

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**
Reclaim Kansas Inc

ADDRESS (number and street) 832 Pennsylvania St.
Check if different than previously reported. (ACC) Lawrence KS 66044

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00580217 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 [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2016 through [MM] / [DD] / [YYYY] 09 / 30 / 2016

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

Signature of Treasurer Rooney, Diana , , , [Electronically Filed] Date [MM] / [DD] / [YYYY] 10 / 14 / 2016

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**

Write or Type Committee Name

Reclaim Kansas 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="2016"/>	<input type="text" value="43383.96"/>	<input type="text" value="43383.96"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27427.18"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13322.05"/>	<input type="text" value="95417.67"/>
(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="40749.23"/>	<input type="text" value="138801.63"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="24624.19"/>	<input type="text" value="122676.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="16125.04"/>	<input type="text" value="16125.04"/>
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

Reclaim Kansas 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).....	0.00	10317.62
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	10317.62
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	82000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12000.00	92317.62
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).....	1322.05	3100.05
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)).....▶	13322.05	95417.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13322.05	95417.67

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	24624.19	97676.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	24624.19	97676.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	25000.00
(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	25000.00
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)) ..	24624.19	122676.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24624.19	122676.59

DETAILED SUMMARY PAGE
of Disbursements

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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)	12000.00	92317.62
34. Total Contribution Refunds (from Line 28(d))	0.00	25000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12000.00	67317.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	24624.19	97676.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1322.05	3100.05
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23302.14	94576.54

**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 6 OF 25
<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

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)
Reclaim Kansas Inc

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northeast KS Building and Construction Trades Council Political Action Committee

Mailing Address **PO Box 750045**

City Topeka	State KS	Zip Code 66675-0045
-----------------------	--------------------	-------------------------------

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 ▼
2000.00

Date of Receipt
09 / 12 / 2016

Transaction ID : VR07RHKWPP2

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP

Mailing Address **3 Park Pl**

City Annapolis	State MD	Zip Code 21401-3687
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00012476**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35000.00

Date of Receipt
09 / 13 / 2016

Transaction ID : VR07RHKWPP9

Amount of Each Receipt this Period
10000.00

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	12000.00
TOTAL This Period (last page this line number only).....▶	12000.00

**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 25
<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)
Reclaim Kansas Inc

A. United States Treasury
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 37941

City Hartford	State CT	Zip Code 06176-7941
------------------	-------------	------------------------

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 ▼
1322.05

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2016

Transaction ID : VR07RHYYS20

Amount of Each Receipt this Period
1322.05

Memo Item

Refund for overpayment of taxes

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).....	1322.05
TOTAL This Period (last page this line number only).....	1322.05

**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)
Reclaim Kansas Inc

A. Blue Cross and Blue Shield of Kansas

Full Name (Last, First, Middle Initial)

Mailing Address 3017 W 6th St
Ste B

City Lawrence State KS Zip Code 66049-2364

Purpose of Disbursement Employee Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 12 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAADB

Amount of Each Disbursement this Period: 373.93

Memo Item

B. Blue Cross and Blue Shield of Kansas

Full Name (Last, First, Middle Initial)

Mailing Address 3017 W 6th St
Ste B

City Lawrence State KS Zip Code 66049-2364

Purpose of Disbursement Employee Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ5F

Amount of Each Disbursement this Period: 373.93

Memo Item

C. Blue Cross and Blue Shield of Kansas

Full Name (Last, First, Middle Initial)

Mailing Address 3017 W 6th St
Ste B

City Lawrence State KS Zip Code 66049-2364

Purpose of Disbursement Employee Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ5

Amount of Each Disbursement this Period: 373.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1121.79

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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016	
Mailing Address 1 SE Convenience Blvd		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ5	
City Ankeny	State IA	Zip Code 50021-9672	Amount of Each Disbursement this Period [REDACTED] 20.09
Purpose of Disbursement Travel		Category/ Type 002	<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement MM / DD / YYYY 07 / 11 / 2016	
Mailing Address 1 SE Convenience Blvd		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ5	
City Ankeny	State IA	Zip Code 50021-9672	Amount of Each Disbursement this Period [REDACTED] 29.61
Purpose of Disbursement Travel		Category/ Type 002	<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) C. Covington and Burling LLP		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016	
Mailing Address 850 10th St NW		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ5	
City Washington	State DC	Zip Code 20001-4956	Amount of Each Disbursement this Period [REDACTED] 2040.00
Purpose of Disbursement Legal Fees		Category/ Type 001	<input type="checkbox"/> Memo Item
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2089.70
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial) A. Farm Bureau Financial Services		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 7701 E Kellogg Dr Ste 460		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ6f Amount of Each Disbursement this Period 60.77
City Wichita	State KS	Zip Code 67207-1716
Purpose of Disbursement Insurance	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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. Farm Bureau Financial Services		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 7701 E Kellogg Dr Ste 460		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ68 Amount of Each Disbursement this Period 59.92
City Wichita	State KS	Zip Code 67207-1716
Purpose of Disbursement Insurance	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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. Farm Bureau Financial Services		Date of Disbursement MM / DD / YYYY 09 / 01 / 2016
Mailing Address 7701 E Kellogg Dr Ste 460		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ6 Amount of Each Disbursement this Period 59.92
City Wichita	State KS	Zip Code 67207-1716
Purpose of Disbursement Insurance	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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)..... ▶

180.61

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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement MM / DD / YYYY 07 / 18 / 2016
Mailing Address 2632 Marine Way		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ6f Amount of Each Disbursement this Period [REDACTED] 454.78
City Mountain View	State CA	Zip Code 94043-1126
Purpose of Disbursement Accounting services program		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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. Kansas Department of Labor		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 401 SW Topeka Blvd		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ6V Amount of Each Disbursement this Period [REDACTED] 85.05
City Topeka	State KS	Zip Code 66603-3102
Purpose of Disbursement Taxes		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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. Kansas Department of Revenue		Date of Disbursement MM / DD / YYYY 07 / 14 / 2016
Mailing Address 915 SW Harrison St		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ7 Amount of Each Disbursement this Period [REDACTED] 156.00
City Topeka	State KS	Zip Code 66612-1505
Purpose of Disbursement Taxes		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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).....▶	[REDACTED] 695.83
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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)
Reclaim Kansas Inc

A. Kansas Department of Revenue

Full Name (Last, First, Middle Initial)

Mailing Address 915 SW Harrison St

City Topeka State KS Zip Code 66612-1505

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ7!

Amount of Each Disbursement this Period: 245.00

Memo Item

B. Kansas Department of Revenue

Full Name (Last, First, Middle Initial)

Mailing Address 915 SW Harrison St

City Topeka State KS Zip Code 66612-1505

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ76

Amount of Each Disbursement this Period: 254.00

Memo Item

C. Kansas Turnpike Authority

Full Name (Last, First, Middle Initial)

Mailing Address 9401 E Kellogg Dr

City Wichita State KS Zip Code 67207-1804

Purpose of Disbursement Travel- Turnpike fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ6

Amount of Each Disbursement this Period: 74.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 573.52

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)
Reclaim Kansas Inc

A. Kansas Turnpike Authority

Full Name (Last, First, Middle Initial)

Mailing Address 9401 E Kellogg Dr

City Wichita State KS Zip Code 67207-1804

Purpose of Disbursement Travel- Turnpike fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ6

Amount of Each Disbursement this Period: 47.60

Memo Item

B. Kansas Turnpike Authority

Full Name (Last, First, Middle Initial)

Mailing Address 9401 E Kellogg Dr

City Wichita State KS Zip Code 67207-1804

Purpose of Disbursement Travel- Turnpike fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ7

Amount of Each Disbursement this Period: 26.80

Memo Item

C. LinkedIn

Full Name (Last, First, Middle Initial)

Mailing Address 2029 Stierlin Ct

City Mountain View State CA Zip Code 94043-4655

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ7

Amount of Each Disbursement this Period: 99.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 174.39

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)
Reclaim Kansas Inc

A. LinkedIn

Full Name (Last, First, Middle Initial)

Mailing Address 2029 Stierlin Ct

City Mountain View State CA Zip Code 94043-4655

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ7I

Amount of Each Disbursement this Period: 99.99

Memo Item

B. LinkedIn

Full Name (Last, First, Middle Initial)

Mailing Address 2029 Stierlin Ct

City Mountain View State CA Zip Code 94043-4655

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ7C

Amount of Each Disbursement this Period: 99.99

Memo Item

C. Moravac, Mollie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJA

Amount of Each Disbursement this Period: 1208.43

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1408.41

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)						PAGE 15 OF 25	
	<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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial) A. Moravac, Mollie, , ,		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 4927 Millridge St			
City Shawnee	State KS	Zip Code 66226-9752	
Purpose of Disbursement Payroll		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : VQZ8GAAJA Amount of Each Disbursement this Period 1179.47
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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. Moravac, Mollie, , ,		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 4927 Millridge St			
City Shawnee	State KS	Zip Code 66226-9752	
Purpose of Disbursement Reimbursement- July 2016 Phone and Mileage Reimbursement		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : VQZ8GAAJB Amount of Each Disbursement this Period 848.96
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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 208 S Akard St			
City Dallas	State TX	Zip Code 75202-4295	
Purpose of Disbursement Reimbursement-Phone Stipend for Moravac		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : VQZ8GAAJB Amount of Each Disbursement this Period 80.00
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) ▼		<input checked="" type="checkbox"/> Memo Item * Part of reimbursement for \$848.96 on 7/29/16 to Moravac
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2028.43
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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)
A. Moravac, Mollie, , ,

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 29 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJB

Amount of Each Disbursement this Period: 768.96

Memo Item on 7/29/16 to Moravac * Part of reimbursement for \$848.96

Full Name (Last, First, Middle Initial)
B. Moravac, Mollie, , ,

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 12 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJB

Amount of Each Disbursement this Period: 1179.48

Memo Item

Full Name (Last, First, Middle Initial)
C. Moravac, Mollie, , ,

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement Reimbursement- August 2016 Phone and Mileage Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJC

Amount of Each Disbursement this Period: 871.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2050.58

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)
Reclaim Kansas Inc

A. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address 208 S Akard St

City Dallas State TX Zip Code 75202-4295

Purpose of Disbursement Reimbursement-Phone Stipend for Moravac

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJB

Amount of Each Disbursement this Period: 80.00

Memo Item on 8/31/16 to Moravac

* Part of reimbursement for \$871.10

B. Moravac, Mollie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJB

Amount of Each Disbursement this Period: 791.10

Memo Item

* Part of reimbursement for \$871.10 on 8/31/16 to Moravac

C. Moravac, Mollie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJB

Amount of Each Disbursement this Period: 1179.47

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1179.47

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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial) A. Moravac, Mollie, , ,		Date of Disbursement MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 4927 Millridge St		FEC Identification Number C [REDACTED]	
City Shawnee	State KS	Zip Code 66226-9752	Transaction ID : VQZ8GAAJB!
Purpose of Disbursement Payroll		Category/ Type 001	Amount of Each Disbursement this Period 1179.47
Candidate Name		Memo Item <input type="checkbox"/>	
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. Moravac, Mollie, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 4927 Millridge St		FEC Identification Number C [REDACTED]	
City Shawnee	State KS	Zip Code 66226-9752	Transaction ID : VQZ8GAAJB!
Purpose of Disbursement Payroll		Category/ Type 001	Amount of Each Disbursement this Period 1208.42
Candidate Name		Memo Item <input type="checkbox"/>	
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. Moravac, Mollie, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 4927 Millridge St		FEC Identification Number C [REDACTED]	
City Shawnee	State KS	Zip Code 66226-9752	Transaction ID : VQZ8GAAJC
Purpose of Disbursement Reimbursement- September 2016 Phone and Mileage Reimbursement		Category/ Type 001	Amount of Each Disbursement this Period 771.20
Candidate Name		Memo Item <input type="checkbox"/>	
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)..... ▶

3159.09

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)
Reclaim Kansas Inc

A. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address 208 S Akard St

City Dallas State TX Zip Code 75202-4295

Purpose of Disbursement Reimbursement-Phone Stipend for Moravac

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 30 / 2016

FEC Identification Number C

Transaction ID : VQZ8GAAJB

Amount of Each Disbursement this Period 80.00

Memo Item on 9/30/16 to Moravac

* Part of reimbursement for \$771.20

B. Moravac, Mollie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 30 / 2016

FEC Identification Number C

Transaction ID : VQZ8GAAJB

Amount of Each Disbursement this Period 691.20

Memo Item

* Part of reimbursement for \$771.20 on 9/30/16 to Moravac

C. Pennsylvania Street Investors

Full Name (Last, First, Middle Initial)

Mailing Address 808 Massachusetts St

City Lawrence State KS Zip Code 66044-2658

Purpose of Disbursement July Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 18 / 2016

FEC Identification Number C

Transaction ID : VQZ8GAAJ7

Amount of Each Disbursement this Period 865.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 865.00

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 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)
Reclaim Kansas Inc

A. Pennsylvania Street Investors

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 808 Massachusetts St

M M M	/	D D D	/	Y Y Y Y Y
07		29		2016

City Lawrence State KS Zip Code 66044-2658

FEC Identification Number

Purpose of Disbursement August Rent

C

Transaction ID : VQZ8GAAJ7
Amount of Each Disbursement this Period

Candidate Name

001
Category/ Type

865.00

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Memo Item

B. Pennsylvania Street Investors

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 808 Massachusetts St

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

City Lawrence State KS Zip Code 66044-2658

FEC Identification Number

Purpose of Disbursement September Rent

C

Transaction ID : VQZ8GAAJ8
Amount of Each Disbursement this Period

Candidate Name

001
Category/ Type

865.00

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Memo Item

C. Pennsylvania Street Investors

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 808 Massachusetts St

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

City Lawrence State KS Zip Code 66044-2658

FEC Identification Number

Purpose of Disbursement October Rent

C

Transaction ID : VQZ8GAAJ8
Amount of Each Disbursement this Period

Candidate Name

001
Category/ Type

865.00

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Memo Item

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

2595.00

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

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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 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)
Reclaim Kansas Inc

A. Public Policy Polling

Full Name (Last, First, Middle Initial)

Mailing Address 2912 Highwoods Blvd
Ste 201

City Raleigh State NC Zip Code 27604-1095

Purpose of Disbursement Polling

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 18 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ8I

Amount of Each Disbursement this Period: 3000.00

Memo Item

B. Rooney, Paul, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6601 W 94th Ter

City Overland Park State KS Zip Code 66212-1429

Purpose of Disbursement Social Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ7I

Amount of Each Disbursement this Period: 250.00

Memo Item

C. Rooney, Paul, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6601 W 94th Ter

City Overland Park State KS Zip Code 66212-1429

Purpose of Disbursement Social Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 29 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ7I

Amount of Each Disbursement this Period: 250.00

Memo Item

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

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

3500.00

**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"/> 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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial) A. Rooney, Paul, , ,		Date of Disbursement MM / DD / YYYY 09 / 01 / 2016	
Mailing Address 6601 W 94th Ter		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ7I Amount of Each Disbursement this Period [REDACTED] 250.00	
City Overland Park	State KS	Zip Code 66212-1429	Category/ Type 001
Purpose of Disbursement Social Media Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Rooney, Paul, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 6601 W 94th Ter		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ7I Amount of Each Disbursement this Period [REDACTED] 250.00	
City Overland Park	State KS	Zip Code 66212-1429	Category/ Type 001
Purpose of Disbursement Social Media Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Shell Gas Station		Date of Disbursement MM / DD / YYYY 07 / 11 / 2016	
Mailing Address PO Box 2463		FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ9 Amount of Each Disbursement this Period [REDACTED] 5.51	
City Houston	State TX	Zip Code 77252-2463	Category/ Type 002
Purpose of Disbursement Travel			
Candidate Name		Memo Item <input type="checkbox"/>	
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)..... ▶

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

[REDACTED] 505.51
[REDACTED]

**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)
Reclaim Kansas Inc

A. Shell Gas Station

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ9

Amount of Each Disbursement this Period: 39.40

Memo Item

B. Shell Gas Station

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ9

Amount of Each Disbursement this Period: 20.05

Memo Item

C. Shell Gas Station

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ9

Amount of Each Disbursement this Period: 35.11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 94.56

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

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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)
A. Shell Gas Station

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ9I

Amount of Each Disbursement this Period: 25.14

Memo Item

Full Name (Last, First, Middle Initial)
B. Shell Gas Station

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ9E

Amount of Each Disbursement this Period: 25.18

Memo Item

Full Name (Last, First, Middle Initial)
C. Shell Gas Station

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 22 / 2016

FEC Identification Number: C

Transaction ID : VQZ8GAAJ9

Amount of Each Disbursement this Period: 38.46

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 88.78

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)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial) A. United States Treasury				Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address PO Box 37941				FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJA: Amount of Each Disbursement this Period [REDACTED] 822.30	
City Hartford	State CT	Zip Code 06176-7941	Category/ Type 001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Taxes		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period [REDACTED] 822.30	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		Memo Item <input type="checkbox"/>	
Full Name (Last, First, Middle Initial) B. United States Treasury				Date of Disbursement MM / DD / YYYY 08 / 15 / 2016	
Mailing Address PO Box 37941				FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJ6F Amount of Each Disbursement this Period [REDACTED] 822.30	
City Hartford	State CT	Zip Code 06176-7941	Category/ Type 001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Taxes		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period [REDACTED] 822.30	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		Memo Item <input type="checkbox"/>	
Full Name (Last, First, Middle Initial) C. Walmart				Date of Disbursement MM / DD / YYYY 08 / 02 / 2016	
Mailing Address 702 SW 8th St				FEC Identification Number C [REDACTED] Transaction ID : VQZ8GAAJA Amount of Each Disbursement this Period [REDACTED] 53.53	
City Bentonville	State AR	Zip Code 72716-6209	Category/ Type 001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Office Supplies		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period [REDACTED] 53.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		Memo Item <input type="checkbox"/>	
SUBTOTAL of Disbursements This Page (optional)..... ▶				[REDACTED] 1698.13	
TOTAL This Period (last page this line number only)..... ▶				[REDACTED] 24008.80	