

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

ADDRESS (number and street) 7829 E. Rockhill #201

Check if different than previously reported. (ACC)

WICHITA KS 67206

2. **FEC IDENTIFICATION NUMBER ▼** C00251447 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

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

(d) 30-Day **POST-Election** Report for the:

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

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2014 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014

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

Type or Print Name of Treasurer Mary Adolf

Signature of Treasurer Mary Adolf **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y 07 / 11 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="86216.23"/>	<input type="text" value="86216.23"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="112565.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13315.00"/>	<input type="text" value="92395.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="125880.37"/>	<input type="text" value="178611.23"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31136.19"/>	<input type="text" value="83867.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="94744.18"/>	<input type="text" value="94744.18"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12940.00	90770.00
(ii) Unitemized	375.00	1625.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13315.00	92395.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	13315.00	92395.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	13315.00	92395.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13315.00	92395.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	636.19	1367.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	636.19	1367.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30500.00	82500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	31136.19	83867.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31136.19	83867.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13315.00	92395.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13315.00	92395.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	636.19	1367.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	636.19	1367.05

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 25
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)
A. Floyd E Bergen

Mailing Address **PO Box 721200**

City **Norman** State **OK** Zip Code **73070-4916**

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

Name of Employer **Bergen Enterprises** Occupation **Executive**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	1	4

Transaction ID : SA11AI.8440

Amount of Each Receipt this Period

1	0	0	0	0	0	0	0	0	0

1000.00

PAC Contribution

Full Name (Last, First, Middle Initial)
B. Greg Blankenship

Mailing Address **5501 CR 7560**

City **Lubbock** State **TX** Zip Code **79423**

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

Name of Employer **Patch Management** Occupation **President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	1	4

Transaction ID : SA11AI.8448

Amount of Each Receipt this Period

1	0	0	0	0	0	0	0	0	0

800.00

PAC Contribution

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

Mailing Address **PO Box 519**

City **Plainview** State **TX** Zip Code **79072**

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

Name of Employer **Bravo Enterprises Inc.** Occupation **President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	1	4

Transaction ID : SA11AI.8428

Amount of Each Receipt this Period

1	0	0	0	0	0	0	0	0	0

300.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ **2100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A. Doug Cleveland
 Full Name (Last, First, Middle Initial)
 Mailing Address 716 Renee Ford Rd
 City Locust State NC Zip Code 28097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Butler Enterprises, Inc. Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 13 / 2014
Transaction ID : SA11AI.8444
 Amount of Each Receipt this Period 1000.00
 PAC Contribution

B. Martin Hemmingway
 Full Name (Last, First, Middle Initial)
 Mailing Address 506 W Oak
 City Junction City State KS Zip Code 66441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pizza Huts of Manhatan Occupation Director of Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 21 / 2014
Transaction ID : SA11AI.8425
 Amount of Each Receipt this Period 600.00
 PAC Contribution

C. Albert Kirk
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 789950
 City Wichita State KS Zip Code 67278-9950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Daland Corporation Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 16 / 2014
Transaction ID : SA11AI.8441
 Amount of Each Receipt this Period 500.00
 PAC Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 25
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)
A. Katie Kirk

Mailing Address 3810 Indian River Dr E

City State Zip Code
Vero Beach FL 32963-1468

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

Name of Employer Occupation
Daland Corporation House Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2014

Transaction ID : SA11AI.8436

Amount of Each Receipt this Period
500.00

PAC Contribution

Full Name (Last, First, Middle Initial)
B. Marty Lobdell

Mailing Address 3967 Delhi Glen Lane

City State Zip Code
Ann Arbor MI 48103

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

Name of Employer Occupation
Hospitality West Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SA11AI.8417

Amount of Each Receipt this Period
500.00

PAC Contribution

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

Mailing Address 3090 Johnson Rd, Suite 2

City State Zip Code
Stevensville MI 49127

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

Name of Employer Occupation
Trigo Hospitality President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2014

Transaction ID : SA11AI.8427

Amount of Each Receipt this Period
2500.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 25
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)
A. Michael Maska

Mailing Address 313 Hackberry Rd.

City Galesburg	State IL	Zip Code 61401
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FEC ID number of contributing federal political committee. **C**

Name of Employer Knorr Enterprises	Occupation Executive
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

Transaction ID : SA11AI.8446

Amount of Each Receipt this Period
250.00

PAC Contribution

Full Name (Last, First, Middle Initial)
B. Sheela Patel

Mailing Address 5070 Rockhampton Court

City Yorba Linda	State CA	Zip Code 92887
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FEC ID number of contributing federal political committee. **C**

Name of Employer PennyVision, LLC	Occupation VP
--------------------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2014

Transaction ID : SA11AI.8421

Amount of Each Receipt this Period
500.00

PAC Contribution

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

Mailing Address 3708 W. 61st Terrace

City Fairway	State KS	Zip Code 66205
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FEC ID number of contributing federal political committee. **C**

Name of Employer WKRP	Occupation Executive
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11AI.8445

Amount of Each Receipt this Period
500.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional).....	▶	1250.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A. Andrew Rosen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1146 Celebration Blvd
 City Celebration State FL Zip Code 34747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CFL Pizza LLC Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 17 / 2014
Transaction ID : SA11AI.8424
 Amount of Each Receipt this Period 1000.00
 PAC Contribution

B. Terry Ruder
 Full Name (Last, First, Middle Initial)
 Mailing Address 2764 W. 162nd Street
 City Stilwell State KS Zip Code 66085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WKRP Management LLC Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 06 / 2014
Transaction ID : SA11AI.8449
 Amount of Each Receipt this Period 1000.00
 PAC Contribution

C. Kimberley Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 2061 McMahan Hollow Road
 City Pleasant View State TN Zip Code 37146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bullock-Scott Restaurant Group Occupation Vice Chief of HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 03 / 2014
Transaction ID : SA11AI.8419
 Amount of Each Receipt this Period 250.00
 PAC Contribution

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial) A. Ronald Scott		Date of Receipt MM / DD / YYYY 04 / 03 / 2014 Transaction ID : SA11AI.8420
Mailing Address 2061 McMahan Hollow Rd		Amount of Each Receipt this Period 250.00
City Pleasant View	State TN	Zip Code 37146
FEC ID number of contributing federal political committee.	C	
Name of Employer Bullock-Scott Restaurant Group	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Alan Seiwert		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 Transaction ID : SA11AI.8447
Mailing Address 1305 N Covington Circle		Amount of Each Receipt this Period 250.00
City Wichita	State KS	Zip Code 67212-5661
FEC ID number of contributing federal political committee.	C	
Name of Employer Daland Corporation	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dave Staab		Date of Receipt MM / DD / YYYY 04 / 01 / 2014 Transaction ID : SA11AI.8415
Mailing Address 3103 Brentwood Blvd		Amount of Each Receipt this Period 500.00
City Grand Island	State NE	Zip Code 68801-7250
FEC ID number of contributing federal political committee.	C	
Name of Employer Staab Management Co.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial) A. Stephen Washburn			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2014 Transaction ID : SA11AI.8426
Mailing Address P O Box 411			Amount of Each Receipt this Period 240.00
City Monmouth	State IL	Zip Code 61462	PAC Contribution
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 240.00	
Name of Employer A & D Management	Occupation Area Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Daniel Wright			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 03 / 2014 Transaction ID : SA11AI.8418
Mailing Address P O Box 370			Amount of Each Receipt this Period 500.00
City Kent	State OH	Zip Code 44240	PAC Contribution
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00	
Name of Employer Hallrich Inc.	Occupation Exec. VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C.			Date of Receipt M M M / D D D / Y Y Y Y Y Y
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼	
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional).....▶	740.00
TOTAL This Period (last page this line number only).....▶	12940.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

Transaction ID : **SB21B.8429**

Amount of Each Disbursement this Period

2	9	0	9	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

Transaction ID : **SB21B.8430**

Amount of Each Disbursement this Period

5	2	7
---	---	---

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

Transaction ID : **SB21B.8496**

Amount of Each Disbursement this Period

2	7	0	0
---	---	---	---

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

3	2	3	2	5
---	---	---	---	---

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

3	2	3	2	5
---	---	---	---	---

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : **SB21B.8431**

Amount of Each Disbursement this Period

56.69

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : **SB21B.8432**

Amount of Each Disbursement this Period

0.08

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : **SB21B.8433**

Amount of Each Disbursement this Period

14.91

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

71.68

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2014

Transaction ID : SB21B.8434

Amount of Each Disbursement this Period

0.19

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SB21B.8452

Amount of Each Disbursement this Period

122.14

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SB21B.8453

Amount of Each Disbursement this Period

5.27

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

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

127.60

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2014

Transaction ID : SB21B.8454

Amount of Each Disbursement this Period

0.02

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SB21B.8455

Amount of Each Disbursement this Period

56.60

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2014

Transaction ID : SB21B.8456

Amount of Each Disbursement this Period

9.00

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

65.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : SB21B.8457

Amount of Each Disbursement this Period

0.09

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2014

Transaction ID : SB21B.8497

Amount of Each Disbursement this Period

5.09

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 4

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2014

Transaction ID : SB21B.8498

Amount of Each Disbursement this Period

42.86

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

48.04

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

636.19

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. ANDY TOBIN FOR CONGRESS

Mailing Address 2532 NORTH 4TH STREET #528

City State Zip Code
FLAGSTAFF AZ 86004

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: AZ District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	01	/	2014

Transaction ID : SB23.8486

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. COFFMAN FOR CONGRESS

Mailing Address 4950 S YOSEMITE STREET F2 #511

City State Zip Code
GREENWOOD VILLAGE CO 80111

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	02	/	2014

Transaction ID : SB23.8462

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COFFMAN FOR CONGRESS

Mailing Address 4950 S YOSEMITE STREET F2 #511

City State Zip Code
GREENWOOD VILLAGE CO 80111

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	02	/	2014

Transaction ID : SB23.8466

Amount of Each Disbursement this Period

1500.00

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

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

3500.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. COMSTOCK FOR CONGRESS

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8482

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City LONE TREE State CO Zip Code 80124

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 04

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8464

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City LONE TREE State CO Zip Code 80124

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 04

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2014

Transaction ID : SB23.8463

Amount of Each Disbursement this Period

1500.00

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

3500.00

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

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVID JOLLY

Mailing Address P. O. BOX 1158

City INDIAN ROCKS BEACH State FL Zip Code 33785

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: FL District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8471

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MIA LOVE

Mailing Address PO BOX 255

City RIVERTON State UT Zip Code 84065

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: UT District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8484

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF PATRICK MURPHY

Mailing Address 4521 PGA BLVD. #412

City PALM BEACH GARDENS State FL Zip Code 33418

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: FL District: 18

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8474

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. HEALTHCARE FREEDOM FUND

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8477

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KLINE FOR CONGRESS

Mailing Address PO Box 21632

City Eagan State MN Zip Code 55121

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: MN District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2014

Transaction ID : SB23.8461

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. KLINE FOR CONGRESS

Mailing Address PO Box 21632

City Eagan State MN Zip Code 55121

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: MN District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2014

Transaction ID : SB23.8465

Amount of Each Disbursement this Period

1500.00

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

4000.00

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

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. KURT SCHRADER FOR CONGRESS

Mailing Address PO BOX 3314

City OREGON CITY State OR Zip Code 97045

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8478

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LAMBORN FOR CONGRESS

Mailing Address P.O. BOX 64107

City COLORADO SPRINGS State CO Zip Code 80962

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: CO District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8469

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PIONEER POLITICAL ACTION COMMITTEE

Mailing Address 701 8TH STREET, NW
SUITE 500

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB23.8480

Amount of Each Disbursement this Period

2500.00

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

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

4500.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. POMPEO FOR CONGRESS INC

Mailing Address PO BOX 780146

City WICHITA State KS Zip Code 67212

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: KS District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	4

Transaction ID : SB23.8476

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. RODNEY FOR CONGRESS

Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	4

Transaction ID : SB23.8470

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. RON JOHNSON FOR SENATE INC

Mailing Address 601 OREGON STREET SUITE A

City OSHKOSH State WI Zip Code 54902

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	4

Transaction ID : SB23.8493

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

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

7	0	0	0	0	0	0	0	0	0

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

7	0	0	0	0	0	0	0	0	0

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. SIMPSON FOR CONGRESS

Mailing Address 1487 PARKWAY DRIVE

City BLACKFOOT State ID Zip Code 83221

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ID District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	4

Transaction ID : SB23.8467

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. SOUTHERLAND FOR CONGRESS

Mailing Address PO BOX 1692

City LYNN HAVEN State FL Zip Code 32444

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	4

Transaction ID : SB23.8473

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. VOTETIPTON.COM

Mailing Address PO BOX 1582

City CORTEZ State CO Zip Code 81321

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	4

Transaction ID : SB23.8468

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

3	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Full Name (Last, First, Middle Initial)

A. WALTERS FOR CONGRESS

Mailing Address C/O 8001 IRVINE CENTER DRIVE, #400

City IRVINE State CA Zip Code 92618

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 45

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 01 / 2014

Transaction ID : SB23.8488

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. YOUNG FOR IOWA, INC.

Mailing Address PO BOX 162

City VAN METER State IA Zip Code 50261

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: IA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 01 / 2014

Transaction ID : SB23.8490

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

2000.00

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

30500.00