SECRETARY OF THE SENATE
09 OCT 20 AM 11:46
Office Use Only

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines.

PAT ROBERTS FOR U. S. SENATE, INC.

PO BOX 433

ADDRESS (number and street) ▼

☐ Check if different than previously reported. (ACC)

GREAT BEND | KS | 67530 -

2. FEC IDENTIFICATION NUMBER ▼ C C00128876

CITY ▲ | STATE ▲ | ZIP CODE ▲

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

STATE ▼ DISTRICT: KS

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) 12-Day PRE- Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(b) 30-Day Post- Election Report for the:

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY 0 in the State of

5. Covering Period 07 / 01 / 2009 through 09 / 30 / 2009

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 RICHARD BALL Treasurer

Signature of Treasurer Richard A. Ball Date 10 / 05 / 2009

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

Office Use Only								

FEC FORM 3 (Revised 02/2003)

29020421117

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

PAT ROBERTS FOR U. S. SENATE, INC.

Report Covering the Period: From: M 07 / D 01 / Y 2009 To: M 09 / D 30 / Y 2009

	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)) ...	47035.00	110695.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	47035.00	110345.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	59199.46	482709.71
(b) Total Offsets to Operating Expenditures (from Line 14)	3538.78	15344.51
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	55660.68	467365.20
8. Cash on Hand at Close of Reporting Period (from Line 27)	82256.24	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	11155.50	

For further information contact:

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

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

29020421118

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

PAT ROBERTS FOR U. S. SENATE, INC.

Report Covering the Period: From: M M 07 / D D 01 / Y Y Y Y 2009 To: M M 09 / D D 30 / Y Y Y Y 2009

I. RECEIPTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	16050.00	
(ii) Unitemized	1485.00	
(iii) TOTAL of contributions from individuals ▶	17535.00	45395.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	29500.00	65300.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	47035.00	110695.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	3538.78	15344.51
15. OTHER RECEIPTS (Dividends, Interest, etc.)	21.34	2322.02
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	50595.12	128361.53

29020421119

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

II. DISBURSEMENTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	59199.46	482709.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	10000.00
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 (such as PACs)	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	350.00
(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	350.00
21. OTHER DISBURSEMENTS	0.00	1200.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21)	59199.46	494259.71

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	90860.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	50595.12
25. SUBTOTAL (add Line 23 and Line 24)	141455.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	59199.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	82256.24

29020421120

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 1

FOR LINE NUMBER: (check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wilson Grand Communications

Mailing Address
429 North St. Asaph Street

City: Alexandria | State: VA | Zip Code: 22314

Nature of Debt (Purpose):
Advertising-WGC-515B Date 1/27/09

Outstanding Balance Beginning This Period: 25000.00

Amount Incurred This Period: 0.00

Payment This Period: 25000.00

Outstanding Balance at Close of This Period: 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wilson Grand Communications

Mailing Address
429 North St. Asaph Street

City: Alexandria | State: VA | Zip Code: 22314

Nature of Debt (Purpose):
Invoices 417,434A Received 08/25/09-Adv

Outstanding Balance Beginning This Period: 0.00

Amount Incurred This Period: 11155.50

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 11155.50

1) **SUBTOTALS** This Period This Page (optional) ▶	11155.50
2) **TOTALS** This Period (last page this line number only) ▶	11155.50
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶	11155.50

29020421121

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)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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

NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Adams, Mary
Mailing Address: 7223 Mission Rd, Apt 110
City: Prairie Village State: KS Zip Code: 66208
FEC ID number of contributing federal political committee: C
Name of Employer: None Occupation: Retired
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 08 / 25 / 2009
Transaction ID: C-9-03sw05
Amount of Each Receipt this Period: 1000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Agnello, Joseph Michael
Mailing Address: 845 W 52nt Ter
City: Kansas City State: MO Zip Code: 64112
FEC ID number of contributing federal political committee: C
Name of Employer: Lockton Companies Occupation: Executive
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 1500.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-11-05hS01
Amount of Each Receipt this Period: 1500.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Beebe, Lydia
Mailing Address: 125 San Felipe Way
City: San Francisco State: CA Zip Code: 94127
FEC ID number of contributing federal political committee: C
Name of Employer: Chevron Corp Occupation: Corporate Sec./Chief Governance Offic
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 2000.00
Date of Receipt: 09 / 28 / 2009
Transaction ID: C-64-05bz02
Amount of Each Receipt this Period: 2000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) 4500.00

TOTAL This Period (last page this line number only) 4500.00

29020421122

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)

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Boesch, Doyce A.
Mailing Address: 4515 W. Street NW
City: Washington State: DC Zip Code: 20007
FEC ID number of contributing federal political committee: C
Name of Employer: Boesch & Company -Self
Occupation: Principal - Govt Relations
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 2000.00
Date of Receipt: 07 / 21 / 2009
Transaction ID: C-73-03O605
Amount of Each Receipt this Period: 2000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Daly, James
Mailing Address: 4400 Sunnyhill St.
City: Westlake Village State: CA Zip Code: 91362
FEC ID number of contributing federal political committee: C
Name of Employer: Amgen, Inc.
Occupation: SVP, North America Comm Operations
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 08 / 17 / 2009
Transaction ID: C-137-05hG01
Amount of Each Receipt this Period: 1000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Davis, Richard
Mailing Address: 5433 Mission Dr.
City: Mission Hills State: KS Zip Code: 66208
FEC ID number of contributing federal political committee: C
Name of Employer: Kimpull Corp
Occupation: Exec
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 500.00
Date of Receipt: 07 / 22 / 2009
Transaction ID: C-139-05MR02
Amount of Each Receipt this Period: 500.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) 3500.00

TOTAL This Period (last page this line number only) 8000.00

29020421123

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)

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Humphrey III, William W.
Mailing Address: 2215 Drury Lane
City: Shawnee Mission State: KS Zip Code: 66208
FEC ID number of contributing federal political committee: C
Name of Employer: Lockton Companies
Occupation: General Counsel
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-220-05hR01
Amount of Each Receipt this Period: 1000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Jahn, Judith M.
Mailing Address: 809 Michigan St.
City: Leavenworth State: KS Zip Code: 66048
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 300.00
Date of Receipt: 08 / 25 / 2009
Transaction ID: C-226-03Kt05
Amount of Each Receipt this Period: 300.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Lowry, Dorothy J.
Mailing Address: PO Box 1847
City: Liberal State: KS Zip Code: 67905
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Retired
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 250.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-269-01qt09
Amount of Each Receipt this Period: 250.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) 1550.00

TOTAL This Period (last page this line number only) 9550.00

29020421124

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)

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Polk, Freddy L.
Mailing Address: 412 Brookwood St
City: Lansing State: KS Zip Code: 66043
FEC ID number of contributing federal political committee: C
Name of Employer: Iron Tree Research Inc
Occupation: Consultant
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 2000.00
Date of Receipt: 08 / 25 / 2009
Transaction ID: C-337-05RH02
Amount of Each Receipt this Period: 2000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Polk, Susan G.
Mailing Address: 412 Brookwood St
City: Lansing State: KS Zip Code: 66043
FEC ID number of contributing federal political committee: C
Name of Employer: Iron Tree Research Inc
Occupation: Administrator
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 2000.00
Date of Receipt: 08 / 25 / 2009
Transaction ID: C-338-05RI02
Amount of Each Receipt this Period: 2000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Schwan, Doris
Mailing Address: 1312 Marymount
City: Salina State: KS Zip Code: 67401
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Housewife
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-375-003X06
Amount of Each Receipt this Period: 1000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) 5000.00

TOTAL This Period (last page this line number only) 14550.00

29020421125

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)

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Self Jr., Joe W.
Mailing Address: 13019 Pinehurst Dr.
City: Wichita State: KS Zip Code: 67230
FEC ID number of contributing federal political committee: C
Name of Employer: Joe Self Chevrolet
Occupation: Automobile Dealer
Receipt For: [X] Primary [ ] General [ ] Other (specify): ▼
Election Cycle-to-Date ▼: 500.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-378-03QE04
Amount of Each Receipt this Period: 500.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Staley, Warren R.
Mailing Address: 4517 Edina Blvd.
City: Edina State: MN Zip Code: 55424
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: [X] Primary [ ] General [ ] Other (specify): ▼
Election Cycle-to-Date ▼: 500.00
Date of Receipt: 08 / 25 / 2009
Transaction ID: C-403-04K702
Amount of Each Receipt this Period: 500.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Tarplin, Linda E.
Mailing Address: 1212 New York Ave. NW, Suite 1050
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C
Name of Employer: Tarplin, Downs & Young, LLC
Occupation: Lobbyist
Receipt For: [X] Primary [ ] General [ ] Other (specify): ▼
Election Cycle-to-Date ▼: 500.00
Date of Receipt: 08 / 11 / 2009
Transaction ID: C-414-032R05
Amount of Each Receipt this Period: 500.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

TOTAL This Period (last page this line number only) ▶ 16050.00

92112402062

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)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AACI-Am. Assn. of Crop Insurers PAC
Mailing Address: 1 Massachusetts Ave., Suite 800
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 3000.00
Date of Receipt: 08 / 17 / 2009
Transaction ID: C-2-000B0I
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): AACI-Am. Assn. of Crop Insurers PAC
Mailing Address: 1 Massachusetts Ave., Suite 800
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 3000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-3-000B0J
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Archer Daniels Midland - ADM PAC
Mailing Address: P. O. Box 1470
City: Decatur State: IL Zip Code: 62525
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 08 / 11 / 2009
Transaction ID: C-4-00050F
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶ 3000.00

29020421127

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)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Allergan Inc. P. A. C.
Mailing Address: Committee For Employees, Edith Bennett Treasurer
City: Orange State: CA Zip Code: 92867
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 2500.00
Date of Receipt: 08 / 03 / 2009
Transaction ID: C-19-037D02
Amount of Each Receipt this Period: 2500.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Bayer Corporation BAYPAC
Mailing Address: 100 Bayer Road
City: Pittsburgh State: PA Zip Code: 15205
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 10 / 2009
Transaction ID: C-63-01bA0D
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Blue Cross and Blue Shield Association PAC
Mailing Address: 1310 G Street, NW
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-71-05hT01
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶ 7500.00

29020421128

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)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bristol-Myers Squibb Company Employee PAC
Mailing Address: 345 Park Ave., 11th Fl
City: New York State: NY Zip Code: 10154
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-84-01cF08
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Clear Channel Communications Inc. (CCPAC)
Mailing Address: 200 E. Basse Rd.
City: San Antonio State: TX Zip Code: 78209
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-120-03SQ04
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Electrical Construction P. A. C.
Mailing Address: 3 Bethesda Metro Center
City: Bethesda State: MD Zip Code: 20814
FEC ID number of contributing federal political committee: C 00113811
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 2000.00
Date of Receipt: 09 / 29 / 2009
Transaction ID: C-160-02Bf09
Amount of Each Receipt this Period: 2000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) 4000.00

TOTAL This Period (last page this line number only) 11500.00

29020421129

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)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Federal Home Loan Bank Of Topeka PAC
Mailing Address: PO Box 176
City: Topeka State: KS Zip Code: 66601
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 500.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-174-030c04
Amount of Each Receipt this Period: 500.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): New York Life Insurance PAC
Mailing Address: 51 Madison Ave., Room 1109
City: New York State: NY Zip Code: 10010
FEC ID number of contributing federal political committee: C 00158881
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-310-038208
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Pacific Life Insurance Co PAC
Mailing Address: 700 Newport Center Drive
City: Newport Beach State: CA Zip Code: 92660
FEC ID number of contributing federal political committee: C 00068528
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 2000.00
Date of Receipt: 09 / 04 / 2009
Transaction ID: C-320-03bM03
Amount of Each Receipt this Period: 2000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) 3500.00

TOTAL This Period (last page this line number only) 15000.00

29020421130

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)

[ ] 11a [ ] 11b [X] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Rain And Hail Insurance Society
Mailing Address: Political Action Committee, 9200 Northpark Dr.
City: Johnston State: IA Zip Code: 50131
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify): ▼
Election Cycle-to-Date ▼ 2000.00
Date of Receipt: 08 / 11 / 2009
Transaction ID: C-348-017s0G
Amount of Each Receipt this Period: 1000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Raytheon PAC
Mailing Address: 1100 Wilson Boulevard, Suite 1500
City: Arlington State: VA Zip Code: 22209
FEC ID number of contributing federal political committee: C 00097568
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify): ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-352-002Y0N
Amount of Each Receipt this Period: 1000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Sanofi Pasteur, Inc. PAC
Mailing Address: Discovery Drive
City: Swiftwater State: PA Zip Code: 18370
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify): ▼
Election Cycle-to-Date ▼ 1500.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-368-05hQ01
Amount of Each Receipt this Period: 1500.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

TOTAL This Period (last page this line number only) ▶ 18500.00

29020421131

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)

[ ] 11a [ ] 11b [X] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Senate Majority Fund
Mailing Address: PO Box 32025
City: Phoenix State: AZ Zip Code: 85064
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 5000.00
Date of Receipt: 08 / 03 / 2009
Transaction ID: C-379-038v03
Amount of Each Receipt this Period: 5000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Sprint Nextel Corporation PAC
Mailing Address: 2001 Edmund Halley Drive
City: Reston State: VA Zip Code: 20191
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 1000.00
Date of Receipt: 09 / 30 / 2009
Transaction ID: C-402-002u0G
Amount of Each Receipt this Period: 1000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Wellpoint Inc. WellPAC
Mailing Address: Marjorie Maginn, Treasurer, 120 Monument Circle
City: Indianapolis State: IN Zip Code: 46204
FEC ID number of contributing federal political committee: C 00197228
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 5000.00
Date of Receipt: 09 / 04 / 2009
Transaction ID: C-448-032V06
Amount of Each Receipt this Period: 3000.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) 9000.00

TOTAL This Period (last page this line number only) 27500.00

29020421152

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)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A. Full Name (Last, First, Middle Initial)
XCEL Energy Employee PAC

Mailing Address
Attn Sharon Morine, 1225 - 17th ST

City: Denver
State: CO
Zip Code: 80202

FEC ID number of contributing federal political committee: C

Name of Employer:
Occupation:

Receipt For:
☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 04 / 2009

Transaction ID: C-463-05hI01

Amount of Each Receipt this Period: 2000.00

☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

TOTAL This Period (last page this line number only) ▶ 29500.00

29020421133

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)

[ ] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [X] 14 [ ] 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 177.30
Date of Receipt: 07 / 01 / 2009
Transaction ID: C-6-03HZ01
Amount of Each Receipt this Period: 88.46
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Void Ck 3729

B.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 177.30
Date of Receipt: 07 / 01 / 2009
Transaction ID: C-7-03HZ02
Amount of Each Receipt this Period: 88.84
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Void Ck #3930

C.
Full Name (Last, First, Middle Initial): Kansas Income Tax
Mailing Address: Kansas Department Of Revenue, 915 SW Harrison Revenue
City: Topeka State: KS Zip Code: 66625
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Election Cycle-to-Date: 492.00
Date of Receipt: 07 / 22 / 2009
Transaction ID: C-236-012z02
Amount of Each Receipt this Period: 492.00
[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Kansas Tax Refund

SUBTOTAL of Receipts This Page (optional) 669.30

TOTAL This Period (last page this line number only) 669.30

29020421134

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)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): National Republican Senatorial Committee
Mailing Address: Ronald Regan Repbulican Center, 425 2ND.St. N. E.
City: Washington State: DC Zip Code: 20002
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 1043.08
Date of Receipt: 08 / 03 / 2009
Transaction ID: C-304-01Hh07
Amount of Each Receipt this Period: 1043.08
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Reimburse Expenses

B.
Full Name (Last, First, Middle Initial): The Pat Roberts Victory Committee
Mailing Address: 610 South Boulevard St
City: Tampa State: FL Zip Code: 33606
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 3826.40
Date of Receipt: 07 / 30 / 2009
Transaction ID: C-419-05h102
Amount of Each Receipt this Period: 1499.20
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Reimb for expenses

C.
Full Name (Last, First, Middle Initial): The Pat Roberts Victory Committee
Mailing Address: 610 South Boulevard St
City: Tampa State: FL Zip Code: 33606
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 3826.40
Date of Receipt: 08 / 25 / 2009
Transaction ID: C-420-05h103
Amount of Each Receipt this Period: 327.20
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Travel Exp Reimb

SUBTOTAL of Receipts This Page (optional) ▶ 2869.48

TOTAL This Period (last page this line number only) ▶ 3538.78

29020421135

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)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: 2006 Broadway
City: Great Bend State: KS Zip Code: 67530
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼: 81.93
Date of Receipt: 07 / 31 / 2009
Transaction ID: C-54-02GD21
Amount of Each Receipt this Period: 10.33
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: 2006 Broadway
City: Great Bend State: KS Zip Code: 67530
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼: 81.93
Date of Receipt: 08 / 31 / 2009
Transaction ID: C-55-02GD22
Amount of Each Receipt this Period: 11.01
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 21.34

TOTAL This Period (last page this line number only) ▶ 21.34

29020421136

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 78522
City: Phoenix State: AZ Zip Code: 85062
Purpose of Disbursement: Phone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D11-03Go0Q
Date of Disbursemenmt: 07 / 28 / 2009
Amount of Each Disbursement this Period: 37.05
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 78522
City: Phoenix State: AZ Zip Code: 85062
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D12-03Go0R
Date of Disbursemenmt: 09 / 01 / 2009
Amount of Each Disbursement this Period: 37.05
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 78522
City: Phoenix State: AZ Zip Code: 85062
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D13-03Go0S
Date of Disbursemenmt: 09 / 30 / 2009
Amount of Each Disbursement this Period: 37.05
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 111.15

TOTAL This Period (last page this line number only) 111.15

29020421137

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 5001
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D24-04RI0H
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 152.13
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 5001
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D25-04RI0I
Date of Disbursemenmt: 08 / 11 / 2009
Amount of Each Disbursement this Period: 147.57
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 5001
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D26-04RI0J
Date of Disbursemenmt: 09 / 10 / 2009
Amount of Each Disbursement this Period: 143.40
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 443.10

TOTAL This Period (last page this line number only) ▶ 554.25

28020421138

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Phone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D36-03HZ0f
Date of Disbursemenmt: 07 / 07 / 2009
Amount of Each Disbursement this Period: 88.73
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Phone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D37-03HZ0g
Date of Disbursemenmt: 07 / 31 / 2009
Amount of Each Disbursement this Period: 89.10
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D38-03HZ0h
Date of Disbursemenmt: 09 / 01 / 2009
Amount of Each Disbursement this Period: 89.10
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 266.93

TOTAL This Period (last page this line number only) ▶ 821.18

29020421139

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D39-03HZ0i
Date of Disbursemenmt: 09 / 30 / 2009
Amount of Each Disbursement this Period: 89.10
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: P. O. Box 650553
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D66-03IF0e
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 86.55
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: P. O. Box 650553
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D67-03IF0f
Date of Disbursemenmt: 08 / 17 / 2009
Amount of Each Disbursement this Period: 159.14
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 334.79

TOTAL This Period (last page this line number only) 1155.97

29020421140

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: P. O. Box 650553
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D68-03IF0g
Date of Disbursemenmt: 09 / 15 / 2009
Amount of Each Disbursement this Period: 198.25
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Ball Consulting Group
Mailing Address: PO Box 1511
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Acctng/Bkkpg Jun '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D86-034d0M
Date of Disbursemenmt: 07 / 07 / 2009
Amount of Each Disbursement this Period: 1591.80
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Ball Consulting Group
Mailing Address: PO Box 1511
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Bkkpg/Acctng July '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D87-034d0N
Date of Disbursemenmt: 08 / 11 / 2009
Amount of Each Disbursement this Period: 1775.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 3565.05

TOTAL This Period (last page this line number only) 4721.02

29020421141

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Ball Consulting Group
Mailing Address: PO Box 1511
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Acctng/Bkkpg Aug 2009
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D88-034d0O
Date of Disbursemenmt: 09 / 04 / 2009
Amount of Each Disbursement this Period: 1433.40
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Ball Consulting Group
Mailing Address: PO Box 1511
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Sept 2009 Bkkpg/Acctng
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D89-034d0P
Date of Disbursemenmt: 09 / 30 / 2009
Amount of Each Disbursement this Period: 1299.20
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 15731
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (449)June '09 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D103-02GY2P
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 221.60
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 2954.20

TOTAL This Period (last page this line number only) 7675.22

29020421142

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Dirksen South
Mailing Address: 13202627
City: Washington State: DC Zip Code:
Purpose of Disbursement: (449)Constituent Lunch
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-05gZ04
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 37.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Factory Card Outlet #520
Mailing Address: 2325 H. Forest Drive
City: Annapolis State: MD Zip Code: 21401
Purpose of Disbursement: (449)Paper Supplies
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-02rL0C
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 66.55
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): The Source, by Wolfgang Puck
Mailing Address: 575 Pennsylvania Ave NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: (449)Meeting,Meals
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-04W702
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 88.05
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 7675.22

29020421143

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 15731
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (451)July '09 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D104-02GY2Q
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 1202.35
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Dirksen South
Mailing Address: 13202627
City: Washington State: DC Zip Code:
Purpose of Disbursement: (451)Intern Lunch-2nd Ses
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D2-05gZ05
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 152.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Food Lion #1315
Mailing Address:
City: Edgewater State: MD Zip Code:
Purpose of Disbursement: (451)Food/Drink Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D3-02pj0W
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 58.05
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1202.35

TOTAL This Period (last page this line number only) ▶ 8877.57

29020421144

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Food Lion #1315
Mailing Address:
City: Edgewater State: MD Zip Code:
Purpose of Disbursement: (451)Food/Drinks-Event
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-02pj0X
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 24.99
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Red Hot & Blue Restaurant
Mailing Address: 169 Hillwood Ave
City: Falls Church State: VA Zip Code: 22046
Purpose of Disbursement: (451)Meeting/Meals Exp
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D7-05gK02
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 301.67
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Senate Gift Shop
Mailing Address: Senate Dirksen Bldg, Sdg-42
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (451)Gifts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D8-02Dq24
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 16.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 8877.57

29020421145

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Southwest Airlines
Mailing Address: P. O. Box 36611
City: Dallas State: TX Zip Code: 75235
Purpose of Disbursement: (451)Travel-AirlineTckts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D9-020w0D
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 107.60
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): The Source, by Wolfgang Puck
Mailing Address: 575 Pennsylvania Ave NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: (451)Lunch Mtg-Event
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D10-04W703
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 39.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): U. S. Senate Restaurants
Mailing Address: Senate Office Bldgs, 1ST & C. Sts NW
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (451)Lunch Mtg, Meals
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D11-02Dz2B
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 133.25
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 8877.57

29020421146

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)
[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 15731
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (453)Aug. '09 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D105-02GY2R
Date of Disbursemenmt: 09 / 17 / 2009
Amount of Each Disbursement this Period: 363.99
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Fedex
Mailing Address: PO Box 1140
City: Memphis State: TN Zip Code: 38101
Purpose of Disbursement: (453)Shipping Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-01Du20
Date of Disbursemenmt: 09 / 17 / 2009
Amount of Each Disbursement this Period: 7.55
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Four Seasons Hotels
Mailing Address: 757 Market Street
City: San Francisco State: CA Zip Code: 94103
Purpose of Disbursement: (453)Lodging Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-05hP02
Date of Disbursemenmt: 09 / 17 / 2009
Amount of Each Disbursement this Period: 298.93
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 363.99

TOTAL This Period (last page this line number only) 9241.56

29020421147

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): The Source, by Wolfgang Puck
Mailing Address: 575 Pennsylvania Ave NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: (453)Food/Luncheon Exp
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-04W704
Date of Disbursemenmt: 09 / 17 / 2009
Amount of Each Disbursement this Period: 39.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Bellwether Consulting Group
Mailing Address: 666 11th st, nw, Suite 800
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Aug '09 Fundrsng/Cnsltng
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D129-03YL0m
Date of Disbursemenmt: 07 / 22 / 2009
Amount of Each Disbursement this Period: 1000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Bellwether Consulting Group
Mailing Address: 666 11th st, nw, Suite 800
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Fundrsng Consltng Sep '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D130-03YL0n
Date of Disbursemenmt: 08 / 17 / 2009
Amount of Each Disbursement this Period: 1000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 2000.00

TOTAL This Period (last page this line number only) 11241.56

29020421148

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bellwether Consulting Group
Mailing Address: 666 11th st, nw, Suite 800
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Fundrsng/Consltng-Oct '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D131-03YL0o
Date of Disbursemenmt: 09 / 17 / 2009
Amount of Each Disbursement this Period: 1000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Conference Technologies, Inc.
Mailing Address: P.O. Box 66726
City: Saint Louis State: MO Zip Code: 63166
Purpose of Disbursement: Rent Audio Eq. for Event
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D187-05hE01
Date of Disbursemenmt: 08 / 07 / 2009
Amount of Each Disbursement this Period: 895.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Cottrell, Jacqueline
Mailing Address: 6212 Gentle Lane
City: Alexandria State: VA Zip Code: 22310
Purpose of Disbursement: Reimb-Cab Fares
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D195-01KP0j
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 74.90
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 1969.90

TOTAL This Period (last page this line number only) 13211.46

29020421149

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)
[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Cox Communications - Kansas
Mailing Address: P.O. Box 21380
City: Tulsa State: OK Zip Code: 74121
Purpose of Disbursement: Communication-Internet
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D210-05h202
Date of Disbursemenmt: 07 / 07 / 2009
Amount of Each Disbursement this Period: 236.26
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Cox Communications - Kansas
Mailing Address: P.O. Box 21380
City: Tulsa State: OK Zip Code: 74121
Purpose of Disbursement: Communication Internet
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D211-05h203
Date of Disbursemenmt: 07 / 30 / 2009
Amount of Each Disbursement this Period: 236.26
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Cox Communications - Kansas
Mailing Address: P.O. Box 21380
City: Tulsa State: OK Zip Code: 74121
Purpose of Disbursement: Communication Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D212-05h204
Date of Disbursemenmt: 09 / 01 / 2009
Amount of Each Disbursement this Period: 236.26
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 708.78

TOTAL This Period (last page this line number only) ..... ▶ 13920.24

29020421150

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Cox Communications - Kansas
Mailing Address: P.O. Box 21380
City: Tulsa State: OK Zip Code: 74121
Purpose of Disbursement: Communication-Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D213-05h205
Date of Disbursemenmt: 09 / 30 / 2009
Amount of Each Disbursement this Period: 236.26
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Gray Horse Farms LLC
Mailing Address: 201 S Kansas Ave
City: Topeka State: KS Zip Code: 66605
Purpose of Disbursement: Rent-August 2009
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D298-05dx09
Date of Disbursemenmt: 07 / 22 / 2009
Amount of Each Disbursement this Period: 280.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Gray Horse Farms LLC
Mailing Address: 201 S Kansas Ave
City: Topeka State: KS Zip Code: 66605
Purpose of Disbursement: Sept 2009 Rent
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D299-05dx0A
Date of Disbursemenmt: 08 / 25 / 2009
Amount of Each Disbursement this Period: 280.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 796.26

TOTAL This Period (last page this line number only) ..... ▶ 14716.50

29020421151

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Gray Horse Farms LLC
Mailing Address: 201 S Kansas Ave
City: Topeka State: KS Zip Code: 66605
Purpose of Disbursement: Oct 2009 Rent
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D300-05dx0B
Date of Disbursemenmt: 09 / 25 / 2009
Amount of Each Disbursement this Period: 280.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Hannibal Software Inc.
Mailing Address: 611 Pennsylvania Ave. S. E., Suite #345
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Annual Software Support
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D309-012T0F
Date of Disbursemenmt: 09 / 03 / 2009
Amount of Each Disbursement this Period: 1000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Kansas Turnpike Authority
Mailing Address: PO Box 780007
City: Wichita State: KS Zip Code: 67278
Purpose of Disbursement: Travel-Toll Charges
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D362-01NZ18
Date of Disbursemenmt: 09 / 30 / 2009
Amount of Each Disbursement this Period: 73.14
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 1353.14

TOTAL This Period (last page this line number only) 16069.64

29020421152

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Linweld
Mailing Address: P. O. Box 1858
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Helium Cylinders
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D391-01NQ0v
Date of Disbursemenmt: 07 / 07 / 2009
Amount of Each Disbursement this Period: 11.92
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Linweld
Mailing Address: P. O. Box 1858
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Helium Cylinders
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D392-01NQ0w
Date of Disbursemenmt: 08 / 04 / 2009
Amount of Each Disbursement this Period: 12.21
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Linweld
Mailing Address: P. O. Box 1858
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Helium Cylinders
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D393-01NQ0x
Date of Disbursemenmt: 09 / 04 / 2009
Amount of Each Disbursement this Period: 14.77
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 38.90

TOTAL This Period (last page this line number only) 16108.54

29020421153

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Hosting Web Site
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D449-031R10
Date of Disbursemenmt: 07 / 22 / 2009
Amount of Each Disbursement this Period: 150.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Cr Card Fees Jun '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D450-031R11
Date of Disbursemenmt: 07 / 16 / 2009
Amount of Each Disbursement this Period: 2.14
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Cr Card Fees-April '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D451-031R12
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 96.90
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 249.04

TOTAL This Period (last page this line number only) 16357.58

29020421154

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)
[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Hosting Web Site
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D452-031R13
Date of Disbursemenmt: 08 / 25 / 2009
Amount of Each Disbursement this Period: 150.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Cr Card Fees-Jul '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D453-031R14
Date of Disbursemenmt: 08 / 17 / 2009
Amount of Each Disbursement this Period: 141.82
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Hosting Web Site
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D454-031R15
Date of Disbursemenmt: 09 / 30 / 2009
Amount of Each Disbursement this Period: 150.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 441.82

TOTAL This Period (last page this line number only) 16799.40

29020421155

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Patton Boggs LLP
Mailing Address: Attorneys At Law, 2550 M St N.W.
City: Washington State: DC Zip Code: 20037
Purpose of Disbursement: Legal Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D486-03c60D
Date of Disbursemenmt: 07 / 28 / 2009
Amount of Each Disbursement this Period: 626.75
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Patton Boggs LLP
Mailing Address: Attorneys At Law, 2550 M St N.W.
City: Washington State: DC Zip Code: 20037
Purpose of Disbursement: Legal Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D487-03c60E
Date of Disbursemenmt: 09 / 01 / 2009
Amount of Each Disbursement this Period: 225.50
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Postmaster-Great Bend
Mailing Address:
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: PO Box Rental,Postage
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D501-01771k
Date of Disbursemenmt: 07 / 13 / 2009
Amount of Each Disbursement this Period: 49.55
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 901.80

TOTAL This Period (last page this line number only) 17701.20

29020421156

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Postmaster-Great Bend
Mailing Address:
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Certified Mail & Stamps
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D502-01771I
Date of Disbursemenmt: 08 / 28 / 2009
Amount of Each Disbursement this Period: 12.75
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Postmaster
Mailing Address: Topeka Main PO
City: Topeka State: KS Zip Code: 66603
Purpose of Disbursement: PO Box Rental-1 Year
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D508-02Jr1y
Date of Disbursemenmt: 07 / 31 / 2009
Amount of Each Disbursement this Period: 110.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Postmaster
Mailing Address: PO Box 759651
City: Topeka State: KS Zip Code: 66675
Purpose of Disbursement: BRM Permit Fee
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D509-04Vv02
Date of Disbursemenmt: 07 / 08 / 2009
Amount of Each Disbursement this Period: 185.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 307.75

TOTAL This Period (last page this line number only) ▶ 18008.95

29020421157

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Roberts, Pat
Mailing Address: 302 Hart Building
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Reimb-Food/Meals
Candidate Name: Pat Roberts
Category/Type
Office Sought: State: DC District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D549-00kt2v
Date of Disbursemenmt: 07 / 08 / 2009
Amount of Each Disbursement this Period: 88.92
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 105243
City: Atlanta State: GA Zip Code: 30348
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D604-04W20D
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 130.59
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 105243
City: Atlanta State: GA Zip Code: 30348
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D605-04W20E
Date of Disbursemenmt: 08 / 17 / 2009
Amount of Each Disbursement this Period: 106.29
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 325.80

TOTAL This Period (last page this line number only) 18334.75

29020421158

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 105243
City: Atlanta State: GA Zip Code: 30348
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D606-04W20F
Date of Disbursemenmt: 09 / 17 / 2009
Amount of Each Disbursement this Period: 119.72
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Tony Durano State Farm Insurance
Mailing Address: 825 W Central
City: Andover State: KS Zip Code: 67002
Purpose of Disbursement: Insurance 91BAP8224-Bus
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D636-05hF01
Date of Disbursemenmt: 08 / 07 / 2009
Amount of Each Disbursement this Period: 511.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): U.S. Airways
Mailing Address: Dividend Miles, Card Services
City: Philadelphia State: PA Zip Code: 19101
Purpose of Disbursement: (448)June Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D649-05h701
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 6849.03
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 7479.75

TOTAL This Period (last page this line number only) 25814.50

29020421159

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)

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Cato Travel
Mailing Address: Senate Russell Bld, 1ST & C. St. NE
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (448)Travel-Agent Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-02to0k
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 125.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Clear Reg Traveler
Mailing Address:
City: Flyclear.com State: NY Zip Code:
Purpose of Disbursement: (448)Travel-Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-04Dp02
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 179.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Deer Park
Mailing Address: Processing Center, P.O. Box 856192
City: Louisville State: KY Zip Code: 40285
Purpose of Disbursement: (448)Coffee Service Suppl
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-03YM05
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 405.90
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 25814.50

29020421160

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)
[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Del Frisco's
Mailing Address: 1221 Avenue of the Americas
City: New York State: NY Zip Code: 10020
Purpose of Disbursement: (448)Meals/Meeting
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-05h801
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 299.15
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Le Cirque Restaurant
Mailing Address: 151 E 58th St
City: New York State: NY Zip Code: 10022
Purpose of Disbursement: (448)Food/Meeting
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-05h901
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 431.98
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Lodge Front Office
Mailing Address: Post Office Box 1776
City: Williamsburg State: VA Zip Code: 23187
Purpose of Disbursement: (448)Travel-Lodging
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D7-05hB01
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 1004.87
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 25814.50

29020421151

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)
[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Midwest Express Airline
Mailing Address: 6744 S. Howell Ave.
City: Oak Creek State: WI Zip Code: 53154
Purpose of Disbursement: (448)Travel-Airline Tckts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D8-01dn0t
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 1605.19
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): New York Pizza
Mailing Address: 1401 Pennsylvania Ave.
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: (448)Meals-Summer Interns
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D9-037L0A
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 58.15
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Sheraton NY Towers
Mailing Address:
City: New York State: NY Zip Code:
Purpose of Disbursement: (448)Travel-Lodging
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D10-03gU03
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 461.72
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 25814.50

29020421162

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): U. S. Senate Restaurants
Mailing Address: Senate Office Bldgs, 1ST & C. Sts NW
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (448)Dining/Meals
Candidate Name
Category/Type
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D11-02Dz2A
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 115.92
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): United Air
Mailing Address
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: (448)Travel-Airline Tckts
Candidate Name
Category/Type
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D12-02FC03
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 1449.20
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Us Airways
Mailing Address
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: (448)Travel-Airline Tckts
Candidate Name
Category/Type
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D13-02Jo06
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 566.10
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 25814.50

29020421163

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: 6198 M. Little River Tpk
City: Alexandria State: VA Zip Code: 22312
Purpose of Disbursement: (448)Telephone Equipment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D14-02kE04
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 107.60
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): U.S. Airways
Mailing Address: Dividend Miles, Card Services
City: Philadelphia State: PA Zip Code: 19101
Purpose of Disbursement: (450)July Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D650-05h702
Date of Disbursemenmt: 08 / 16 / 2009
Amount of Each Disbursement this Period: 1072.51
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Cato Travel
Mailing Address: Senate Russell Bld, 1ST & C. St. NE
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (450)Travel Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-02to0l
Date of Disbursemenmt: 08 / 16 / 2009
Amount of Each Disbursement this Period: 75.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 1072.51

TOTAL This Period (last page this line number only) 26887.01

29020421164

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Delta Air,
Mailing Address:
City: Washington State: DC Zip Code:
Purpose of Disbursement: (450)Travel-Airline Tckts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-02uZ0B
Date of Disbursemenmt: 08 / 16 / 2009
Amount of Each Disbursement this Period: 275.20
MEMO: See memo entries
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Domino's Pizza #04329 or 04338
Mailing Address: 15 K. Street NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: (450)Staff Luncheon
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-02EE0N
Date of Disbursemenmt: 08 / 16 / 2009
Amount of Each Disbursement this Period: 52.37
MEMO: Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): JetBlue
Mailing Address: 118-29 Queens Blvd.
City: Forest Hills State: NY Zip Code: 11375
Purpose of Disbursement: (450)Travel-Airline Tckts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-05hD01
Date of Disbursemenmt: 08 / 16 / 2009
Amount of Each Disbursement this Period: 294.60
MEMO: Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 26887.01

29020421155

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Senate Gift Shop
Mailing Address: Senate Dirksen Bldg, Sdg-42
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (450)Gift Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-02Dq23
Date of Disbursemenmt: 08 / 16 / 2009
Amount of Each Disbursement this Period: 85.75
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): United Air
Mailing Address:
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: (450)Travel-Airline Tckts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-02FC04
Date of Disbursemenmt: 08 / 16 / 2009
Amount of Each Disbursement this Period: 289.59
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): U.S. Airways
Mailing Address: Dividend Miles, Card Services
City: Philadelphia State: PA Zip Code: 19101
Purpose of Disbursement: (452)Aug 2009 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D651-05h703
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 6158.99
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 6158.99

TOTAL This Period (last page this line number only) 33046.00

29902042116 6

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Balboa Bay Club
Mailing Address: 1602 E Coast Hwy
City: Newport Beach State: CA Zip Code: 92660
Purpose of Disbursement: (452)Room Rental/Food
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-05hM01
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 1500.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Balboa Bay Club
Mailing Address: 1602 E Coast Hwy
City: Newport Beach State: CA Zip Code: 92660
Purpose of Disbursement: (452)Meals/ Event
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-05hM02
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 1389.19
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Four Seasons Hotels
Mailing Address: 757 Market Street
City: San Francisco State: CA Zip Code: 94103
Purpose of Disbursement: (452)Travel-Lodging
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-05hP01
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 1772.63
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 33046.00

29020421167

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)
[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Nwa Air
Mailing Address:
City: Minneapolis State: MN Zip Code:
Purpose of Disbursement: (452)Travel-Airline Tckt
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D8-037q0A
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 175.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Royal Coach Limousine
Mailing Address: 988 Enterprise Way
City: Napa State: CA Zip Code: 94558
Purpose of Disbursement: (452)Travel-NAPA Event
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D9-04ew03
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 470.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Southwest Airlines
Mailing Address: P. O. Box 36611
City: Dallas State: TX Zip Code: 75235
Purpose of Disbursement: (452)Airln Tickets-Travel
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D10-020w0E
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 327.20
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 33046.00

29020421158

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): U. S. Senate Restaurants
Mailing Address: Senate Office Bldgs, 1ST & C. Sts NW
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (452)July RPC Lunches
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D11-02Dz2C
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 79.92
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P. O. Box 660108
City: Dallas State: TX Zip Code: 75266
Purpose of Disbursement: Phone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D671-02Mn1d
Date of Disbursemenmt: 07 / 07 / 2009
Amount of Each Disbursement this Period: 257.44
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P. O. Box 660108
City: Dallas State: TX Zip Code: 75266
Purpose of Disbursement: Phone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D672-02Mn1e
Date of Disbursemenmt: 07 / 31 / 2009
Amount of Each Disbursement this Period: 259.83
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 517.27

TOTAL This Period (last page this line number only) ..... ▶ 33563.27

29020421169

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P. O. Box 660108
City: Dallas State: TX Zip Code: 75266
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D673-02Mn1f
Date of Disbursemenmt: 09 / 01 / 2009
Amount of Each Disbursement this Period: 252.92
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P. O. Box 660108
City: Dallas State: TX Zip Code: 75266
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D674-02Mn1g
Date of Disbursemenmt: 09 / 30 / 2009
Amount of Each Disbursement this Period: 258.13
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P.O. Box 25505
City: Lehigh Valley State: PA Zip Code: 18002
Purpose of Disbursement: Communication Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D677-05h602
Date of Disbursemenmt: 08 / 19 / 2009
Amount of Each Disbursement this Period: 60.07
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 571.12

TOTAL This Period (last page this line number only) 34134.39

2902042117 0

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P.O. Box 25505
City: Lehigh Valley State: PA Zip Code: 18002
Purpose of Disbursement: Communication Exp
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D678-05h603
Date of Disbursemenmt: 08 / 28 / 2009
Amount of Each Disbursement this Period: 65.07
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Wilson Grand Communications Inc.
Mailing Address: 429 N. Saint Asaph Street
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Advertising Win Bonus
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D698-01Ej1e
Date of Disbursemenmt: 08 / 27 / 2009
Amount of Each Disbursement this Period: 25000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 25065.07

TOTAL This Period (last page this line number only) 59199.46

29020421171

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): United Air
Mailing Address:
City: Chicago State: IL Zip Code:
Purpose of Disbursement: (449)Travel Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-04cj02
Date of Disbursemenmt: 07 / 20 / 2009
Amount of Each Disbursement this Period: 30.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Colony Liquors
Mailing Address: 3259-A Solomons Island Road
City: Edgewater State: MD Zip Code: 21037
Purpose of Disbursement: (451)Liquor for Event
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-02ze02
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 99.70
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Oriental Pearl Restaurant
Mailing Address: 760 Clay St
City: San Francisco State: CA Zip Code: 94108
Purpose of Disbursement: (451)Travel-Meals/Mtg
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-05hH01
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 68.60
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0

TOTAL This Period (last page this line number only) 0

29020421172

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Proof Restaurant
Mailing Address: 775 G Street NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: (451)Meals/Meeting Exp
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-05gt02
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 120.10
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Yellow Cab
Mailing Address:
City: Alexandria State: VA Zip Code:
Purpose of Disbursement: (451)Travel-Cab Fares
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D12-02yl03
Date of Disbursemenmt: 08 / 18 / 2009
Amount of Each Disbursement this Period: 81.39
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Schneiders Of Capitol Hill
Mailing Address: 300 Massachusetts Ave.
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: (453)Gifts-Comm. Staff
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-02rN04
Date of Disbursemenmt: 09 / 17 / 2009
Amount of Each Disbursement this Period: 18.51
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0

TOTAL This Period (last page this line number only) 0

29020421173

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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Fasmart
Mailing Address: 602 York St
City: Williamsburg State: VA Zip Code:
Purpose of Disbursement: (448)Travel-Fuel
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-05hA01
Date of Disbursemenmt: 07 / 10 / 2009
Amount of Each Disbursement this Period: 39.25
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Compass Books
Mailing Address: San Francisco Intl Airport, Terminal 3
City: San Francisco Intn State: CA Zip Code: 94128
Purpose of Disbursement: (452)Travel-Food,Snacks
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-05hO01
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 38.16
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Firehook Bakery
Mailing Address: Farragut Square, 912 17th Street, NW
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: (452)Mtg/Meal Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-05hK01
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 175.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0

TOTAL This Period (last page this line number only) 0

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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)

[X] 17 [ ] 18 [ ] 19a [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Gregory's Florist
Mailing Address: 9016 Center St.
City: Manassas State: VA Zip Code: 20110
Purpose of Disbursement: (452)Flower Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-05hL01
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 60.89
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Napa Valley Cab
Mailing Address: 2371 Pine St.
City: NAPA State: CA Zip Code:
Purpose of Disbursement: (452)Travel-Cab Fares
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D7-05hN01
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 128.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): United Air
Mailing Address:
City: San Francisco State: CA Zip Code:
Purpose of Disbursement: (452)Travel Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D12-05fk02
Date of Disbursemenmt: 09 / 09 / 2009
Amount of Each Disbursement this Period: 43.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0

TOTAL This Period (last page this line number only) 0

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NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510–2116
PHONE: (202) 224–0322

United States Senate

OFFICE OF THE SECRETARY

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