21B.4463**

Amount of Each Disbursement this Period

1286.30

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Kansas Athletics**

Mailing Address 1651 Naismith Dr

City Lawrence State KS Zip Code 66045

Purpose of Disbursement  
PAC Expense: Memorabilia

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

Transaction ID : **SB21B.4428**

Amount of Each Disbursement this Period

310.00

Category/  
Type

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

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

1879.08

**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"/> 24  | <input type="checkbox"/> 25 | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. Koch & Hoos, LLC**

Mailing Address 901 N Washington St, Suite 102

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
PAC Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : SB21B.4445**

Amount of Each Disbursement this Period

630.00

Full Name (Last, First, Middle Initial)

**B. Washington Nationals**

Mailing Address 1500 S Capitol St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Event Expense: Tickets

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2012

**Transaction ID : SB21B.4468**

Amount of Each Disbursement this Period

360.00

Full Name (Last, First, Middle Initial)

**C. Washington Nationals Club**

Mailing Address 1500 S Capitol St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Food & Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2012

**Transaction ID : SB21B.4466**

Amount of Each Disbursement this Period

936.00

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

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

1926.00

3805.08

**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 checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. ANN MARIE BUERKLE FOR CONGRESS**

Mailing Address PO BOX 219

City SYRACUSE State NY Zip Code 13214

Purpose of Disbursement  
Contribution

Candidate Name  
**ANN MARIE BUERKLE**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: NY District: 25

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

Transaction ID : **SB23.4430**

Amount of Each Disbursement this Period

500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. CHRIS GIBSON FOR CONGRESS**

Mailing Address PO BOX 234

City SARATOGA SPRINGS State NY Zip Code 12866

Purpose of Disbursement  
Contribution

Candidate Name  
**CHRISTOPHER P GIBSON**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: NY District: 20

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

Transaction ID : **SB23.4436**

Amount of Each Disbursement this Period

500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. CRAVAACK FOR CONGRESS CAMPAIGN COMMITTEE**

Mailing Address P.O. BOX 40040

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement  
Contribution

Candidate Name  
**RAYMOND J. CRAVAACK**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: MN District: 08

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

Transaction ID : **SB23.4433**

Amount of Each Disbursement this Period

500.00

Category/  
Type

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

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

1500.00

**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 checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF MIA LOVE**

Mailing Address 913 WEST GROUSE CIRCLE

City SARATOGA SPRINGS State UT Zip Code 84045

Purpose of Disbursement  
VOID: Uncashed Check - Orig. Disbursed 12/30/2011

Candidate Name  
**MIA LOVE**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: UT District: 04

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 1 | 5 |   |   | 2 | 0 | 1 | 2 |   |   |

Transaction ID : **SB23.4492**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| - | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF NAN HAYWORTH**

Mailing Address P.O. BOX 188

City CARMEL State NY Zip Code 10512

Purpose of Disbursement  
Contribution

Candidate Name  
**NAN HAYWORTH**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: NY District: 19

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 3 | 1 |   |   | 2 | 0 | 1 | 2 |   |   |

Transaction ID : **SB23.4439**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. MCSALLY FOR CONGRESS**

Mailing Address PO BOX 18612

City TUCSON State AZ Zip Code 85731

Purpose of Disbursement  
Contribution

Candidate Name  
**MARTHA E MCSALLY**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: AZ District: 02

Date of Disbursement

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

Transaction ID : **SB23.4457**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

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

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

**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 checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. RIBBLE FOR CONGRESS**

Mailing Address PO BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement  
Contribution

Candidate Name  
**REID RIBBLE**

Office Sought:  House  
 Senate  
 President  
State: WI District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2012

**Transaction ID : SB23.4442**

Amount of Each Disbursement this Period

500.00

**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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

500.00

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

4000.00

**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"/> 24  | <input type="checkbox"/> 25            | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. Amanda Grosserode for State Representative**

Mailing Address 12601 W 99th St

City Lenexa State KS Zip Code 66215

Purpose of Disbursement  
VOID: Uncashed Check Orig. Disb. 12/30/2011

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2012

**Transaction ID : SB29.4494**

Amount of Each Disbursement this Period

-250.00

**B. Bruchman for State Representative**

Full Name (Last, First, Middle Initial)

Mailing Address 5016 W 108th Terr, #522

City Overland Park State KS Zip Code 66211

Purpose of Disbursement  
VOID: Uncashed Check Orig. Disb. 12/30/2011

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2012

**Transaction ID : SB29.4493**

Amount of Each Disbursement this Period

-250.00

**C. Hildabrand for State Representative**

Full Name (Last, First, Middle Initial)

Mailing Address 7352 Royalty Way #108

City Merriam State KS Zip Code 66203

Purpose of Disbursement  
VOID: Uncashed Check Orig. Disb. 12/30/2011

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2012

**Transaction ID : SB29.4495**

Amount of Each Disbursement this Period

-250.00

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

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

-750.00

# 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"/> 24  | <input type="checkbox"/> 25            | <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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

### A. Paul Morrissey For Attorney General

Mailing Address 126 Rebels Roost Court

City Harpers Ferry State WV Zip Code 25425

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 22    | / | 2012        |

Transaction ID : SB29.4470

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

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

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

|        |
|--------|
| 500.00 |
|--------|

|         |
|---------|
| -250.00 |
|---------|