

**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

YOPAC

ADDRESS (number and street)

5631 ABERDEEN RD

☐ Check if different
than previously
reported. (ACC)

FAIRWAY

KS

66205

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00497305

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

LA

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer J.THOMAS MEIER

Signature of Treasurer

J.THOMAS MEIER

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

YOPAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 10 / 01 / 2014

To:

 M M / D D / Y Y Y Y Y
 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		15514.31
(b) Cash on Hand at Beginning of Reporting Period.....	58784.40	
(c) Total Receipts (from Line 19)	10000.00	92797.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	68784.40	108312.18
7. Total Disbursements (from Line 31)	25351.26	64879.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43433.14	43433.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

YOPAC

Report Covering the Period:

From:

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

To:

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

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

40400.00

(ii) Unitemized

0.00

125.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

0.00

40525.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

10000.00

38500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

10000.00

79025.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

13772.87

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

10000.00

92797.87

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

10000.00

92797.87

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4451.26	16479.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4451.26	16479.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	38000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	200.00	200.00
(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)).....	200.00	200.00
29. Other Disbursements	10200.00	10200.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25351.26	64879.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25351.26	64879.04

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10000.00	79025.00
34. Total Contribution Refunds (from Line 28(d))	200.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9800.00	78825.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	4451.26	16479.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	4451.26	16479.04

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 14

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

YOPAC

A. Full Name (Last, First, Middle Initial)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PAC)

Mailing Address 1201 15TH STREET NW
SUITE 400

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00358663

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11C.5029

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing
federal political committee.

C C00428052

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11C.5030

Amount of Each Receipt this Period

5000.00

Contribution

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

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

10000.00

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

10000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

YOPAC

Full Name (Last, First, Middle Initial)

A. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE	State IA	Zip Code 52001
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Purpose of Disbursement
Contribution

Candidate Name

RODNEY LELAND BLUMOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	02	/	2014

Transaction ID : SB23.5055

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ELISE FOR CONGRESS

Mailing Address PO BOX 338

City WILLSBORO	State NY	Zip Code 12996
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Purpose of Disbursement
Contribution

Candidate Name

ELISE M STEFANIKOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	02	/	2014

Transaction ID : SB23.5065

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK GUINTA

Mailing Address P.O. BOX 877

City MANCHESTER	State NH	Zip Code 03105
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Purpose of Disbursement
Contribution

Candidate Name

FRANK GUINTAOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	03	/	2014

Transaction ID : SB23.5079

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

YOPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF NAN HAYWORTH

Mailing Address P.O. BOX 188

City	State	Zip Code
CARMEL	NY	10512

Purpose of Disbursement
Contribution

Candidate Name

NAN HAYWORTHOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	02	/	2014

Transaction ID : SB23.5069

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MOONEY FOR CONGRESS

Mailing Address P.O. BOX 1863

City	State	Zip Code
MARTINSBURG	WV	25402

Purpose of Disbursement
Contribution

Candidate Name

ALEXANDER XAVIER MOONEYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	02	/	2014

Transaction ID : SB23.5066

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SOUTHERLAND FOR CONGRESS

Mailing Address PO BOX 1692

City	State	Zip Code
LYNN HAVEN	FL	32444

Purpose of Disbursement
Contribution

Candidate Name

WILLIAM STEVE SOUTHERLANDOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	03	/	2014

Transaction ID : SB23.5077

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

YOPAC

Full Name (Last, First, Middle Initial)

A. WESTROM FOR CONGRESS

Mailing Address PO BOX 210

City	State	Zip Code
ELBOW LAKE	MN	56531

Purpose of Disbursement
Contribution

Candidate Name

TORREY WESTROMOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : SB23.5031

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. YOUNG FOR IOWA, INC.

Mailing Address PO BOX 162

City	State	Zip Code
VAN METER	IA	50261

Purpose of Disbursement
Contribution

Candidate Name

DAVID YOUNGOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2014

Transaction ID : SB23.5062

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

10500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

YOPAC

Full Name (Last, First, Middle Initial)

A. Brandon Hermreck For State Representative

Mailing Address 7714 Johnson Dr

City	State	Zip Code
Overland Park	KS	66202

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB29.5083

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Brownback for Governor

Mailing Address 1 SW Cedar Crest Rd

City	State	Zip Code
Topeka	KS	66606

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

Transaction ID : SB29.5011

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Erin Davis For Kansas

Mailing Address 12018 S Clinton St

City	State	Zip Code
Olathe	KS	66061

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB29.5037

Amount of Each Disbursement this Period

500.00

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

YOPAC

Full Name (Last, First, Middle Initial)

A. Hildabrand for State RepresentativeMailing Address 16820 W67th St
#407

City Shawnee State KS Zip Code 66217

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB29.5036

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kansans For Selzer

Mailing Address 12504 Buena Vista

City Leawood State KS Zip Code 66209

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

Transaction ID : SB29.5010

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Landry For Louisiana

Mailing Address PO BOX 13816

City NEW IBERIA State LA Zip Code 70562

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: LA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		19		2014

Transaction ID : SB29.5085

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

YOPAC

Full Name (Last, First, Middle Initial)

A. Mike Jones For State Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

Mailing Address 8447 Valley View Dr

City	State	Zip Code
Overland Park	KS	66212

Transaction ID : SB29.5034Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

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

500.00

6000.00
