

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Lynn Jenkins Victory Fund

ADDRESS (number and street) PO Box 2042
 Check if different than previously reported. (ACC)
Topeka KS 66601-2042

2. **FEC IDENTIFICATION NUMBER** ▼ C C00586370 CITY ▲ STATE ▲ ZIP CODE ▲
STATE ▼ DISTRICT
KS

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)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2015 through M M / D D / Y Y Y Y 09 / 30 / 2015

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 Heather Grote

Signature of Treasurer Heather Grote [Electronically Filed] Date M M / D D / Y Y Y Y 10 / 15 / 2015

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Lynn Jenkins Victory Fund

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	31166.30	31166.30
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	31166.30	31166.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4802.66	4802.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4802.66	4802.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2300.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Lynn Jenkins Victory Fund

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24691.30	24691.30
(ii) Unitemized.....	475.00	475.00
(iii) TOTAL of contributions from individuals ▶	25166.30	25166.30
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	6000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	31166.30	31166.30
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	4311.36	4311.36
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	35477.66	35477.66

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4802.66	4802.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	28375.00	28375.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	33177.66	33177.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	35477.66
25. SUBTOTAL (add Line 23 and Line 24).....	35477.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33177.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Robert Totten

Mailing Address 2109 Miller's Glen Dr.

City Topeka	State KS	Zip Code 66614-5017
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FEC ID number of contributing federal political committee. **C**

Name of Employer KO Construction Assoc.	Occupation Executive VP
--------------------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : A08EA7BD92E7C42E9A7D

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gregory Schwerdt

Mailing Address 3623 SW Stonybrook Dr.

City Topeka	State KS	Zip Code 66614-5121
----------------	-------------	------------------------

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

Name of Employer Schwerdt Design	Occupation Architect
-------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : AACC22E3E84554F029BE

Amount of Each Receipt this Period
2700.00

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

Mailing Address 4244 SW Clarion Lakes Dr.

City Topeka	State KS	Zip Code 66610-1619
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FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : A7A73D3FB8A654F2F85B

Amount of Each Receipt this Period
500.00

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

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

3450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

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

Mailing Address 9403 W 146th Pl.

City	State	Zip Code
Overland Park	KS	66221-2260

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

Name of Employer	Occupation
Midwest Anesthesiologist	Anesthesiologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : AE349A3A2548041E39DF

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Jay Armstrong

Mailing Address 4528 Bourbon Rd.

City	State	Zip Code
Muscotah	KS	66058-3059

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

Name of Employer	Occupation
self	farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : AAE6CDE347C014D3E960

Amount of Each Receipt this Period

1700.00

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

Mailing Address 3521 SW Lincolnshire Rd.

City	State	Zip Code
Topeka	KS	66614-4687

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

Name of Employer	Occupation
BOTS and VisionBank	Pres/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : AE7B7E5A88C0841ACA8A

Amount of Each Receipt this Period

250.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

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

Mailing Address 5804 SW 44th Ct.

City Topeka State KS Zip Code 66610-1645

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

Name of Employer Midwest Health Management Occupation Insurance Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1291.30**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : ACC6F8D6BE4164B11BFE

Amount of Each Receipt this Period
500.00

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

Mailing Address 2542 Lake Ridge Court

City Wichita State KS Zip Code 67205-1321

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

Name of Employer OFG Fin. Services Inc Occupation executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 19 / 2015

Transaction ID : A7FA4A158917D441198D

Amount of Each Receipt this Period
500.00

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

Mailing Address 4951 Bradshaw St.

City Shawnee State KS Zip Code 66216-1429

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

Name of Employer KSCPA Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 19 / 2015

Transaction ID : AAD6FB46A4E1F4D4193E

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Bob Archer

Mailing Address 3522 SW Westport Ct.

City Topeka State KS Zip Code 66614-4567

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

Name of Employer Shawnee County Occupation Commissioner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : A8078D29480BF44F1A12

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
John Stauffer

Mailing Address 2855 SW MacVicar Ave.

City Topeka State KS Zip Code 66611-1704

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2015

Transaction ID : A86D3EF228EDF4841808

Amount of Each Receipt this Period
 250.00

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

Mailing Address 6750 W 93rd St., Ste 140

City Overland Park State KS Zip Code 66212-1465

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

Name of Employer Marsh and Company Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2015

Transaction ID : A5469B9CE944D4786B5A

Amount of Each Receipt this Period
 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

Full Name (Last, First, Middle Initial) A. James Klausman		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2015
Mailing Address 5804 SW 44th Ct.		Transaction ID : ABAB79AD5DD9D4A0587E
City Topeka	State KS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 791.30
Name of Employer Midwest Health Management	Occupation Insurance Executive	In-kind: food and beverage
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1291.30	

Full Name (Last, First, Middle Initial) B. Dana Anderson		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015
Mailing Address 100 Fall Creek Rd.		Transaction ID : A0BB27004A42844BFA49
City Lawrence	State KS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Macerich	Occupation Vice Chairman of the Board	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

Full Name (Last, First, Middle Initial) C. William Clifford		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2015
Mailing Address 102 Drury Lane		Transaction ID : A7B62B124627749C2B63
City Garden City	State KS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Fry Eye Assoc.	Occupation Physician	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	11041.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Werner Lienemann

Mailing Address 14305 2W 57th Ter.

City Shawnee	State KS	Zip Code 66216-4669
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FEC ID number of contributing federal political committee. **C**

Name of Employer Rich & Cartmill	Occupation Insurance Professional
-------------------------------------	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : AF32C2F3D817B40A7AB3

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alice Devine

Mailing Address 6117 SW 39th St.

City Topeka	State KS	Zip Code 66610-1370
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FEC ID number of contributing federal political committee. **C**

Name of Employer Devine & Donley LLC	Occupation Attorney
-----------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : ABEC6A29897D944EB87F

Amount of Each Receipt this Period
250.00

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

Mailing Address 2841 Plass

City Topeka	State KS	Zip Code 66611-1629
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FEC ID number of contributing federal political committee. **C**

Name of Employer Capitol Strategies	Occupation Consultant
----------------------------------------	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 28 / 2015

Transaction ID : AB781E1CDDAA1440B820

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Vincent Frye

Mailing Address 6007 Stonybrook Ct.

City Topeka	State KS	Zip Code 66614-5113
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FEC ID number of contributing federal political committee. **C**

Name of Employer Downtown Topeka Inc	Occupation Assoc. Mang.
-----------------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 24 / 2015

Transaction ID : A742BCB96CD2544C5BFC

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Andrew Corbin

Mailing Address 6337 SW Hodges Rd.

City Auburn	State KS	Zip Code 66402-9563
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FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross and Blue Shield of KC	Occupation CEO
------------------------------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : AD422F4C522A7495D93A

Amount of Each Receipt this Period
500.00

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

Mailing Address 3501 SW Fairlawn Rd.

City Topeka	State KS	Zip Code 66614-3976
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FEC ID number of contributing federal political committee. **C**

Name of Employer Equity Ventures Inc.	Occupation real estate development
------------------------------------------	---------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : AD049E2D8AAFB46CEA58

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Jay Armstrong

Mailing Address 4528 Bourbon Rd.

City Muscotah State KS Zip Code 66058-3059

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

Name of Employer self Occupation farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : A30B0DA5A23A74DF99A7

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Marcia Haag

Mailing Address 3437 SW Stonybrook Dr.

City Topeka State KS Zip Code 66614-5117

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : A9F5C83F9C96847BF8C9

Amount of Each Receipt this Period
500.00

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

Mailing Address 5420 SE 37th St.

City Tecumseh State KS Zip Code 66542-9161

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : A05EF0D0F7E9849D0B13

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Robert Boyer

Mailing Address 26412 W 110th St.

City Olathe State KS Zip Code 66061-7491

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

Name of Employer Shred It Occupation owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2015

Transaction ID : A3E1CB749CD4C3EAEB

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Midas Touch Golden Tans LLC

Mailing Address 2918 W Hwy 50, Suite F

City Emporia State KS Zip Code 66801-5149

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : ABC546545171D43AD9E3

Amount of Each Receipt this Period
250.00

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

Mailing Address 2049 Road G

City Emporia State KS Zip Code 66801-7606

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

Name of Employer The Midas Touch Golden Tans Occupation owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : ABE19527343E14BEB9CE

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Partnership: Midas Touch Golden Tans LLC

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

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

2250.00

24691.30

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Waddell & Reed Financial, Inc. Political Action Committee

Mailing Address 6300 Lamar Ave

City Overland Park State KS Zip Code 66202-4247

FEC ID number of contributing federal political committee. **C** C00340745

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2015

Transaction ID : A7326C3B9D7194E6AB86

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Westar Energy Employees Political Action Committee

Mailing Address PO Box 889

City Topeka State KS Zip Code 66601-0889

FEC ID number of contributing federal political committee. **C** C00390989

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : ADD964F9633BB46F1BA3

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
National Association Of Trailer Manufacturers Political Action Committee

Mailing Address 2420 SW 17th St

City Topeka State KS Zip Code 66604-2627

FEC ID number of contributing federal political committee. **C** C00490987

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : A6DDA988D46AE43DBB72

Amount of Each Receipt this Period
 1000.00

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

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

6000.00

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 20
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

A. Full Name (Last, First, Middle Initial)
Heather Grote

Mailing Address 28 N. 8th St., Suite 317

City Columbia State MO Zip Code 65201-7708

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

Name of Employer Grote and Associates Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : AD19DB92D90F54989944

Amount of Each Receipt this Period
 300.00
 open bank acct and check purchases

B. Full Name (Last, First, Middle Initial)
Lynn Jenkins For Congress

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601-1441

FEC ID number of contributing federal political committee. **C** C00433730

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4011.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : AC35A20C7D7E94EDC959

Amount of Each Receipt this Period
 4011.36
 food and beverage

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

4311.36

4311.36

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

Full Name (Last, First, Middle Initial) A. James Klausman		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 5804 SW 44th Ct.		Amount of Each Disbursement this Period 791.30 Transaction ID : BBAB79AD5DD9D4A0587E
City Topeka	State KS	
Purpose of Disbursement In-kind: food and beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 1700.00 Transaction ID : B9490B091DE1C45278DE
City Washington	State DC	
Purpose of Disbursement software		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Pro Print		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address 1033 SW Gage Blvd. Ste 200		Amount of Each Disbursement this Period 1137.59 Transaction ID : B6FDE3B2A4F324C89B66
City Topeka	State KS	
Purpose of Disbursement invitation printing		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	3628.89
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

Full Name (Last, First, Middle Initial) A. A. Harper Development			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015	
Mailing Address 5417 Chadwick			Amount of Each Disbursement this Period 366.65	
City Fairway	State KS	Zip Code 66205-2624	Transaction ID : B91A2DA06D3F4493792D	
Purpose of Disbursement travel, rentals, postage		003 Category/ Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
State: District:		<input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2015	
Mailing Address 424 S Kansas Ave #1			Amount of Each Disbursement this Period 2.54	
City Topeka	State KS	Zip Code 66603-3440	Transaction ID : B3619FD9C970B4205A9A	
Purpose of Disbursement postage		003 Category/ Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
State: District:		<input type="checkbox"/> Other (specify)		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015	
Mailing Address 424 S Kansas Ave #1			Amount of Each Disbursement this Period 17.95	
City Topeka	State KS	Zip Code 66603-3440	Transaction ID : B42CA9EA29C744CACA82	
Purpose of Disbursement postage		003 Category/ Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
State: District:		<input type="checkbox"/> Other (specify)		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	366.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

Full Name (Last, First, Middle Initial) A. A. Harper Development		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address 5417 Chadwick		Amount of Each Disbursement this Period 248.60
City Fairway	State Zip Code KS 66205-2624	
Purpose of Disbursement mileage	Category/Type 002	Transaction ID : BA120517A56E846E4888
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Lynn Jenkins For Congress		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address PO Box 1441		Amount of Each Disbursement this Period 634.09
City Topeka	State Zip Code KS 66601-1441	
Purpose of Disbursement postage and food/beverage reimbursment	Category/Type 003	Transaction ID : B9C4B94119EBA4B67A50
Candidate Name Lynn Jenkins		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KS District: 02		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 424 S Kansas Ave #1		Amount of Each Disbursement this Period 294.00
City Topeka	State Zip Code KS 66603-3440	
Purpose of Disbursement postage	Category/Type 003	Transaction ID : B54E5251894324827ABB
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	634.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

Full Name (Last, First, Middle Initial)		Date of Disbursement														
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>11</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		11		2015			
M M	/	D D	/	Y Y Y Y												
08		11		2015												
Mailing Address 424 S Kansas Ave #1		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Topeka</td> <td>KS</td> <td>66603-3440</td> </tr> </table>		City	State	Zip Code	Topeka	KS	66603-3440	<table border="1"> <tr> <td>246.85</td> </tr> </table>		246.85						
City	State	Zip Code														
Topeka	KS	66603-3440														
246.85																
Purpose of Disbursement postage		Transaction ID : B857A2959C28B42D185F														
Candidate Name		[MEMO ITEM]														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2016</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>		Office Sought:	House	Disbursement For: 2016		Senate		President			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)		
Office Sought:	House	Disbursement For: 2016														
	Senate															
	President															
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General														
		<input type="checkbox"/> Other (specify)														
State: District:																

Full Name (Last, First, Middle Initial)		Date of Disbursement														
B.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y								
M M	/	D D	/	Y Y Y Y												
Mailing Address		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>		City	State	Zip Code				<table border="1"> <tr> <td></td> </tr> </table>								
City	State	Zip Code														
Purpose of Disbursement		Category/Type														
Candidate Name																
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>		Office Sought:	House	Disbursement For:		Senate		President			<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)		
Office Sought:	House	Disbursement For:														
	Senate															
	President															
		<input type="checkbox"/> Primary <input type="checkbox"/> General														
		<input type="checkbox"/> Other (specify)														
State: District:																

Full Name (Last, First, Middle Initial)		Date of Disbursement														
C.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y								
M M	/	D D	/	Y Y Y Y												
Mailing Address		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>		City	State	Zip Code				<table border="1"> <tr> <td></td> </tr> </table>								
City	State	Zip Code														
Purpose of Disbursement		Category/Type														
Candidate Name																
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>		Office Sought:	House	Disbursement For:		Senate		President			<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)		
Office Sought:	House	Disbursement For:														
	Senate															
	President															
		<input type="checkbox"/> Primary <input type="checkbox"/> General														
		<input type="checkbox"/> Other (specify)														
State: District:																

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	4629.63

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 20
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Lynn Jenkins Victory Fund

Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 320 1st St SE		Amount of Each Disbursement this Period 10000.00 Transaction ID : B4EB2A64ABDD245F49C5
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Transfer Candidate Name Category/Type 008	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lynn Jenkins For Congress		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address PO Box 1441		Amount of Each Disbursement this Period 18375.00 Transaction ID : B1684EDB472BB4FF799B
City Topeka State KS Zip Code 66601-1441	Purpose of Disbursement Transfer: transfer Candidate Name Lynn Jenkins Category/Type 008	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: KS District: 02	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	28375.00
TOTAL This Period (last page this line number only).....	28375.00