

# REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 5

1. NAME OF COMMITTEE (in full) <b>BROWBACK FOR PRESIDENT INC</b>		2. IDENTIFICATION NUMBER C00430694
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO BOX 2008 2436 SW CAMELOT PL		
CITY, STATE, and ZIP CODE TOPEKA KS 66601		3. IS THIS REPORT FOR : <input type="checkbox"/> Primary <input type="checkbox"/> General

**4. TYPE OF REPORT** (Check here  if this is a Termination Report.)

Monthly Report Due On:

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input checked="" type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> January 31 Year End Report	<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

Twelfth day report preceding \_\_\_\_\_  
(Type of Election)

election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_  
on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT  YES  NO

5. COVERING PERIOD	FROM	THROUGH
	07/01/2010	09/30/2010
<b>SUMMARY</b>	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD .....	38503.56
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) .....	1000.00
	8. SUBTOTAL (Lines 6 and 7) .....	39503.56
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	0.00
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) .....	39503.56
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	49259.82	
13. EXPENDITURES SUBJECT TO LIMITATION .....	4210664.46	
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	3580747.17
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....	4210664.46

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 <b>T.C. Anderson</b>	Date 10/14/2010
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b>	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100	<b>FEC FORM 3P</b> <b>(01/2001)</b>
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**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3P)

Name of committee (in full) <b>BROWNBACK FOR PRESIDENT INC</b>	Report Covering the Period From: 07/01/2010 To: 09/30/2010	
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
	16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00
17. CONTRIBUTIONS (other than loans) FROM :		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	3604055.17
(b) Political Party Committees .....	0.00	300.00
(c) Other Political Committees .....	0.00	49435.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	1000.00	3653790.17
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	575000.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00
(b) Other Loans .....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :		
(a) Operating .....	0.00	135448.99
(b) Fundraising .....	0.00	0.00
(c) Legal and Accounting .....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	135448.99
21. OTHER RECEIPTS (Dividend, Interest, etc.) .....	0.00	87068.58
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....	1000.00	4451307.74
<b>II. DISBURSEMENTS</b>		
	23. OPERATING EXPENDITURES .....	0.00
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	32447.39
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS .....	0.00	0.00
27. LOAN REPAYMENTS MADE :		
(a) Repayment of Loans made or Guaranteed by Candidate .....	0.00	0.00
(b) Other Repayments .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) .....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :		
(a) Individuals/Persons Other Than Political Committees .....	0.00	73043.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....	0.00	73043.00
29. OTHER DISBURSEMENTS .....	0.00	97.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	0.00	4451700.84
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>		
	31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

3 / 5

1. NAME OF COMMITTEE (in full)

**BROWNBACK FOR PRESIDENT INC**

ADDRESS (number and street)

PO BOX 2008  
2436 SW CAMELOT PL

CITY, STATE, and ZIP CODE

TOPEKA KS 66601

2. IDENTIFICATION NUMBER

C00430694

**ALLOCATION BY STATE**

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4 / 5
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
BROWNBACK FOR PRESIDENT INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Davis	Date of Receipt
	Mailing Address 1905 Mallinson Way	<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City State Zip Code Alexandria VA 22308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text" value="1000.00"/>
	Name of Employer Occupation Davis Manafort, Inc. Partner	Debt Retirement
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>
		Transaction ID: SA17A.5373

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1000.00"/>

**Schedule C-P**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 / 5
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

**LOANS**

NAME OF COMMITTEE (In Full)  
 BROWBACK FOR PRESIDENT INC  
 Transaction ID: SC/12.5317

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) SAMUEL DALE BROWBACK - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4826 URISH ROAD	
City TOPEKA State KS ZIP Code 66610	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
49259.82	0.00	49259.82

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M M 04 D D 22 Y Y Y Y 2009	12/31/2009	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	49259.82
<b>TOTALS</b> This Period (last page in this line only) .....	▶	49259.82

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.