

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 Kansas Leadership PAC

ADDRESS (number and street) PO Box 2641 Alexandria VA 22313 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00632323 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: [X] April 15 Quarterly Report (Q1) (b) Monthly Report Due On: [] Feb 20 (M2) [] May 20 (M5) [] Aug 20 (M8) [] Nov 20 (M11) [] Mar 20 (M3) [] Jun 20 (M6) [] Sep 20 (M9) [] Dec 20 (M12) [] 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) (d) 30-Day POST-Election Report for the: [] General (30G) [] Runoff (30R) [] Special (30S)

5. Covering Period 01 / 01 / 2018 through 03 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Marston, Chris, , , Type or Print Name of Treasurer

Signature of Treasurer Marston, Chris, , , [Electronically Filed] Date 04 / 11 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Kansas Leadership PAC

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="130.94"/>	<input type="text" value="130.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="130.94"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="42217.57"/>	<input type="text" value="42217.57"/>
(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="42348.51"/>	<input type="text" value="42348.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16206.02"/>	<input type="text" value="16206.02"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26142.49"/>	<input type="text" value="26142.49"/>
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. 05/2016)

Write or Type Committee Name

Kansas Leadership PAC

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7500.00	7500.00
12. Transfers From Affiliated/Other Party Committees.....	34331.86	34331.86
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).....	250.00	250.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	135.71	135.71
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)).....▶	42217.57	42217.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	42217.57	42217.57

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	6706.02	6706.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6706.02	6706.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	9500.00
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	0.00
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)) ..	16206.02	16206.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16206.02	16206.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	7500.00	7500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7500.00	7500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6706.02	6706.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	250.00	250.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6456.02	6456.02

**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 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Kansas Leadership PAC

A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1325 MASSACHUSETTS AVE., NW
 City WASHINGTON State DC Zip Code 20005-4171
 FEC ID number of contributing federal political committee. **C** C00238725
 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
 03 / 29 / 2018
Transaction ID : SA11C.3014
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

B. POET PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4615 N LEWIS AVE
 City SIOUX FALLS State SD Zip Code 57104-7116
 FEC ID number of contributing federal political committee. **C** C00450692
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : SA11C.3028
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

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 M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	7500.00

**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 18
<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)
Kansas Leadership PAC

A. TEAM MARSHALL

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

Mailing Address PO BOX 26141

City ALEXANDRIA	State VA	Zip Code 22313-6141
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FEC ID number of contributing federal political committee. **C** C00632950

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
33331.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2018

Transaction ID : SA12.2938

Amount of Each Receipt this Period
16165.28

Memo Item
TRANSFER

B. KLOTZ, CHRISTIE, KAYE, ,

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

Mailing Address PO BOX 86

City HOLCOMB	State KS	Zip Code 67851-0086
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
KLOTZ SAND CO., INC. EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2018

Transaction ID : SA.2926.3.8001

Amount of Each Receipt this Period
2100.00

Memo Item
TRANSFER
TRANSFER FROM TEAM MARSHALL

C. KLOTZ, CHRISTIE, KAYE, ,

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

Mailing Address PO BOX 86

City HOLCOMB	State KS	Zip Code 67851-0086
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
KLOTZ SAND CO., INC. EXECUTIVE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2018

Transaction ID : SA.2934.3.8001

Amount of Each Receipt this Period
2500.00

Memo Item
TRANSFER
TRANSFER FROM TEAM MARSHALL

SUBTOTAL of Receipts This Page (optional).....	16165.28
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 18
<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)
Kansas Leadership PAC

A. NELSON, RON, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3322 LINCOLN DR
 City HAYS State KS Zip Code 67601-1577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOWNING NELSON OIL CO., INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2600.00

Date of Receipt 02 / 21 / 2018
Transaction ID : SA.2932.3.8001
 Amount of Each Receipt this Period 2600.00
 Memo Item
 TRANSFER
 TRANSFER FROM TEAM MARSHALL

B. NELSON, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 W FOX RD PO BOX 38
 City PRAIRIE VIEW State KS Zip Code 67647-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NELSON FARMS Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 02 / 08 / 2018
Transaction ID : SA.2933.3.8001
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 PARTNERSHIP ATTRIB: PRAIRIE VALLEY FEEDERS, LLC

C. SPORER, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 230
 City OAKLEY State KS Zip Code 67748-0230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2300.00

Date of Receipt 02 / 13 / 2018
Transaction ID : SA.2935.3.8001
 Amount of Each Receipt this Period 2300.00
 Memo Item
 TRANSFER
 PARTNERSHIP ATTRIB: SPORER FARMS LLC

SUBTOTAL of Receipts This Page (optional)..... 0.00
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 9 OF 18
<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)
Kansas Leadership PAC

A. SPORER, TROY, MICHEAL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 380 HWY 83

City OAKLEY	State KS	Zip Code 67748-8938
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPORER LAND DEVELOPMENT	Occupation (for Individual) VICE PRESIDENT
--------------------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2018

Transaction ID : SA.2936.3.8001

Amount of Each Receipt this Period
2300.00

Memo Item
TRANSFER

PARTNERSHIP ATTRIB: SPORER FARMS LLC

B. PRAIRIE VALLEY FEEDERS, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 38

City LONG ISLAND	State KS	Zip Code 67647-0038
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2018

Transaction ID : SA.2918.3.8001

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

SEE PARTNERSHIP ATTRIB

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

Mailing Address PO BOX 230

City OAKLEY	State KS	Zip Code 67748-0230
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2018

Transaction ID : SA.2920.3.8001

Amount of Each Receipt this Period
4600.00

Memo Item
TRANSFER

SEE PARTNERSHIP ATTRIB

SUBTOTAL of Receipts This Page (optional).....	0.00
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 18
<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)
Kansas Leadership PAC

A. TEAM MARSHALL

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

Mailing Address PO BOX 26141

City ALEXANDRIA	State VA	Zip Code 22313-6141
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FEC ID number of contributing federal political committee. **C** C00632950

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
33331.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2018

Transaction ID : SA12.3042

Amount of Each Receipt this Period
17166.58

Memo Item
TRANSFER

B. FOOTE, MICHELLE, , ,

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

Mailing Address P.O. BOX 416

City HOXIE	State KS	Zip Code 67740-0416
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2018

Transaction ID : SA.2998.3.8002

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM TEAM MARSHALL

C. FOOTE, SCOTT, , ,

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

Mailing Address P.O. BOX 416

City HOXIE	State KS	Zip Code 67740-0416
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2018

Transaction ID : SA.3000.3.8002

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM TEAM MARSHALL

SUBTOTAL of Receipts This Page (optional).....	17166.58
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 18
<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)
Kansas Leadership PAC

A. TASSET, DANIEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14557 SHERWOOD RD.

City LEAWOOD	State KS	Zip Code 66224-9807
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NUETERRA	Occupation (for Individual) CEO/CHAIRMAN
-----------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2746.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2018

Transaction ID : SA.2954.3.8002

Amount of Each Receipt this Period
2746.04

Memo Item
TRANSFER
TRANSFER FROM TEAM MARSHALL

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

Mailing Address P.O. BOX 474

City HOXIE	State KS	Zip Code 67740-0474
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
-------------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2018

Transaction ID : SA.2960.3.8002

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM TEAM MARSHALL

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

Mailing Address P.O. BOX 26141

City ALEXANDRIA	State VA	Zip Code 22313
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FEC ID number of contributing federal political committee. **C** C00632950

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2018

Transaction ID : SA12.2253

Amount of Each Receipt this Period
1000.00

Memo Item
RETURN OF ADVANCE (10/20/17)

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	34331.86

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

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

FOR LINE NUMBER: PAGE 12 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Kansas Leadership PAC

A. CMDI
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1593 SPRING HILL RD
 City VIENNA State VA Zip Code 22182
 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 ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2018
Transaction ID : SA15.2522
 Amount of Each Receipt this Period
 250.00
 Memo Item
REFUND

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).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

**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 13 OF 18
<input 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 checked="" type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Kansas Leadership PAC

A. BRIAN MAST FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3016

City STUART	State FL	Zip Code 34995
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00579896

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
135.71

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		26		2018

Transaction ID : SA16.2454

Amount of Each Receipt this Period

135.71

 Memo Item

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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

--

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.71
TOTAL This Period (last page this line number only).....	135.71

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)
Kansas Leadership PAC

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2528

Amount of Each Disbursement this Period: 250.60

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD

City VIENNA State VA Zip Code 22182

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2520

Amount of Each Disbursement this Period: 250.00

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD

City VIENNA State VA Zip Code 22182

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 07 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2524

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1000.60

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)
Kansas Leadership PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I2534
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOUSE MEMBERS DINING ROOM

Mailing Address THE CAPITOL

City WASHINGTON State DC Zip Code 20510

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I2536
Amount of Each Disbursement this Period
730.20

Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICES LLC

Mailing Address 611 PENNSYLVANIA AVE SE STE 267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL AND EVENT SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I2394
Amount of Each Disbursement this Period
1809.41

Memo Item

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

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

2789.61

**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)
Kansas Leadership PAC

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL

Mailing Address 401 N WABASH AVE

City CHICAGO State IL Zip Code 60611

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I2535
Amount of Each Disbursement this Period
1113.40

Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL

Mailing Address 401 N WABASH AVE

City CHICAGO State IL Zip Code 60611

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I2538
Amount of Each Disbursement this Period
1102.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

2215.40
6005.61

**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)
Kansas Leadership PAC

Full Name (Last, First, Middle Initial) A. BRIAN MAST FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address PO BOX 3016		FEC Identification Number C 000579896 Transaction ID : SB23.I2435 Amount of Each Disbursement this Period 2700.00
City STUART	State FL	Zip Code 34995
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name MAST, BRIAN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 18	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BRIAN MAST FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address PO BOX 3016		FEC Identification Number C 000579896 Transaction ID : SB23.I2436 Amount of Each Disbursement this Period 1300.00
City STUART	State FL	Zip Code 34995
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name MAST, BRIAN, , ,		
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: FL	District: 18	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. COFFMAN FOR CONGRESS 2018		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 4950 S YOSEMITE ST F2 #511		FEC Identification Number C 000629287 Transaction ID : SB23.I2543 Amount of Each Disbursement this Period 1000.00
City GREENWOOD	State CO	Zip Code 80111
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name COFFMAN, MIKE , REP., ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 06	
		<input type="checkbox"/> Memo Item

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

5000.00

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)
Kansas Leadership PAC

Full Name (Last, First, Middle Initial) A. JULIO GONZALEZ FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 217 BAYSIDE DRIVE		FEC Identification Number C00671537 Transaction ID : SB23.I2542
City VENICE	State FL	Zip Code 34285
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name GONZALEZ, JULIO, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 17	

Full Name (Last, First, Middle Initial) B. STEVE FERRARA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 22 / 2018
Mailing Address PO BOX 97130		FEC Identification Number C00640268 Transaction ID : SB23.I2544
City PHOENIX	State AZ	Zip Code 85060
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name FERRARA, STEVE , MD, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ	District: 09	

Full Name (Last, First, Middle Initial) C. YODER FOR CONGRESS, INC		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address 14521 MASTIN ST		FEC Identification Number C00472365 Transaction ID : SB23.I2541
City OVERLAND P	State KS	Zip Code 66221
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name YODER, KEVIN, , ,		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) ▼	<input type="checkbox"/> Memo Item
State: KS	District: 03	

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	9500.00