

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 Jacob Turk for Congress 2014

ADDRESS (number and street) 417 SE Annette Street Lees Summit MO 64063 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00563668 3. IS THIS REPORT NEW (N) OR AMENDED (A) MO 05

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 04 / 01 / 2014 through M M / D D / Y Y Y Y 06 / 30 / 2014

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 Pamela Daiprai

Signature of Treasurer Pamela Daiprai [Electronically Filed] Date M M / D D / Y Y Y Y 10 / 15 / 2014

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

Write or Type Committee Name

**Jacob Turk for Congress 2014**

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

	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))....	38108.65	38108.65
(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)).....	38108.65	38108.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	17449.26	17449.26
(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)).....	17449.26	17449.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20659.39	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**Jacob Turk for Congress 2014**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24608.36	24608.36
(ii) Unitemized.....	13475.29	13475.29
(iii) TOTAL of contributions from individuals ▶	38083.65	38083.65
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	25.00	25.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	38108.65	38108.65
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	38108.65	38108.65

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17449.26	17449.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	17449.26	17449.26

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	38108.65
25. SUBTOTAL (add Line 23 and Line 24).....	38108.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17449.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20659.39

**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 39
	<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)  
**Jacob Turk for Congress 2014**

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

Mailing Address 4403 NE 57th Ter

City State Zip Code  
Kansas City MO 64119-4680

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

Name of Employer Occupation  
Vance Brothers, Inc. Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : A0F60980E2F4D4116BBC**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronda Kirby**

Mailing Address 3318 Denver Avenue

City State Zip Code  
Kansas City MO 64128-2325

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
260.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : A9DA4DEFE083F4DA0AA4**

Amount of Each Receipt this Period  
260.00

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

Mailing Address 15801 E 43rd Street S

City State Zip Code  
Independence MO 64055-5042

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : A48FE914191DF4B7CA98**

Amount of Each Receipt this Period  
200.00

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

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

1460.00

**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 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Seidelman**

Mailing Address 821 Fuller Avenue

City State Zip Code  
Kansas City MO 64125-1542

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : A3687F94005BF4F74A88**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert M Gay**

Mailing Address 1111 W 41st Terrace

City State Zip Code  
Kansas City MO 64111-4013

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : A9F87ED404582472F899**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1307 N Kurzweil Road

City State Zip Code  
Raymore MO 64083-9538

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : A75308565C6E240E69DA**

Amount of Each Receipt this Period  
500.00

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

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

800.00

**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 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Seidelman**

Mailing Address 821 Fuller Avenue

City Kansas City State MO Zip Code 64125-1542

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : A343ED0B468D74C138FA**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ronald E Hill**

Mailing Address 221 NW Locust Street

City Lees Summit State MO Zip Code 64064-1453

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

Name of Employer Hemco Corporation Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : A7ABE870383994598A8C**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 1608 SW Jeffrey Court

City Lees Summit State MO Zip Code 64081-4113

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : A038C299D15B8490894C**

Amount of Each Receipt this Period  
**500.00**

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

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

**3100.00**

**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 39
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Samuel Gill</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 12215 Locust Street		<b>Transaction ID : AF1C473AD3F06482FBBD</b>	
City Kansas City	State MO	Zip Code 64145-1781	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>B. Doris J. Strickler</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 1004 Francis Street		<b>Transaction ID : A9B32034F9C7E4118900</b>	
City Lexington	State MO	Zip Code 64067-1440	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Lafayette County	Occupation Committeewoman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. John Brandt</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2014	
Mailing Address 2129 12th Avenue E		<b>Transaction ID : AAE48E941D61045A4808</b>	
City Hibbing	State MN	Zip Code 55746-1836	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	760.00
<b>TOTAL</b> This Period (last page this line number only).....	760.00



**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 39			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Todd Jones**

Mailing Address 1612 SW Summit Hill Court

City Lees Summit State MO Zip Code 64081-3267

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

Name of Employer The Chiro & Natural Med Ctr Occupation Chiropractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : AF67AAB36FD484D0483D**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Gary Jones**

Mailing Address 17220 E 44th Terrace Ct S

City Independence State MO Zip Code 64055-5407

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

Name of Employer Tax Defenders, LLC Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : A1230B05C51FF414EA27**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 12342 Creekhaven Drive

City Saint Louis State MO Zip Code 63131-3825

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : A12967289106A4EABB9F**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

**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 10 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**William Moehle**

Mailing Address 613 NW Alexa Lane

City Lees Summit State MO Zip Code 64081-4075

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : A5AC0C2B326AC4FAEA0A**

Amount of Each Receipt this Period  
 700.00

In-kind: In kind office

**B.** Full Name (Last, First, Middle Initial)  
**Mark Smith**

Mailing Address PO Box 345

City Lone Jack State MO Zip Code 64070-0345

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

Name of Employer Vance Brothers, Inc. Occupation Salesman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 11 / 2014

**Transaction ID : A53E3F58013504FEA81F**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address PO Box 8649

City Independence State MO Zip Code 64054-0649

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : AE72A47269BDA4AC6B5A**

Amount of Each Receipt this Period  
 200.00

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

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

1100.00

**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 39
	<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)  
**Jacob Turk for Congress 2014**

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

Mailing Address 1160 SW Kimstin Court

City State Zip Code  
Blue Springs MO 64015-4574

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

Name of Employer Occupation  
Self Employed Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2014

**Transaction ID : A781B182B7243477D94A**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**William Lewis**

Mailing Address 208 NW Hillcrest Lane

City State Zip Code  
Lees Summit MO 64063-2103

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

Name of Employer Occupation  
Lewis Law Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : A990692E01A9D40CE84D**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 821 Fuller Avenue

City State Zip Code  
Kansas City MO 64125-1542

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : A807A9355FE8548C6B74**

Amount of Each Receipt this Period  
50.00

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

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

1050.00

**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 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Ronda Kirby**

Mailing Address 3318 Denver Avenue

City Kansas City State MO Zip Code 64128-2325

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **360.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : A9C3017D1967B43F79A6**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Allen Lefko**

Mailing Address PO Box 285

City Grain Valley State MO Zip Code 64029-0285

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

Name of Employer Bank of Grain Valley Occupation Chairman of the Board

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : A232971465481448C969**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jay Rapley M.D.**

Mailing Address 404 SE Snaffle Bit Dr

City Lees Summit State MO Zip Code 64082-8229

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

Name of Employer Rockhill Orthopaedics Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : AB911865DAE9348BA823**

Amount of Each Receipt this Period  
**2600.00**

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

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

**2950.00**

**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 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Arlin Dale McNeall**

Mailing Address 425 SW Madison St

City Lees Summit State MO Zip Code 64063-3937

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : A0272EF968558471E9FA**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Falkenberg**

Mailing Address 84 L Street

City Lake Lotawana State MO Zip Code 64086-9440

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

Name of Employer Plumbing Supply Company Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : ABC05FC94E5A647AD9F7**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 24911 Timberlake Drive

City Greenwood State MO Zip Code 64034-9787

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

Name of Employer Missouri Right to Life Occupation office manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : A214088D695694D35924**

Amount of Each Receipt this Period  
 250.00

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

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

1350.00

**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 14 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Doug Herriott**

Mailing Address 980 NW High Point Drive

City Lees Summit State MO Zip Code 64081-1986

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

Name of Employer Self Occupation Optometrist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : AB7538C39DD144E89B99**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Judy Budde**

Mailing Address 11712 Glen Arbor Terrace

City Kansas City State MO Zip Code 64114-5559

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : ACD90A0C2AEDD499DB2B**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 9600 E State Route 150

City Kansas City State MO Zip Code 64149-1103

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

Name of Employer MAWD Pathology Occupation Pathologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : A7DFD6C9BD4CD4C62916**

Amount of Each Receipt this Period  
 500.00

**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 15 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**John Horner**

Mailing Address 313 SW Marion Lane

City Lees Summit State MO Zip Code 64081-2315

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : A751C7A14C13D447192B**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**John W Totzke**

Mailing Address 1117 SE 3rd Terrace

City Lees Summit State MO Zip Code 64063-3275

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

Name of Employer DST Occupation Database Admin.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : A09228DC9C9F4458290C**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 969 Gregory St

City Peculiar State MO Zip Code 64078-9556

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : A696357DE6E594657B06**

Amount of Each Receipt this Period  
 200.00

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

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

700.00

**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 16 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Samual Gill**

Mailing Address 12215 Locust Street

City State Zip Code  
Kansas City MO 64145-1781

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : AEEC188712B6C493990D**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 821 Fuller Avenue

City State Zip Code  
Kansas City MO 64125-1542

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : A5494593E7EE147269A7**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 586 N Winnebago Drive

City State Zip Code  
Lake Winnebago MO 64034-9400

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

Name of Employer Occupation  
Absolute Construction Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : ACE779643B3404C0C860**

Amount of Each Receipt this Period  
200.00

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

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

350.00



**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 17 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Danny Miller**

Mailing Address 31105 E 155th St

City Pleasant Hill State MO Zip Code 64080-8682

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : A33D15A12A6EB420D8C2**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark Smith**

Mailing Address PO Box 345

City Lone Jack State MO Zip Code 64070-0345

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

Name of Employer Vance Brothers, Inc. Occupation Salesman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : A3070EE080FA4454F847**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 613 NW Alexa Lane

City Lees Summit State MO Zip Code 64081-4075

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : A2A9311013D5C4C1B892**

Amount of Each Receipt this Period  
 700.00  
 In-kind:Office space

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

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

1200.00

**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 18 OF 39
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Jeff Vance</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2014	
Mailing Address 11800 Military Club Rd		<b>Transaction ID : A067BA1CD2EA14DA09A3</b>	
City Kansas City	State MO	Zip Code 64138-5171	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Vance Brothers, Inc.	Occupation Manger		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. James A Darrah</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 5704 NE Holiday Dr		<b>Transaction ID : AD03719E9E2A140CCBD8</b>	
City Lees Summit	State MO	Zip Code 64064-2554	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		

Full Name (Last, First, Middle Initial) <b>C. Pamela Daiprai</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2014	
Mailing Address 1608 SW Jeffrey Court		<b>Transaction ID : A6203C374FDD448A9BE2</b>	
City Lees Summit	State MO	Zip Code 64081-4113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.36 In-kind:In kind for storage tubs	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 511.36		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1211.36
<b>TOTAL</b> This Period (last page this line number only).....	1211.36

**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 19 OF 39
	<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)  
**Jacob Turk for Congress 2014**

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

Mailing Address 400 SW Walnut Street

City Lees Summit State MO Zip Code 64063-3970

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

Name of Employer Miller & Newberg, Inc Occupation Actuary

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : A08F7B5F434254E7D97A**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 821 Fuller Avenue

City Kansas City State MO Zip Code 64125-1542

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **508.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : AAF4436D9540F43C5A12**

Amount of Each Receipt this Period  
**58.00**

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

Mailing Address 15170 Lakeport Ln

City Smithville State MO Zip Code 64089-9102

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

Name of Employer Heartland Tan Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : A7EC962F4823E4C0AB33**

Amount of Each Receipt this Period  
**200.00**

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

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

**358.00**

**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 20 OF 39
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>Sue Hill</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 221 NW Locust Street		<b>Transaction ID : AE0DB1D16102543E9A79</b>
City Lees Summit	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hill Real Estate Dev Co LLC	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Ralph Maier</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 4300 S Huntington Way		<b>Transaction ID : AA6B4803468874118A88</b>
City Independence	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Alan Otto</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 8521 E 73rd Terrace		<b>Transaction ID : A34A99E6BF219455188D</b>
City Kansas City	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Otto Service	Occupation Owner - Car Repair	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<b>TOTAL</b> 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 21 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A. Paul Connors**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1901 SW US Highway 40  
Ste C  
City Blue Springs State MO Zip Code 64015-4631

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

Name of Employer PCA Services Inc. Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : AF5C0CB0E11244531AA6**

Amount of Each Receipt this Period  
1000.00

**B. Charles Burks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 17101 E 28th Ter S  
City Independence State MO Zip Code 64057-1271

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

Name of Employer Exit Realty Occupation Broker Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : A9DCA1BBD9E3B48D98E9**

Amount of Each Receipt this Period  
250.00

**C. Ronda Kirby**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3318 Denver Avenue  
City Kansas City State MO Zip Code 64128-2325

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
418.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : A8B969A5130844AA6AE6**

Amount of Each Receipt this Period  
58.00

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

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

1308.00

**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 22 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Carole Maltby**

Mailing Address 1400 NE Woods Chapel Road

City Lees Summit State MO Zip Code 64064-1711

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

Name of Employer Self Occupation DVM

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : ACE731698AD944AB4968**

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Michael Caughron**

Mailing Address 9600 E State Route 150

City Kansas City State MO Zip Code 64149-1103

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

Name of Employer MAWD Pathology Occupation Pathologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : A0C773B4E520C4C358E9**

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 9600 E State Route 150

City Kansas City State MO Zip Code 64149-1103

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

Name of Employer MAWD Pathology Occupation Pathologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : A71406A483C624B61923**

Amount of Each Receipt this Period  
 158.00

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

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

378.00

**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 23 OF 39
	<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)  
**Jacob Turk for Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Arlin Dale McNeall**

Mailing Address 425 SW Madison St

City Lees Summit State MO Zip Code 64063-3937

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : AD5CE3657679E4BCBA80**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Louis Reale**

Mailing Address 9931 N Charlotte Street

City Kansas City State MO Zip Code 64155-2024

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : AAAC42C3069514AC889E**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1608 SW Jeffrey Court

City Lees Summit State MO Zip Code 64081-4113

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **569.36**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : A77DA7E986AB9433692C**

Amount of Each Receipt this Period  
**58.00**

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

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

**183.00**

**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 24 OF 39
	<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)  
**Jacob Turk for Congress 2014**

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

Mailing Address 910 S Prairie Lane

City Raymore State MO Zip Code 64083-9425

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : ADD291F7A67C8402DA1D**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 821 Fuller Avenue

City Kansas City State MO Zip Code 64125-1542

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : A860AEA70A8E44926851**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 21405 W 73rd Terrace

City Shawnee State KS Zip Code 66218-9357

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

Name of Employer Hodgdon Powder Company Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : A7DBEA1F945DA4E74BC1**

Amount of Each Receipt this Period  
 2600.00

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

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

2900.00

24608.36



**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 25 OF 39		
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 686.00 <b>Transaction ID : BF2315CD0F62541C3B9A</b>
City Lees Summit	State MO Zip Code 64063-1400	
Purpose of Disbursement Postage	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 6391 Sprint Parkway		Amount of Each Disbursement this Period 46.65 <b>Transaction ID : BC634BC44E05D4465A7E</b>
City Overland Park	State KS Zip Code 66251-6100	
Purpose of Disbursement	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sprint</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 6391 Sprint Parkway		Amount of Each Disbursement this Period 77.00 <b>Transaction ID : B7E107B9350DC45548E0</b>
City Overland Park	State KS Zip Code 66251-6100	
Purpose of Disbursement cell phone service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	809.65
<b>TOTAL</b> 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 26 OF 39			
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. William Moehle</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 613 NW Alexa Lane		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : B5AC0C2B326AC4FAEA0A</b>
City Lees Summit	State MO Zip Code 64081-4075	
Purpose of Disbursement In-kind:In kind office	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lee's Landing, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 410C SE 3rd St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : B428CAB0105A74EB5849</b>
City Lees Summit	State MO Zip Code 64063-2800	
Purpose of Disbursement HQ Space Damage Deposit	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 147.00 <b>Transaction ID : B6C7C55D697FE413E99A</b>
City Lees Summit	State MO Zip Code 64063-1400	
Purpose of Disbursement postage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1347.00
<b>TOTAL</b> 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 27 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : B60A8BEC8A1E142FF96C</b>
City Lees Summit	State MO	
Zip Code 64063-1400	Purpose of Disbursement postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 110.00 <b>Transaction ID : B441FA5427CCA4E56AEE</b>
City Lees Summit	State MO	
Zip Code 64063-1400	Purpose of Disbursement postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 9.80 <b>Transaction ID : B44BDF7371FAF4F69A72</b>
City Lees Summit	State MO	
Zip Code 64063-1400	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	168.80
<b>TOTAL</b> 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 28 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Lee's Summit Chamber of Commerce</b>			Date of Disbursement MM / DD / YYYY 05 / 23 / 2014	
Mailing Address 220 SE Main Street			Amount of Each Disbursement this Period 330.00	
City Lees Summit	State MO	Zip Code 64063-2332	Transaction ID : <b>B31C5B35684DD422C944</b>	
Purpose of Disbursement		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>			Date of Disbursement MM / DD / YYYY 05 / 28 / 2014	
Mailing Address 156 University Avenue			Amount of Each Disbursement this Period 251.61	
City Palo Alto	State CA	Zip Code 94301-1688	Transaction ID : <b>B81BCBDB92B6E4DF19CC</b>	
Purpose of Disbursement Facebook Advertising		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Grandview Chamber Of Commerce</b>			Date of Disbursement MM / DD / YYYY 05 / 29 / 2014	
Mailing Address 12500 S US Highway 71			Amount of Each Disbursement this Period 200.00	
City Grandview	State MO	Zip Code 64030-1734	Transaction ID : <b>BC9525672F72748DE9D1</b>	
Purpose of Disbursement Chamber fee		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	781.61
<b>TOTAL</b> 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 29 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. CBS Outdoor</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address 2459 Summit Street		Amount of Each Disbursement this Period 1870.00 <b>Transaction ID : B92761699BE104EF3AB7</b>
City Kansas City	State MO	
Zip Code 64108-2424	Purpose of Disbursement outdoor advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Grandview Chamber Of Commerce</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address 12500 S US Highway 71		Amount of Each Disbursement this Period 36.00 <b>Transaction ID : BECD13F3C9BBC48F4B69</b>
City Grandview	State MO	
Zip Code 64030-1734	Purpose of Disbursement Meal	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Grandview Chamber Of Commerce</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address 12500 S US Highway 71		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : B6BDF08B384644FD2B9E</b>
City Grandview	State MO	
Zip Code 64030-1734	Purpose of Disbursement Golf Sponsorship	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2006.00
<b>TOTAL</b> 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 30 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 1.05 <b>Transaction ID : B4F1812AADD8942A7923</b>
City Lees Summit	State MO Zip Code 64063-1400	
Purpose of Disbursement Postage	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1000 NE Sam Walton Lane		Amount of Each Disbursement this Period 23.11 <b>Transaction ID : B1E421C05B1BD4775AB2</b>
City Lees Summit	State MO Zip Code 64086-8426	
Purpose of Disbursement Supplies for HQ	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address 156 University Avenue		Amount of Each Disbursement this Period 22.79 <b>Transaction ID : B9BB507881E7B4A5BBBE</b>
City Palo Alto	State CA Zip Code 94301-1688	
Purpose of Disbursement Facebook advertising	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	46.95
<b>TOTAL</b> 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 31 OF 39		
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Amazon.com</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1516 2nd Avenue		Amount of Each Disbursement this Period 122.75 <b>Transaction ID : BEFB6690A7BE7436FAE8</b>
City Seattle	State WA	
Zip Code 98101-1543	Purpose of Disbursement Campagin Computer Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CBS Outdoor</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 2459 Summit Street		Amount of Each Disbursement this Period 495.00 <b>Transaction ID : BA7F6B0C5BDA341158EB</b>
City Kansas City	State MO	
Zip Code 64108-2424	Purpose of Disbursement outdoor advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Amazon.com</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 1516 2nd Avenue		Amount of Each Disbursement this Period 81.09 <b>Transaction ID : B3606268AC9D64D7E88B</b>
City Seattle	State WA	
Zip Code 98101-1543	Purpose of Disbursement Computer supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	698.84
<b>TOTAL</b> 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 32 OF 39		
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 1000 NE Sam Walton Lane		Amount of Each Disbursement this Period 22.68 <b>Transaction ID : BB3F22BDAA8CB40E9BD4</b>
City Lees Summit	State MO	
Zip Code 64086-8426	Purpose of Disbursement Campaign Booth Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Independence Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 210 W Truman Road		Amount of Each Disbursement this Period 7.65 <b>Transaction ID : BCD45AE2CA95247258A6</b>
City Independence	State MO	
Zip Code 64050-2753	Purpose of Disbursement Chamber fee	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Independence Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 210 W Truman Road		Amount of Each Disbursement this Period 737.35 <b>Transaction ID : B2E3B9908FF414901913</b>
City Independence	State MO	
Zip Code 64050-2753	Purpose of Disbursement Chamber fee	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	767.68
<b>TOTAL</b> 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 33 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. William Moehle</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 613 NW Alexa Lane		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : B2A9311013D5C4C1B892</b>
City Lees Summit	State MO Zip Code 64081-4075	
Purpose of Disbursement In-kind: Office space		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Security One Security Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 200 NE Douglas Street		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : B2425BF5D7A1D43BBBE6</b>
City Lees Summit	State MO Zip Code 64063-2040	
Purpose of Disbursement Security		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hispanic Chamber of Commerce of Greater Kansas City</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 2001 Grand Boulevard		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : BCFAE8DB490654ACA915</b>
City Kansas City	State MO Zip Code 64108-1804	
Purpose of Disbursement Chamber fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1450.00
<b>TOTAL</b> 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 34 OF 39			
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Alpha Graphics</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 1150 Grand Blvd			Amount of Each Disbursement this Period 1428.17	
City Kansas City	State MO	Zip Code 64106	Transaction ID : <b>B0B4B43C68522404BB6D</b>	
Purpose of Disbursement Birthday Invitations Fundraiser		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Hispanic Chamber of Commerce of Greater Kansas City</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 2001 Grand Boulevard			Amount of Each Disbursement this Period 350.00	
City Kansas City	State MO	Zip Code 64108-1804	Transaction ID : <b>B4CADBB82F02745F4A4C</b>	
Purpose of Disbursement Fiesta booth		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014	
Mailing Address 210 SW Market Street			Amount of Each Disbursement this Period 17.49	
City Lees Summit	State MO	Zip Code 64063-1400	Transaction ID : <b>BCFE7EC6CC15E4A3BADD</b>	
Purpose of Disbursement Postage		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1795.66
<b>TOTAL</b> 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 35 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Pamela Daiprai</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 1608 SW Jeffrey Court		Amount of Each Disbursement this Period 11.36 <b>Transaction ID : B6203C374FDD448A9BE2</b>
City Lees Summit	State MO Zip Code 64081-4113	
Purpose of Disbursement In-kind: In kind for storage tubs		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. South Kansas City Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 406 E Bannister Road Suite F		Amount of Each Disbursement this Period 210.00 <b>Transaction ID : B29A72B44E0B140E9BC0</b>
City Kansas City	State MO Zip Code 64131-3028	
Purpose of Disbursement Chamber fee		Category/Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : BB40DB83B8222431893D</b>
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Campaign software		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	721.36
<b>TOTAL</b> 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 36 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Blue Springs Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 1000 W Main Street		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : BA14C82C8B70043F18BE</b>
City Blue Springs	State MO Zip Code 64015-3610	
Purpose of Disbursement Chamber fee	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Blue Springs Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 1000 W Main Street		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : B858CE84D60E14EC2907</b>
City Blue Springs	State MO Zip Code 64015-3610	
Purpose of Disbursement Meal	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Lee's Summit Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 220 SE Main Street		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : B731040E969C24A91871</b>
City Lees Summit	State MO Zip Code 64063-2332	
Purpose of Disbursement Meal	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	270.00
<b>TOTAL</b> 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 37 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 834.85 <b>Transaction ID : B7E07ACBE79B74F459EE</b>
City Lees Summit	State MO Zip Code 64063-1400	
Purpose of Disbursement Postage	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lee's Summit Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 220 SE Main Street		Amount of Each Disbursement this Period 335.00 <b>Transaction ID : B5CE3FC0AA7D04DE08A0</b>
City Lees Summit	State MO Zip Code 64063-2332	
Purpose of Disbursement Chamber Fee	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 9.80 <b>Transaction ID : BA58A941D59F24130AC4</b>
City Lees Summit	State MO Zip Code 64063-1400	
Purpose of Disbursement Postage	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1179.65
<b>TOTAL</b> 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 38 OF 39		
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 210 SW Market Street		Amount of Each Disbursement this Period 9.80 <b>Transaction ID : BA5EF32291DE44343AF4</b>
City Lees Summit	State MO Zip Code 64063-1400	
Purpose of Disbursement Postage	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Grandview Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 12500 S US Highway 71		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : B14DE5CB84A354DBC9A2</b>
City Grandview	State MO Zip Code 64030-1734	
Purpose of Disbursement	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 8300 NE Underground Drive Pillar 2		Amount of Each Disbursement this Period 736.85 <b>Transaction ID : B47F8B5FD3760492F9AA</b>
City Kansas City	State MO Zip Code 64144-0001	
Purpose of Disbursement Postage	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	766.65
<b>TOTAL</b> 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 39 OF 39	
	<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)  
**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Grandview Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2014</b>
Mailing Address <b>12500 S US Highway 71</b>		Amount of Each Disbursement this Period <b>20.00</b> <b>Transaction ID : B743BEB2B485D4D60A09</b>
City <b>Grandview</b>	State <b>MO</b>	
Zip Code <b>64030-1734</b>	Purpose of Disbursement <b>Meal</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2014</b>
Mailing Address <b>8300 NE Underground Drive Pillar 2</b>		Amount of Each Disbursement this Period <b>98.00</b> <b>Transaction ID : B18A99DF70C9B4082BDF</b>
City <b>Kansas City</b>	State <b>MO</b>	
Zip Code <b>64144-0001</b>	Purpose of Disbursement <b>Postage</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>c. Piryx Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2014</b>
Mailing Address <b>144 2nd Street Floor 1</b>		Amount of Each Disbursement this Period <b>257.86</b> <b>Transaction ID : BCF8CA869C62B43FC855</b>
City <b>San Francisco</b>	State <b>CA</b>	
Zip Code <b>94105-3718</b>	Purpose of Disbursement <b>Credit Card Processing Fee</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>375.86</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>13185.71</b>