

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.

YOPAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ 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 in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period through

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

MEIER, J.THOMAS, , ,

Type or Print Name of Treasurer

Signature of Treasurer MEIER, J.THOMAS, , , [Electronically Filed] Date

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

YOPAC

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="2018"/> | | <input type="text" value="205170.69"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="336439.42"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="42406.48"/> | <input type="text" value="356560.72"/> |
| (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="378845.90"/> | <input type="text" value="561731.41"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="25437.70"/> | <input type="text" value="208323.21"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="353408.20"/> | <input type="text" value="353408.20"/> |
| 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

Write or Type Committee Name

YOPAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 18 / 2018 To: M M / D D / Y Y Y Y Y 11 / 26 / 2018

| 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)..... | 5000.00 | 65500.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 5000.00 | 65500.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 12500.00 | 171000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 17500.00 | 236500.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 24906.48 | 115060.72 |
| 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 | 5000.00 |
| 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)).....▶ | 42406.48 | 356560.72 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 42406.48 | 356560.72 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 5437.70 | 119123.21 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 5437.70 | 119123.21 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 5200.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 20000.00 | 74500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 9500.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 25437.70 | 208323.21 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 25437.70 | 208323.21 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

| 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) | 17500.00 | 236500.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 17500.00 | 236500.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 5437.70 | 119123.21 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 5437.70 | 119123.21 |

**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 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
YOPAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Singer, Paul, , ,

Mailing Address 1 West 81st St

City New York State NY Zip Code 10024

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

Name of Employer (for Individual) Elliott Management Corp. Occupation (for Individual) Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2018

Transaction ID : SA11AI.6606

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | 5000.00 |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 7 OF 15 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
YOPAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)

Mailing Address 1445 NEW YORK AVENUE NW
STE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2018

Transaction ID : SA11C.6609

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11C.6608

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE

Mailing Address 1201 F STREET, NW SUITE 450

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00111559

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2018

Transaction ID : SA11C.6630

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 7500.00 |
| 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 8 OF 15 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
YOPAC

A. THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 101 CONSTITUTION AVENUE, NW
SUITE 1000 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00350744

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2018

Transaction ID : SA11C.6613

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 5000.00 |
| TOTAL This Period (last page this line number only)..... | 12500.00 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 15 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
YOPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. YODER KANSAS VICTORY FUND

Mailing Address 901 N WASHINGTON ST
STE 700

City ALEXANDRIA State VA Zip Code 22314

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100097.42

Date of Receipt
10 / 22 / 2018
Transaction ID : SA12.6599

Amount of Each Receipt this Period
9943.18

Memo Item
JFC Distribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Hebenstreit, James, , ,

Mailing Address 5828 Pembroke Ct

City Mission Hills State KS Zip Code 66208

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

Name of Employer (for Individual) Occupation (for Individual)
Bartlett Grain CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 15 / 2018
Transaction ID : SA12.6599.0

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Hebenstreit, Marilyn, , ,

Mailing Address 5828 Pembroke Ct

City Mission Hills State KS Zip Code 66208

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

Name of Employer (for Individual) Occupation (for Individual)
Self Employed Community Volunteer

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 15 / 2018
Transaction ID : SA12.6599.1

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

SUBTOTAL of Receipts This Page (optional)..... ▶ 9943.18

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 15 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
YOPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. YODER KANSAS VICTORY FUND

Mailing Address 901 N WASHINGTON ST
STE 700

City ALEXANDRIA State VA Zip Code 22314

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
103513.96

Date of Receipt
10 / 29 / 2018
Transaction ID : SA12.6611

Amount of Each Receipt this Period
3416.54

Memo Item
JFC Distribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Herrmann, Henry, , ,

Mailing Address 26801 W 108th St

City Olathe State KS Zip Code 66061

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

Name of Employer (for Individual) Occupation (for Individual)
Waddell & Reed Retired Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 25 / 2018
Transaction ID : SA12.6611.0

Amount of Each Receipt this Period
4000.00

Memo Item
Transfer Memo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. YODER KANSAS VICTORY FUND

Mailing Address 901 N WASHINGTON ST
STE 700

City ALEXANDRIA State VA Zip Code 22314

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
115060.72

Date of Receipt
11 / 02 / 2018
Transaction ID : SA12.6617

Amount of Each Receipt this Period
11546.76

Memo Item
JFC Distribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 14963.30

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 15 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
YOPAC

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Wiens, Lewis, H., , | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2018 |
| Mailing Address 148 Lakeshore Dr W | | Transaction ID : SA12.6617.0 |
| City Lake Quivira | State KS | Zip Code 66217 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer (for Individual) True North Hotel Group | Occupation (for Individual) President | <input checked="" type="checkbox"/> Memo Item Transfer Memo |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | |

| | | |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sanders, Antoinette, M., , | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 |
| Mailing Address 13833 Horton Dr | | Transaction ID : SA12.6617.1 |
| City Overland Park | State KS | Zip Code 66223 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer (for Individual) Homemaker | Occupation (for Individual) Homemaker | <input checked="" type="checkbox"/> Memo Item Transfer Memo |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sanders, Philip, J., , | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 |
| Mailing Address 13833 Horton Dr | | Transaction ID : SA12.6617.2 |
| City Overland Park | State KS | Zip Code 66223 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer (for Individual) Waddell & Reed | Occupation (for Individual) CEO | <input checked="" type="checkbox"/> Memo Item Transfer Memo |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 5000.00 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | 24906.48 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOPAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. ABH Consulting | | Date of Disbursement MM / DD / YYYY 11 / 16 / 2018 |
| Mailing Address 3410 Alabama Ave | | FEC Identification Number C [] Transaction ID : SB21B.6631 |
| City Alexandria | State VA | Zip Code 22305 |
| Purpose of Disbursement PAC Fundraising Consulting | | Amount of Each Disbursement this Period [] 1500.00 |
| Candidate Name | | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. ABH Consulting | | Date of Disbursement MM / DD / YYYY 11 / 16 / 2018 |
| Mailing Address 3410 Alabama Ave | | FEC Identification Number C [] Transaction ID : SB21B.6632 |
| City Alexandria | State VA | Zip Code 22305 |
| Purpose of Disbursement Shipping/Transportation | | Amount of Each Disbursement this Period [] 88.11 |
| Candidate Name | | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Ashby Law PC | | Date of Disbursement MM / DD / YYYY 11 / 01 / 2018 |
| Mailing Address 602 Cameron St Ste 102 | | FEC Identification Number C [] Transaction ID : SB21B.6614 |
| City Alexandria | State VA | Zip Code 22314 |
| Purpose of Disbursement PAC Legal Services | | Amount of Each Disbursement this Period [] 500.00 |
| Candidate Name | | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [] 2088.11 |
| TOTAL This Period (last page this line number only).....▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOPAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Koch & Hoos, LLC | | Date of Disbursement MM / DD / YYYY 11 / 01 / 2018 |
| Mailing Address 901 N Washington St, Suite 700 | | FEC Identification Number C [] Transaction ID : SB21B.6616 Amount of Each Disbursement this Period [] 1572.59 |
| City Alexandria | State VA | Zip Code 22314 |
| Purpose of Disbursement PAC Accounting/Compliance Services | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: [] District: [] | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Koch & Hoos, LLC | | Date of Disbursement MM / DD / YYYY 11 / 16 / 2018 |
| Mailing Address 901 N Washington St, Suite 700 | | FEC Identification Number C [] Transaction ID : SB21B.6633 Amount of Each Disbursement this Period [] 1763.00 |
| City Alexandria | State VA | Zip Code 22314 |
| Purpose of Disbursement PAC Accounting/Compliance Services | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: [] District: [] | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY [] / [] / [] |
| Mailing Address | | FEC Identification Number C [] Amount of Each Disbursement this Period [] |
| City | State | Zip Code |
| Purpose of Disbursement | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: [] District: [] | <input type="checkbox"/> Memo Item | |

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

3335.59

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

5423.70

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOPAC

Full Name (Last, First, Middle Initial)
A. ANDY BARR FOR CONGRESS, INC.

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 18 | | | 2018 | | | |

Mailing Address PO BOX 2059

FEC Identification Number

C C00467571

Transaction ID : SB23.6594

Amount of Each Disbursement this Period

5000.00

Memo Item

City LEXINGTON State KY Zip Code 40588

Purpose of Disbursement
Contribution

Candidate Name

BARR, GARLAND ANDY, , ,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: KY District: 06

Full Name (Last, First, Middle Initial)
B. CARLOS CURBELO CONGRESS

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 18 | | | 2018 | | | |

Mailing Address 8724 SUNSET DR #355

FEC Identification Number

C C00546846

Transaction ID : SB23.6598

Amount of Each Disbursement this Period

2500.00

Memo Item

City MIAMI State FL Zip Code 33173

Purpose of Disbursement
Contribution

Candidate Name

CURBELO, CARLOS, , ,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: FL District: 26

Full Name (Last, First, Middle Initial)
C. RODNEY FOR CONGRESS

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 18 | | | 2018 | | | |

Mailing Address PO BOX 344

FEC Identification Number

C C00521948

Transaction ID : SB23.6586

Amount of Each Disbursement this Period

5000.00

Memo Item

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement
Contribution

Candidate Name

DAVIS, RODNEY L, , ,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: IL District: 13

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

12500.00

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"/> 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)
YOPAC

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. ROSKAM FOR CONGRESS COMMITTEE | | Date of Disbursement MM / DD / YYYY 10 / 23 / 2018 |
| Mailing Address P. O. BOX 713 | | FEC Identification Number C 000410969 Transaction ID : SB23.6602 |
| City WHEATON | State IL | Zip Code 60187 |
| Purpose of Disbursement Contribution | | Amount of Each Disbursement this Period 2500.00 |
| Candidate Name ROSKAM, PETER, , , | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: IL | District: 06 | |
| | | <input type="checkbox"/> Memo Item |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. WALTERS FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 10 / 18 / 2018 |
| Mailing Address 9070 IRVINE CENTER DRIVE, #150 | | FEC Identification Number C 000546853 Transaction ID : SB23.6590 |
| City IRVINE | State CA | Zip Code 92618 |
| Purpose of Disbursement Contribution | | Amount of Each Disbursement this Period 5000.00 |
| Candidate Name WALTERS, MIMI, , , | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: CA | District: 45 | |
| | | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | FEC Identification Number C |
| City | State | Zip Code |
| Purpose of Disbursement | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: | District: | |
| | | <input type="checkbox"/> Memo Item |

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

7500.00

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

20000.00