

# 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

FREE STATE PAC

ADDRESS (number and street) P.O. BOX 9191

Check if different than previously reported. (ACC) Shawnee Mission KS 66201

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

C C00455717

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 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 M M M / D D D / Y Y Y Y Y Y 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 M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2016 through M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016

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

Clark, James, Tice, ,

Type or Print Name of Treasurer

Signature of Treasurer Clark, James, Tice, , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2016

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**FREE STATE 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="2016"/>		<input type="text" value="130241.38"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="232369.77"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="145262.38"/>	<input type="text" value="338222.38"/>
(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="377632.15"/>	<input type="text" value="468463.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="61343.31"/>	<input type="text" value="152174.92"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="316288.84"/>	<input type="text" value="316288.84"/>
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

FREE STATE PAC

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2016 To: MM / DD / YYYY 09 / 30 / 2016

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).....	22750.00	72950.00
(ii) Unitemized .....	0.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	22750.00	72960.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	91000.00	233750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	113750.00	306710.00
12. Transfers From Affiliated/Other Party Committees.....	31512.38	31512.38
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.....	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)).....▶	145262.38	338222.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	145262.38	338222.38

**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 .....	30243.31	101574.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30243.31	101574.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	40000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	6100.00	10600.00
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)) ..	61343.31	152174.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61343.31	152174.92

**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) .....	113750.00	306710.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	113750.00	306710.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	30243.31	101574.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30243.31	101574.92

**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 34
	(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"/> 15
	<input type="checkbox"/> 12	<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)  
**FREE STATE PAC**

**A. AK-Chin Indian Community**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42507 West Peters & Nail Rd.  
 City Maricopa State AZ Zip Code 85138  
 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 ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2016  
**Transaction ID : SA11AI.8172**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Political Contribution

**B. Carlson Jr., Leroy T., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1260 N. Astor St.  
 City Chicago State IL Zip Code 60610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Telephone & Data Systems Occupation (for Individual) Officer  
 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  
 07 / 07 / 2016  
**Transaction ID : SA11AI.8077**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Political Contribution

**C. Fuller III, John B., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1817 Edgehill Dr.  
 City Alexandria State VA Zip Code 22307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Van Scoyoc Associated Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.8183**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7750.00
<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 34
	<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	

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. Shakopee Mdewalamtpm Sioux**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2330 Sioux Trail NW  
 City Prior Lake State MO Zip Code 55372  
 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 ▼ 5000.00

Date of Receipt 09 / 08 / 2016  
**Transaction ID : SA11AI.8156**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Political Contribution

**B. Thomas, Jill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1516 S. Boston Ave.  
 City Tulsa State OK Zip Code 74119  
 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 ▼ 2500.00

Date of Receipt 08 / 24 / 2016  
**Transaction ID : SA11AI.8109**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Political Contribution

**C. Thomas, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1516 S. Boston Ave.  
 City Tulsa State OK Zip Code 74119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Senior Star Occupation (for Individual) Co-Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 8500.00

Date of Receipt 08 / 24 / 2016  
**Transaction ID : SA11AI.8108**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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: PAGE 8 OF 34  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

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

Mailing Address 1516 S. Boston Ave.

City Tulsa	State OK	Zip Code 74119
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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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

**Transaction ID : SA11AI.8106**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

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

Mailing Address 1516 S. Boston Ave.

City Tulsa	State OK	Zip Code 74119
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Senior Star	Occupation (for Individual) Co-Owner
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

**Transaction ID : SA11AI.8104**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

**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  

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	22750.00



**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 9 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

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

Mailing Address 421 AVIATION WAY

City FREDERICK	State MD	Zip Code 21701
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00131185

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

**Transaction ID : SA11C.8167**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

**B. ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)**

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

Mailing Address 101 CONSTITUTION AVE NW  
SUITE 400W

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00089136

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

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
09	/	08	/	2016

**Transaction ID : SA11C.8154**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

**C. AMERICAN ASSOCIATION OF AIRPORT EXECUTIVES**

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

Mailing Address 601 MADISON ST.  
SUITE 400

City ALEXANDRIA	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00176727

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2016

**Transaction ID : SA11C.8152**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<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 10 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00000729

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

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
07	/	07	/	2016

**Transaction ID : SA11C.8076**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

**B. AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1111 NORTH FAIRFAX ST.

City ALEXANDRIA	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00012880

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

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
09	/	08	/	2016

**Transaction ID : SA11C.8155**

Amount of Each Receipt this Period  
4000.00

Memo Item  
Political Contribution

**C. AMGEN INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 601 13TH STREET, NW  
12TH FLOOR

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00251876

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

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
09	/	26	/	2016

**Transaction ID : SA11C.8171**

Amount of Each Receipt this Period  
3500.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 11 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. AON CORPORATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 200 EAST RANDOLPH DRIVE

City CHICAGO	State IL	Zip Code 60601
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00211250

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

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
09		30		2016

**Transaction ID : SA11C.8173**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

**B. CONSUMER BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE, THE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1225 EYE STREET, NW, SUITE 550

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035535

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

**Transaction ID : SA11C.8191**

Amount of Each Receipt this Period  
3000.00

Memo Item  
Political Contribution

**C. CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 316 PENNSYLVANIA AVE SE  
SUITE 401

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00503680

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

**Transaction ID : SA11C.8159**

Amount of Each Receipt this Period  
3000.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<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 12 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS	State MO	Zip Code 63105
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00219642

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

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
09	/	26	/	2016

**Transaction ID : SA11C.8165**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

**B. FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 50 F STREET NW  
SUITE 900

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00193631

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

**Transaction ID : SA11C.8164**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

**C. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 25 MASSACHUSETTS AVENUE, NW  
SUITE 400

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00076810

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

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
09	/	26	/	2016

**Transaction ID : SA11C.8158**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<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 13 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. INDEPENDENT ELECTRICAL CONTRACTORS INC PAC (IEC PRIDE PAC)**

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

Mailing Address 4401 FORD AVENUE  
SUITE 1100

City ALEXANDRIA State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C** C00332031

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2016

**Transaction ID : SA11C.8169**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

**B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

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

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2016

**Transaction ID : SA11C.8157**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Political Contribution

**C. MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND**

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

Mailing Address 800 N. LINDBERGH BLVD.

City ST. LOUIS State MO Zip Code 63167

FEC ID number of contributing federal political committee. **C** C00042069

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2016

**Transaction ID : SA11C.8193**

Amount of Each Receipt this Period  
3500.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<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 14 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238725

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

**Transaction ID : SA11C.8175**

Amount of Each Receipt this Period  
3500.00

Memo Item  
Political Contributions

**B. NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1875 I STREET, NW  
SUITE 600

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303339

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

**Transaction ID : SA11C.8177**

Amount of Each Receipt this Period  
3500.00

Memo Item  
Political Contribution

**C. NATIONAL BUSINESS AVIATION ASSOCIATION INC POLITICAL ACTION COMMITTEE (NBAA-PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1200 G STREET, NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00319723

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

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
09		26		2016

**Transaction ID : SA11C.8166**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<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 15 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010082

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

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
08	/	24	/	2016

**Transaction ID : SA11C.8103**

Amount of Each Receipt this Period  
3000.00

Memo Item  
Political Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City CORDOVA	State TN	Zip Code 38088
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023028

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

**Transaction ID : SA11C.8179**

Amount of Each Receipt this Period  
2000.00

Memo Item  
Political Contribution

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NATIONAL SORGHUM PRODUCERS POLITICAL ACTION COMMITTEE

Mailing Address 4201 N INTERSTATE 27

City LUBBOCK	State TX	Zip Code 79403
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00475673

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

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
09	/	30	/	2016

**Transaction ID : SA11C.8188**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 16 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

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

Mailing Address 3 COMMERCIAL PLACE

City NORFOLK	State VA	Zip Code 23510
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009282

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

**Transaction ID : SA11C.8161**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

**B. PFIZER INC. PAC**

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

Mailing Address 235 EAST 42ND STREET

City NEW YORK	State NY	Zip Code 10017
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00016683

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

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
09		26		2016

**Transaction ID : SA11C.8163**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

**C. Political Action Committee of the AAOS**

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

Mailing Address 317 Massachusettes Ave. NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00343137

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

**Transaction ID : SA11C.8162**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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 17 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. SPRINT CORPORATION POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 6450 Sprint Parkway

City OVERLAND PARK	State KS	Zip Code 66251
FEC ID number of contributing federal political committee. <b>C</b> C00089342		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2016  
**Transaction ID : SA11C.8178**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Political Contribution

**B. TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS INC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 430 FIRST STREET SE

City WASHINGTON	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. <b>C</b> C00002881		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2016  
**Transaction ID : SA11C.8187**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Political Contribution

**C. UNITED PARCEL SERVICE INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. <b>C</b> C00064766		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2016  
**Transaction ID : SA11C.8182**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 18 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

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

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716
---------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
07	/	20	/	2016

**Transaction ID : SA11C.8079**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Political Contribution

**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  

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

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  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	91000.00

**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 19 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**MORAN VICTORY COMMITTEE**

Mailing Address **PO BOX 541**

City <b>BELLEVILLE</b>	State <b>KS</b>	Zip Code <b>66935</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C** **C00616268**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **31512.38**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	30	/	2016

**Transaction ID : SA12.8194**

Amount of Each Receipt this Period  

31512.38
----------

Memo Item  
Transfer from Affiliated Committee

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

Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
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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  

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

Amount of Each Receipt this Period  

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Memo Item

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

Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
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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  

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

Amount of Each Receipt this Period  

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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>31512.38</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>31512.38</b>

**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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot, Inc., , ,**

Mailing Address P.O. Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement Banking Fees

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 : SB21B.8151**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Apple Store**

Mailing Address 1229 Wisconsin Ave. NW

City Washington State DC Zip Code 20007

Purpose of Disbursement Cell Phone

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 : SB21B.8217**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capital Hill Club**

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Food & Beverage

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 : SB21B.8099**  
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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Capital Hill Club**

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food & Beverage

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 15 / 2016

FEC Identification Number  
**C**  
**Transaction ID : SB21B.8141**  
Amount of Each Disbursement this Period  
179.19

Memo Item

Full Name (Last, First, Middle Initial)

**B. Capital Hill Club**

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food & Beverage

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
09 / 19 / 2016

FEC Identification Number  
**C**  
**Transaction ID : SB21B.8214**  
Amount of Each Disbursement this Period  
69.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Clarke, Carlisle, , ,**

Mailing Address 118 10th. St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel Expenses

**002**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 10 / 2016

FEC Identification Number  
**C**  
**Transaction ID : SB21B.8118**  
Amount of Each Disbursement this Period  
795.55

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1044.24

**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)  
**FREE STATE PAC**

**A. Frontier Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 7001 Tower Rd.

City Denver State CO Zip Code 80249

Purpose of Disbursement Airline Flight

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.8118.1

Amount of Each Disbursement this Period: 567.20

Memo Item

**B. Marriott**

Full Name (Last, First, Middle Initial)

Mailing Address 2020 Convention Center

City Atlanta State GA Zip Code 30337

Purpose of Disbursement Hotel Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.8118.1

Amount of Each Disbursement this Period: 228.35

Memo Item

**C. Fairfield Inn**

Full Name (Last, First, Middle Initial)

Mailing Address 377 Mopar Dr.

City Hays State KS Zip Code 67601

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 25 / 2016

FEC Identification Number: C

Transaction ID : SB21B.8102

Amount of Each Disbursement this Period: 1159.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1159.20

**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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Intrust Bank**

Mailing Address 901 Vermont

City Lawrence State KS Zip Code 66044

Purpose of Disbursement  
Bank Fees

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 : SB21B.8097**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Intrust Bank**

Mailing Address 901 Vermont

City Lawrence State KS Zip Code 66044

Purpose of Disbursement  
Banking Fees

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 : SB21B.8138**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Intrust Bank**

Mailing Address 901 Vermont

City Lawrence State KS Zip Code 66044

Purpose of Disbursement  
Bank Fees

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 : SB21B.8212**  
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)  
**FREE STATE PAC**

**A. Johnson County Republican Committee**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 12446

City Overland Park State KS Zip Code 66282

Purpose of Disbursement Event Sponsorship

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.8132**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Kansans for Life**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 783285

City Wichita State KS Zip Code 67278

Purpose of Disbursement Event Sponsorship

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.8205**

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Moran, Jerry, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2400 Sumac Dr.

City Manhattan State KS Zip Code 66502

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.8081**

Amount of Each Disbursement this Period: 45.27

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1545.27

**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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial) <b>A. Moran, Jerry, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2016
Mailing Address 2400 Sumac Dr.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8085</b> Amount of Each Disbursement this Period [REDACTED] 400.00
City Manhattan	State KS	Zip Code 66502
Purpose of Disbursement Travel Expenses		Category/ Type 002
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. American Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2016
Mailing Address P.O. Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8085.c</b> Amount of Each Disbursement this Period [REDACTED] 400.00
City DFW Airport	State TX	Zip Code 75261
Purpose of Disbursement Airline Costs		Category/ Type 002
Candidate Name		Memo Item <input checked="" 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. Moran, Jerry, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2016
Mailing Address 2400 Sumac Dr.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8199</b> Amount of Each Disbursement this Period [REDACTED] 631.89
City Manhattan	State KS	Zip Code 66502
Purpose of Disbursement Travel Expenses		Category/ Type 002
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: _____	

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

[REDACTED] 1031.89

**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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address P.O. Box 619616

City DFW Airport State TX Zip Code 75261

Purpose of Disbursement  
Airline Travel

001  
 002  
Category/  
Type

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  
09 / 24 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.8199.1  
Amount of Each Disbursement this Period  
446.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Resturant Associates**

Mailing Address 2nd. & D Streets NE

City Washington State DC Zip Code 20515

Purpose of Disbursement  
Food & Beverage

001  
 002  
 003  
Category/  
Type

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  
07 / 22 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.8089  
Amount of Each Disbursement this Period  
100.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Resturant Associates**

Mailing Address 2nd. & D Streets NE

City Washington State DC Zip Code 20515

Purpose of Disbursement  
Food & Beverage

001  
 002  
 003  
Category/  
Type

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  
08 / 10 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.8113  
Amount of Each Disbursement this Period  
375.00

Memo Item

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

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

475.00

**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"/> 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)  
**FREE STATE PAC**

**A. Senate Dining Room**

Full Name (Last, First, Middle Initial)

Mailing Address **Senate Building**

City **Washington** State **DC** Zip Code **20001**

Purpose of Disbursement **Food & Beverage** Category/Type **003**

Candidate Name

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

State: District:

Date of Disbursement: **07 / 01 / 2016**

FEC Identification Number: **C**  
**Transaction ID : SB21B.8092**  
 Amount of Each Disbursement this Period: **151.00**

Memo Item

**B. Senate Dining Room**

Full Name (Last, First, Middle Initial)

Mailing Address **Senate Building**

City **Washington** State **DC** Zip Code **20001**

Purpose of Disbursement **Food & Beverage** Category/Type **003**

Candidate Name

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

State: District:

Date of Disbursement: **07 / 11 / 2016**

FEC Identification Number: **C**  
**Transaction ID : SB21B.8096**  
 Amount of Each Disbursement this Period: **100.00**

Memo Item

**C. Senate Dining Room**

Full Name (Last, First, Middle Initial)

Mailing Address **Senate Building**

City **Washington** State **DC** Zip Code **20001**

Purpose of Disbursement **Food & Beverage** Category/Type **003**

Candidate Name

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

State: District:

Date of Disbursement: **09 / 11 / 2016**

FEC Identification Number: **C**  
**Transaction ID : SB21B.8213**  
 Amount of Each Disbursement this Period: **125.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **376.00**

**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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Shawnee County Republican Party**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2016

Mailing Address 2948 SW Staffordshire Rd.

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8206**  
 Amount of Each Disbursement this Period  
 [ ] 400.00

City Topeka State KS Zip Code 66614

Purpose of Disbursement Event Sponsorship  
 Candidate Name  
 Category/Type **007**

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Kam Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2016

Mailing Address 2330W. 53rd Terrace

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8114**  
 Amount of Each Disbursement this Period  
 [ ] 4464.00

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Consulting Fees  
 Candidate Name  
 Category/Type **003**

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Tuesday Solutions**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		05		2016

Mailing Address 1413 West Virginia Ave

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8080**  
 Amount of Each Disbursement this Period  
 [ ] 3500.00

City Washington State DC Zip Code 20002

Purpose of Disbursement Fundraising Consulting Fees  
 Candidate Name  
 Category/Type **003**

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

Memo Item

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

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

8364.00
[ ]

**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"/> 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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial)  
**A. Tuesday Solutions**

Mailing Address 1413 West Virginia Ave

City Washington State DC Zip Code 20002

Purpose of Disbursement Fundraising Consulting Fees  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: **003**

Date of Disbursement: 08 / 01 / 2016

FEC Identification Number: **C**

Transaction ID : **SB21B.8111**

Amount of Each Disbursement this Period: 3500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Tuesday Solutions**

Mailing Address 1413 West Virginia Ave

City Washington State DC Zip Code 20002

Purpose of Disbursement Fundraising Consulting Fees  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: **003**

Date of Disbursement: 08 / 22 / 2016

FEC Identification Number: **C**

Transaction ID : **SB21B.8129**

Amount of Each Disbursement this Period: 5737.50

Memo Item

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

Mailing Address 1413 West Virginia Ave

City Washington State DC Zip Code 20002

Purpose of Disbursement Fundrasing Consulting Fees  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: **003**

Date of Disbursement: 09 / 01 / 2016

FEC Identification Number: **C**

Transaction ID : **SB21B.8195**

Amount of Each Disbursement this Period: 3544.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12781.50

**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)  
**FREE STATE PAC**

**A. Verizon Wireless**

Full Name (Last, First, Middle Initial)

Mailing Address 40 Massachusetts Ave

City Washington State DC Zip Code 20002

Purpose of Disbursement Cell Phone expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.8095**

Amount of Each Disbursement this Period: 197.68

Memo Item

**B. Verizon Wireless**

Full Name (Last, First, Middle Initial)

Mailing Address 40 Massachusetts Ave

City Washington State DC Zip Code 20002

Purpose of Disbursement Cell phone charges

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.8137**

Amount of Each Disbursement this Period: 197.72

Memo Item

**C. Verizon Wireless**

Full Name (Last, First, Middle Initial)

Mailing Address 40 Massachusetts Ave

City Washington State DC Zip Code 20002

Purpose of Disbursement Cell Phone Charges

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.8209**

Amount of Each Disbursement this Period: 197.72

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	593.12
<b>TOTAL</b> This Period (last page this line number only).....▶	28969.74

**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"/> 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)  
**FREE STATE PAC**

Full Name (Last, First, Middle Initial) <b>A. BOOZMAN, JOHN, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2016
Mailing Address PO BOX 671		FEC Identification Number C S0AR00150 <b>Transaction ID : SB23.8082</b>
City ROGERS	State AR	Zip Code 72757
Purpose of Disbursement Political Contribution		011 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District: 00	

Full Name (Last, First, Middle Initial) <b>B. MCCAIN, JOHN S, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2016
Mailing Address 228 SOUTH WASHINGTON ST STE 115		FEC Identification Number C S6AZ00019 <b>Transaction ID : SB23.8130</b>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Political Contribution		011 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ	District: 00	

Full Name (Last, First, Middle Initial) <b>C. RUBIO, MARCO, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2016
Mailing Address PO BOX 661537		FEC Identification Number C S0FL00338 <b>Transaction ID : SB23.8083</b>
City MIAMI	State FL	Zip Code 33266
Purpose of Disbursement Political Contribution		011 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**FREE STATE PAC**

**A. YODER, KEVIN W, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 26742

City OVERLAND PARK State KS Zip Code 66225

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: KS District: 03

Date of Disbursement: 09 / 10 / 2016

FEC Identification Number: C HOKS03137

Transaction ID : SB23.8196

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. YOUNG, TODD CHRISTOPHER, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1053

City BLOOMINGTON State IN Zip Code 47402

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IN District: 00

Date of Disbursement: 08 / 13 / 2016

FEC Identification Number: C S6IN00191

Transaction ID : SB23.8116

Amount of Each Disbursement this Period: 5000.00

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25000.00



**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"/> 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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. Huges, Dorothy, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 6009 W. 76th. Terrace

City Prairie Village State KS Zip Code 66208

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2016

FEC Identification Number: C

Transaction ID : SB29.8197

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. New Hampshire GOP**

Full Name (Last, First, Middle Initial)

Mailing Address 10 Water St.

City Concord State NH Zip Code 03301

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2016

FEC Identification Number: C

Transaction ID : SB29.8122

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Republican Party of Montgomery Cjounty**

Full Name (Last, First, Middle Initial)

Mailing Address 406 N Catherines St.

City Cherryvale State KS Zip Code 67335

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB29.8087

Amount of Each Disbursement this Period: 350.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5850.00

**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

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NAME OF COMMITTEE (In Full)  
**FREE STATE PAC**

**A. Sedgwick County Republican Party**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8225 E. 35th. St. N.

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

City Wichita State KS Zip Code 67226

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C
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Candidate Name

011
Category/ Type

**Transaction ID : SB29.8126**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

250.00
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Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C
---

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C
---

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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Memo Item

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

250.00
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**TOTAL** This Period (last page this line number only).....▶

6100.00
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