

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2015"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="156985.19"/>	<input type="text" value="167235.06"/>
(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="156985.19"/>	<input type="text" value="167235.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="113601.23"/>	<input type="text" value="123851.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43383.96"/>	<input type="text" value="43383.96"/>
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="11261.30"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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).....	156496.00	166745.87
(ii) Unitemized	231.50	231.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	156727.50	166977.37
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	156727.50	166977.37
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).....	257.69	257.69
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))..... ▶	156985.19	167235.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	156985.19	167235.06

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	113601.23	123851.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	113601.23	123851.10
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 (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	113601.23	123851.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	113601.23	123851.10

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)	156727.50	166977.37
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	156727.50	166977.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	113601.23	123851.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	257.69	257.69
38. Net Operating Expenditures (subtract Line 37 from Line 36)	113343.54	123593.41

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Amended report with the following: 1. Erroneous disbursement that was listed under wrong vendor. Payment to vendor was formally reported as KS Dept. of Revenue on 10/5/15 for \$594. Corrected vendor to NGP-VAN for \$594 on 10/5/15. 2. Disbursement added to amended report. Disbursement for \$10.04 on 7/24/15 from Uber. 3. Erroneous disbursement- report was amended to reflect an error in reporting a disbursement for \$205 to the Kansas Department of Revenue on 8/17/15. Disbursement was deleted from report. 4. Offset added- a refund of \$.45 on 7/24/15 from Quick Books Payroll Service was added to amended report. The offset is for a payment of \$.45 on 7/17/15.

Form/Schedule:
Transaction ID:

**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 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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. KJO Media

Mailing Address 4741 Rainbow Blvd

City Westwood State KS Zip Code 66205-1833

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VR07RF4N0B4

Amount of Each Receipt this Period
29600.00

Memo Item

* In-Kind: Media

Full Name (Last, First, Middle Initial)
B. William Kraybill Jr

Mailing Address 16003 Overbrook Ln

City Stilwell State KS Zip Code 66085-8507

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

Name of Employer Occupation
Retired Retired Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2015

Transaction ID : VR07RB9G770

Amount of Each Receipt this Period
200.00

Memo Item

Full Name (Last, First, Middle Initial)
C. William Kraybill Jr

Mailing Address 16003 Overbrook Ln

City Stilwell State KS Zip Code 66085-8507

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

Name of Employer Occupation
Retired Retired Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : VR07RC80FB7

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	29900.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

A. Amy Lemley
Full Name (Last, First, Middle Initial)

Mailing Address 1500 N. Homestead St.

City State Zip Code
Wichita KS 67208

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

Name of Employer Occupation
Foulston Siefkin LLP lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2015

Transaction ID : VR07RC1J2G7

Amount of Each Receipt this Period
500.00

Memo Item

B. Paulette Manville
Full Name (Last, First, Middle Initial)

Mailing Address 5211 W 80th Ter

City State Zip Code
Prairie Village KS 66208-4914

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2015

Transaction ID : VR07RBP9JT3

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1335 N Dry Creek Dr

City State Zip Code
Derby KS 67037-2811

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

Name of Employer Occupation
Self Employed Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
72845.87

Date of Receipt
MM / DD / YYYY
09 / 23 / 2015

Transaction ID : VR07RF4NDC0

Amount of Each Receipt this Period
10000.00

Memo Item

* In-Kind: Legal service fees paid to Covington and Burling LLP.

SUBTOTAL of Receipts This Page (optional)..... ▶ 11500.00

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 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

A. Gavin Moore
Full Name (Last, First, Middle Initial)
Mailing Address 1335 N Dry Creek Dr

City Derby	State KS	Zip Code 67037-2811
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 72845.87	

Date of Receipt
10 / 01 / 2015
Transaction ID : VR07RCEWB45

Amount of Each Receipt this Period
5000.00

Memo Item

B. Gavin Moore
Full Name (Last, First, Middle Initial)
Mailing Address 1335 N Dry Creek Dr

City Derby	State KS	Zip Code 67037-2811
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 72845.87	

Date of Receipt
11 / 12 / 2015
Transaction ID : VR07REC5CW6

Amount of Each Receipt this Period
7500.00

Memo Item

C. Gavin Moore
Full Name (Last, First, Middle Initial)
Mailing Address 1335 N Dry Creek Dr

City Derby	State KS	Zip Code 67037-2811
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 72845.87	

Date of Receipt
12 / 03 / 2015
Transaction ID : VR07REF6HS9

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	17500.00
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 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

A. Gavin Moore
Full Name (Last, First, Middle Initial)
Mailing Address 1335 N Dry Creek Dr
City Derby State KS Zip Code 67037-2811
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Developer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **72845.87**

Date of Receipt **12 / 16 / 2015**
Transaction ID : VR07REJMB29
Amount of Each Receipt this Period **10000.00**
 Memo Item

B. Gavin Moore
Full Name (Last, First, Middle Initial)
Mailing Address 1335 N Dry Creek Dr
City Derby State KS Zip Code 67037-2811
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Developer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **72845.87**

Date of Receipt **12 / 31 / 2015**
Transaction ID : VR07RF4NSK0
Amount of Each Receipt this Period **25096.00**
 Memo Item
* In-Kind: IN-KIND: PAC fundraising and operation costs

C. Snap Enterprises LLC
Full Name (Last, First, Middle Initial)
Mailing Address 9415 E Harry St Ste 703
City Wichita State KS Zip Code 67207-5084
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **25000.00**

Date of Receipt **07 / 06 / 2015**
Transaction ID : VR07RCEWJM5
Amount of Each Receipt this Period **25000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **60096.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 11 OF 62
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)
A. Terri Springer

Mailing Address 10624 W 123rd St Overland Park, K

City State Zip Code
Overland Park KS 66213

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

Name of Employer Occupation
retired retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : VR07RCH0123

Amount of Each Receipt this Period
10000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. UA Political Action Fund

Mailing Address 3 Park Pl

City State Zip Code
Annapolis MD 21401-3687

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : VR07RF467W5

Amount of Each Receipt this Period
25000.00

Memo Item

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

Mailing Address 6118 SW 38th Street

City State Zip Code
Topeka KS 66610

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

Name of Employer Occupation
Retired Retired

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
 09 / 02 / 2015
Transaction ID : VR07RBPTY7

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 37500.00

TOTAL This Period (last page this line number only)..... ▶ 156496.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4255 Amon Carter Blvd

City State Zip Code
Fort Worth TX 76155-2603

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68H98

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4255 Amon Carter Blvd

City State Zip Code
Fort Worth TX 76155-2603

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68HA6

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4255 Amon Carter Blvd

City State Zip Code
Fort Worth TX 76155-2603

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68HB3

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4255 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155-2603

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	5

Transaction ID : VQZ8GA68HC1

Amount of Each Disbursement this Period

6	7	4	.	2	1
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Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Capital Grill

Mailing Address 4740 Jefferson St

City Kansas City State MO Zip Code 64112-1836

Purpose of Disbursement
Food and/or beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Transaction ID : VQZ8GA68HF5

Amount of Each Disbursement this Period

6	0	0	.	0	0
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Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Capital Grill

Mailing Address 4740 Jefferson St

City Kansas City State MO Zip Code 64112-1836

Purpose of Disbursement
Food and/or beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	1	5

Transaction ID : VQZ8GA68HG3

Amount of Each Disbursement this Period

8	0	0	.	0	0
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Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0	.	0	0
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0	.	0	0
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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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Charlie Palmer Steak

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001-2133

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68HQ8

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Charlie Palmer Steak

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001-2133

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68HS4

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Charlie Palmer Steak

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001-2133

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68HT2

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Chester's Chop House and Wine Bar

Mailing Address 1550 N Webb Rd

City State Zip Code
Wichita KS 67206-3401

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **VQZ8GA68J09**

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Chester's Chop House and Wine Bar

Mailing Address 1550 N Webb Rd

City State Zip Code
Wichita KS 67206-3401

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **VQZ8GA68J25**

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Cooper's Hawk Winery & Restaurant

Mailing Address 4686 Broadway

City State Zip Code
Kansas City MO 64112-1459

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **VQZ8GA68J83**

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Cooper's Hawk Winery & Restaurant

Mailing Address 4686 Broadway

City Kansas City State MO Zip Code 64112-1459

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68JA8

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Covington and Burling LLP

Mailing Address 850 10th St NW

City Washington State DC Zip Code 20001-4956

Purpose of Disbursement
Legal Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA4W8Q5

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Covington and Burling LLP

Mailing Address 850 10th St NW

City Washington State DC Zip Code 20001-4956

Purpose of Disbursement
Legal Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA4W8S0

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Covington and Burling LLP

Mailing Address 850 10th St NW

City Washington State DC Zip Code 20001-4956

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2015

Transaction ID : **VQZ8GA68GG2**

Amount of Each Disbursement this Period

10000.00

Memo Item
* Memo- Gavin Moore 9/23/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2015

Transaction ID : **VQZ8GA68JJ2**

Amount of Each Disbursement this Period

1110.20

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2015

Transaction ID : **VQZ8GA68JM7**

Amount of Each Disbursement this Period

1120.20

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Destination XL

Mailing Address 8303 E Kellogg Dr

City State Zip Code
Wichita KS 67207-1813

Purpose of Disbursement
Media

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68JR9

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Enterprise Rent-a-Car

Mailing Address 10000 Shawnee Mission Pkwy

City State Zip Code
Merriam KS 66203-3641

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA642F3

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Enterprise Rent-a-Car

Mailing Address 10000 Shawnee Mission Pkwy

City State Zip Code
Merriam KS 66203-3641

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA642H8

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

A. Farm Bureau Financial Services

Full Name (Last, First, Middle Initial)

Mailing Address 7701 E Kellogg Dr
Ste 460

City Wichita State KS Zip Code 67207-1716

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 02 / 2015

Transaction ID : VQZ8GA4W987

Amount of Each Disbursement this Period: 45.00

Memo Item

B. Farm Bureau Financial Services

Full Name (Last, First, Middle Initial)

Mailing Address 7701 E Kellogg Dr
Ste 460

City Wichita State KS Zip Code 67207-1716

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 01 / 2015

Transaction ID : VQZ8GA4W995

Amount of Each Disbursement this Period: 182.79

Memo Item

C. Farm Bureau Financial Services

Full Name (Last, First, Middle Initial)

Mailing Address 7701 E Kellogg Dr
Ste 460

City Wichita State KS Zip Code 67207-1716

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 02 / 2015

Transaction ID : VQZ8GA4W9A3

Amount of Each Disbursement this Period: 60.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 288.72

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Farm Bureau Financial Services

Mailing Address 7701 E Kellogg Dr
Ste 460

City Wichita State KS Zip Code 67207-1716

Purpose of Disbursement
Insurance

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA4W9B1

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Four Seasons Hotel

Mailing Address 2800 Pennsylvania Ave NW

City Washington State DC Zip Code 20007-3717

Purpose of Disbursement
Hotel/Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68K02

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Homewood Suites

Mailing Address 1550 N Waterfront Pkwy

City Wichita State KS Zip Code 67206-6607

Purpose of Disbursement
Hotel/Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68K52

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Homewood Suites

Mailing Address 1550 N Waterfront Pkwy

City State Zip Code
Wichita KS 67206-6607

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63QR0

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Kansas Democratic Party

Mailing Address 700 SW Jackson St

City State Zip Code
Topeka KS 66603-3743

Purpose of Disbursement
Voterfile rental fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63R11

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KJO Media

Mailing Address 4741 Rainbow Blvd

City State Zip Code
Westwood KS 66205-1833

Purpose of Disbursement
Media

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63R53

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. KJO Media

Mailing Address 4741 Rainbow Blvd

City Westwood State KS Zip Code 66205-1833

Purpose of Disbursement
Media

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2015

Transaction ID : VR07RF4N0B4I

Amount of Each Disbursement this Period

29600.00

Memo Item
* In-Kind Received

Full Name (Last, First, Middle Initial)

B. Law Office of Dakota Loomis

Mailing Address 832 Pennsylvania St Ste 1001

City Lawrence State KS Zip Code 66044-2754

Purpose of Disbursement
Legal

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : VQZ8GA63S97

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Law Office of Dakota Loomis

Mailing Address 832 Pennsylvania St Ste 1001

City Lawrence State KS Zip Code 66044-2754

Purpose of Disbursement
Legal

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : VQZ8GA63SA5

Amount of Each Disbursement this Period

1042.93

Memo Item

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

31642.93

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Law Office of Dakota Loomis

Mailing Address 832 Pennsylvania St
Ste 1001

City Lawrence State KS Zip Code 66044-2754

Purpose of Disbursement
Legal

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SC1

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. LinkedIn

Mailing Address 2029 Stierlin Ct

City Mountain View State CA Zip Code 94043-4655

Purpose of Disbursement
Subscription

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SF4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. LinkedIn

Mailing Address 2029 Stierlin Ct

City Mountain View State CA Zip Code 94043-4655

Purpose of Disbursement
Subscription

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SG2

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. LinkedIn

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
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SH0

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. LinkedIn

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
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SJ8

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. LinkedIn

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
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SK6

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. LinkedIn

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
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SM4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. LinkedIn

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
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SN2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lukas Wine & Spirits Superstore

Mailing Address 12100 Blue Valley Pkwy

City Overland Park State KS Zip Code 66213-2606

Purpose of Disbursement
Food and/or beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KA1

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Lukas Wine & Spirits Superstore

Mailing Address 12100 Blue Valley Pkwy

City Overland Park State KS Zip Code 66213-2606

Purpose of Disbursement
Food and/or beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KD5

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Gavin Moore

Mailing Address 1335 N Dry Creek Dr

City Derby State KS Zip Code 67037-2811

Purpose of Disbursement
Legal service fees paid to Covington and Burling LLP.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VR07RF4NDC01

Amount of Each Disbursement this Period

Memo Item

* In-Kind Received

Full Name (Last, First, Middle Initial)

C. Gavin Moore

Mailing Address 1335 N Dry Creek Dr

City Derby State KS Zip Code 67037-2811

Purpose of Disbursement
IN-KIND: PAC fundraising and operation costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VR07RF4NSK01

Amount of Each Disbursement this Period

Memo Item

* In-Kind Received

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KQ4

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65V15

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65V72

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65V98

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65VE7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65VM5

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65VQ8

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65VV0

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65VZ2

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65W17

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68EV3

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65W41

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA65W67

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68F37

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mollie Moravac

Mailing Address 4927 Millridge St

City Shawnee State KS Zip Code 66226-9752

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68EZ5

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Newport Grill

Mailing Address 1900 N Rock Rd

City State Zip Code
Wichita KS 67206-1256

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KF1

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Newport Grill

Mailing Address 1900 N Rock Rd

City State Zip Code
Wichita KS 67206-1256

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KG9

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Newport Grill

Mailing Address 1900 N Rock Rd

City State Zip Code
Wichita KS 67206-1256

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KH6

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Newport Grill

Mailing Address 1900 N Rock Rd

City Wichita State KS Zip Code 67206-1256

Purpose of Disbursement
Food and/or Beverage

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SR6

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN, Inc.

Mailing Address 1101 15th St NW Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Database Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63SS3

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.

Mailing Address 1101 15th St NW Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Donor Database

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA8S2Q6

Amount of Each Disbursement this Period

Memo Item

Amended -erroneous disbursement listed under wrong vendor, formally reported as KS Dept. of Revenue

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : VQZ8GA8S2Q6

Amended -Erroneous disbursement that was listed under wrong vendor. Payment to vendor was formally reported as KS Dept. of Revenue on 10//5/15 for \$594. Corrected vendor to NGP-VAN for \$594 on 10/5/15.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. NGP VAN, Inc.

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63ST1

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. OfficeMax

Mailing Address 263 Shuman Blvd

City Naperville State IL Zip Code 60563-8147

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KN8

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. OfficeMax

Mailing Address 263 Shuman Blvd

City Naperville State IL Zip Code 60563-8147

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KP6

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Paige Pelfrey

Mailing Address 2917 W 71st St

City State Zip Code
Prairie Village KS 66208-3106

Purpose of Disbursement
Media

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63T58

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Public Policy Polling

Mailing Address 2912 Highwoods Blvd
Ste 201

City State Zip Code
Raleigh NC 27604-1095

Purpose of Disbursement
Polling

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63V83

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Regus

Mailing Address PO Box 842456

City State Zip Code
Dallas TX 75284-2456

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KR2

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Regus

Mailing Address PO Box 842456

City State Zip Code
Dallas TX 75284-2456

Purpose of Disbursement
Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63ZW0

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Regus

Mailing Address PO Box 842456

City State Zip Code
Dallas TX 75284-2456

Purpose of Disbursement
Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63ZX8

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Regus

Mailing Address PO Box 842456

City State Zip Code
Dallas TX 75284-2456

Purpose of Disbursement
Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63ZY6

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Regus

Mailing Address PO Box 842456

City Dallas State TX Zip Code 75284-2456

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA63ZZ4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Regus

Mailing Address PO Box 842456

City Dallas State TX Zip Code 75284-2456

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA64002

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd
Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement
Merchant services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA640Z6

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd
Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement
Merchant services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA64120

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd
Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement
Merchant services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA64143

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Ronald Shively

Mailing Address 1107 S Meadowhaven Ln

City Derby State KS Zip Code 67037-3402

Purpose of Disbursement
Media

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA640J4

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Mary Shulda

Mailing Address 6340 Millridge St

City Shawnee State KS Zip Code 66218-8992

Purpose of Disbursement
Travel/Hotel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68FW4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Virgin Hotels

Mailing Address 2601 S Bayshore Dr Ste 340

City Miami State FL Zip Code 33133-5469

Purpose of Disbursement
Travel/Hotel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68FG9

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Carlos Soto

Mailing Address 46 Huntington Rd

City Augusta State KS Zip Code 67010-2341

Purpose of Disbursement
Media

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA4W8D6

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Carlos Soto

Mailing Address 46 Huntington Rd

City Augusta State KS Zip Code 67010-2341

Purpose of Disbursement
Media

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA4W8E4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. The Dupont Circle Hotel

Mailing Address 1500 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1204

Purpose of Disbursement
Hotel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68GE6

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. The Dupont Circle Hotel

Mailing Address 1500 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1204

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA641Y8

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. The Dupont Circle Hotel

Mailing Address 1500 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1204

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA641Z6

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. The Dupont Circle Hotel

Mailing Address 1500 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1204

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA64204

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. The Dupont Circle Hotel

Mailing Address 1500 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1204

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA64212

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. The Dupont Circle Hotel

Mailing Address 1500 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1204

Purpose of Disbursement
Hotel/Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68H56

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. The Dupont Circle Hotel

Mailing Address 1500 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1204

Purpose of Disbursement
Hotel/Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68H64

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. The Record News Printing and Mailing

Mailing Address Printing and Mailing

City Basehor State KS Zip Code 66007

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA63ZV2

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KX1

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KY9

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68KZ7

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	1	5		

Transaction ID : VQZ8GA68M03

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	1	5		

Transaction ID : VQZ8GA68M29

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	1	5		

Transaction ID : VQZ8GA68M45

Amount of Each Disbursement this Period

3	3	.	3	3
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68M52

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68M60

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68M86

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA68M94

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Trave

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA64246

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQZ8GA64254

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	5		

Transaction ID : VQZ8GA68MB0

Amount of Each Disbursement this Period

4	9	.	4	9
---	---	---	---	---

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	5		

Transaction ID : VQZ8GA68MD6

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	5		

Transaction ID : VQZ8GA68ME4

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	5		

Transaction ID : VQZ8GA68MF1

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	5		

Transaction ID : VQZ8GA68MG9

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	5		

Transaction ID : VQZ8GA68MH7

Amount of Each Disbursement this Period

3	6	.	3	7
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0	0	0
---	---	---

0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

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
07 / 22 / 2015

Transaction ID : **VQZ8GA68MK3**

Amount of Each Disbursement this Period: 59.60

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

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
07 / 22 / 2015

Transaction ID : **VQZ8GA68MN9**

Amount of Each Disbursement this Period: 80.81

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

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
07 / 23 / 2015

Transaction ID : **VQZ8GA64262**

Amount of Each Disbursement this Period: 11.22

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11.22

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **VQZ8GA64279**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **VQZ8GA68MQ5**

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **VQZ8GA68MR3**

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	3		2	0	1	5		

Transaction ID : VQZ8GA68MT8

Amount of Each Disbursement this Period

5	1	.	5	1
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	4		2	0	1	5		

Transaction ID : VQZ8GA8W3V4

Amount of Each Disbursement this Period

1	0	.	0	4
---	---	---	---	---

Memo Item

Travel

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	2		2	0	1	5		

Transaction ID : VQZ8GA64295

Amount of Each Disbursement this Period

6	0	.	8	0
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Memo Item

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

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

1	6	.	1	2
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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : VQZ8GA8W3V4

Amended- Uber Disbursement added to amended report. Disbursement for \$10.04 on 7/24/15.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2015			

Transaction ID : VQZ8GA68MX2

Amount of Each Disbursement this Period

47.95

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2015			

Transaction ID : VQZ8GA68N06

Amount of Each Disbursement this Period

25.25

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2015			

Transaction ID : VQZ8GA68N22

Amount of Each Disbursement this Period

26.58

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Transaction ID : VQZ8GA68N39

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Transaction ID : VQZ8GA68N47

Amount of Each Disbursement this Period

2	5	.	2	5
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Transaction ID : VQZ8GA68N55

Amount of Each Disbursement this Period

5	7	.	2	6
---	---	---	---	---

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68NB3

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68ND8

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68NF4

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement
Travel

001
 002
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 05 / 2015

Transaction ID : VQZ8GA68NJ8

Amount of Each Disbursement this Period

142.60

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement
Travel

001
 002
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : VQZ8GA68NH0

Amount of Each Disbursement this Period

142.60

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement
Travel

001
 002
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : VQZ8GA68NM4

Amount of Each Disbursement this Period

142.60

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. United States Treasury

Mailing Address PO Box 37941

City Hartford State CT Zip Code 06176-7941

Purpose of Disbursement Taxes

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA67KC8

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. United States Treasury

Mailing Address PO Box 37941

City Hartford State CT Zip Code 06176-7941

Purpose of Disbursement Taxes

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA67KD6

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 111 W Rio Salado Pkwy

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement Travel

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68NR5

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 111 W Rio Salado Pkwy

City State Zip Code
Tempe AZ 85281-2880

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	15	/	2015

Transaction ID : VQZ8GA68NS3

Amount of Each Disbursement this Period

43.00

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. White House Black Market

Mailing Address 333 W 47th St

City State Zip Code
Kansas City MO 64112-1622

Purpose of Disbursement
Media

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	10	/	2015

Transaction ID : VQZ8GA68NW7

Amount of Each Disbursement this Period

236.74

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Janelle Wilgers

Mailing Address 2127 N Teal Brook Ct

City State Zip Code
Wichita KS 67235-1525

Purpose of Disbursement
Media

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	10	/	2015

Transaction ID : VQZ8GA63QS8

Amount of Each Disbursement this Period

400.00

Memo Item

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

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

400.00

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

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

FOR LINE NUMBER:
(check only one)

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

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. Yaya's Euro Bisto

Mailing Address 7021 W 135th St

City Overland Park State KS Zip Code 66223-4843

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68NZ1

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

B. Yaya's Euro Bisto

Mailing Address 7021 W 135th St

City Overland Park State KS Zip Code 66223-4843

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68P09

Amount of Each Disbursement this Period

Memo Item
* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Yaya's Euro Bisto

Mailing Address 7021 W 135th St

City Overland Park State KS Zip Code 66223-4843

Purpose of Disbursement
Food and/or Beverage

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA642C9

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

Full Name (Last, First, Middle Initial)

A. Yaya's Euro Bisto

Mailing Address 7021 W 135th St

City Overland Park State KS Zip Code 66223-4843

Purpose of Disbursement
Food and/or Beverage

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA642D7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Yaya's Euro Bisto

Mailing Address 7021 W 135th St

City Overland Park State KS Zip Code 66223-4843

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68P16

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

Full Name (Last, First, Middle Initial)

C. Yaya's Euro Bisto

Mailing Address 7021 W 135th St

City Overland Park State KS Zip Code 66223-4843

Purpose of Disbursement
Food and/or beverages

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VQZ8GA68P32

Amount of Each Disbursement this Period

Memo Item

* Memo- Gavin Moore 12/31/15 IN-KIND

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 62 OF 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Reclaim Kansas Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Covington and Burling LLP	Nature of Debt (Purpose): Legal Fees
Mailing Address 850 10th St NW	
City State Zip Code Washington DC 20001-4956	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : VQXA09H8Q98	
Amount Incurred This Period <input type="text" value="11261.30"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11261.30"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="11261.30"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="11261.30"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="11261.30"/>