

'14 JUL 24 AM 11:43



SCOTT B. POOR and associates, PA

July 23 2014

Federal Elections Commission  
999 E Street NW  
Washington DC 20463

RE: ORMAN FOR US SENATE, INC.  
Selection of Primary Date Pursuant 11 CFR 100.2(c)(4)(i)

Dear Federal Elections Commission,

I represent Orman for U.S. Senate, Inc. ("Client"), a federal election campaign committee to support Greg Orman as an independent candidate for United State Senate in the State of Kansas.

Under Kansas law, no "primary date" is specified for independent candidates who nominate by petition. At 11 CFR 100.2(c)(4)(i), an independent candidate may select as "primary date" the last day to qualify for a position on the general election ballot.

Pursuant the petition certification and review process required by Kansas statute, the "primary date" pursuant 11 CFR 100.2(c)(4)(i) is unknown. At a later date, the Kansas Secretary of State will provide a schedule for petition certification and review. Because the "primary date" is unknown, Client proceeds with filing of the Pre-Primary FEC Report pursuant the schedule for partisan nomination by primary election. Client proceeds in order to assure continued transparency and compliance. However, the submission of this Pre-Primary FEC Report does not waive Client's right for selection of a "primary date" pursuant 11 CFR 100.2(c)(4)(i) for purposes of receiving Primary contributions.

If you have questions, comments or concerns related hereto, please contact the undersigned counsel. Thank you for your cooperation and assistance.

FOR ORMAN FOR US SENATE INC.

Scott B. Poor  
SCOTT B. POOR & ASSOCIATES PA  
200 W. Douglas Ave., Ste. 600  
Wichita KS 67202  
316.267.2315  
913.620.2240 (mobile)

14020640560

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

SECRETARY OF THE SENATE

14 JUL 24 AM 11:43

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Orman for U.S. Senate, Inc.

ADDRESS (number and street) ▼

PO Box 14814

Check if different than previously reported. (ACC)

Lenexa

KS

66285-4814

2. FEC IDENTIFICATION NUMBER ▼

C C00564294

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

KS

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on 08 / 05 / 2014 in the State of KS

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on / / in the State of

5. Covering Period

07 / 01 / 2014 through 07 / 16 / 2014

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

Type or Print Name of Treasurer Wynne Royce Jennings

Signature of Treasurer

Wynne Royce Jennings

*Wynne Royce Jennings*

Date

07 / 22 / 2014

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

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

14020640561

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 29

Write or Type Committee Name  
**Orman for U.S. Senate, Inc.**

Report Covering the Period:

From:

/  /

To:

/  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	37418	671312.47
(b) Total Contribution Refunds (from Line 20(d)) ..	0	2000
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ..	37418	669312.47
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	226435.95	306730.1
(b) Total Offsets to Operating Expenditures (from Line 14)...	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	226435.95	306730.1
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	362592.37	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	42864.05	

**For further information contact:**

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

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

14020640562

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 29

Write or Type Committee Name

**Orman for U.S. Senate, Inc.**

Report Covering the Period: From:

MM / DD / YYYY  
07 / 01 / 2014

To:

MM / DD / YYYY  
07 / 16 / 2014

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

26600

619212

(ii) Unitemized.....

800

5351

(iii) TOTAL of contributions from individuals ..

27400

624563

(b) Political Party Committees...

0

0

(c) Other Political Committees (such as PACs) ..

0

0

(d) The Candidate .....

10018

46749.47

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

37418

671312.47

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ...

0

0

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0

0

(b) All Other Loans...

0

0

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0

0

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0

0

15. OTHER RECEIPTS

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

0

10

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

37418

671322.47

14020640563

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	226435.95	306730.1
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0	2000
(b) Political Party Committees...	0	0
(c) Other Political Committees (such as PACs) ...	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0	2000
21. OTHER DISBURSEMENTS ...	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	226435.95	308730.1

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	551610.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	37418
25. SUBTOTAL (add Line 23 and Line 24)...	589028.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	226435.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	362592.37

14020640564

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 29

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

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)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial) <b>Kenneth Aston</b>		Date of Receipt MM / DD / YYYY 07 / 01 / 2014	
Mailing Address 211 Henry Ave		Transaction ID : A-CF311	
City St. Louis	State MO	Zip Code 63011	Amount of Each Receipt this Period 1500
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 1500	
Name of Employer self	Occupation real estate	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>Craig Bentsdahl</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2014	
Mailing Address 5101 Mirror Lakes Drive		Transaction ID : A-CF447	
City Edina	State MN	Zip Code 55436-1341	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 1000	
Name of Employer Self	Occupation Investor	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>David B Crabtree</b>		Date of Receipt MM / DD / YYYY 07 / 03 / 2014	
Mailing Address 9006 Southern Breeze Drive		Transaction ID : A-CF327	
City Orlando	State FL	Zip Code 32836-5050	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2600	
Name of Employer Earl Enterprises	Occupation CEO/President	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020640565

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial) <b>Shari A Crabtree</b>		Date of Receipt MM / DD / YYYY 07 / 03 / 2014
Mailing Address 9006 Southern Breeze Drive		Transaction ID : A-CF328
City Orlando	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>William H Downey</b>		Date of Receipt MM / DD / YYYY 07 / 07 / 2014
Mailing Address 50 E Bellevue Place Apt. 2505		Transaction ID : A-CF334
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Information Requested Self Employed	Occupation Information Requested Consultant	Election Cycle-to-Date 2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Cindy L Dummermuth</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2014
Mailing Address 26236 W 110th Terrace		Transaction ID : A-CF332
City Olathe	State KS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5450.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020640566

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

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

FOR LINE NUMBER: PAGE 7 OF 29

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Dummermuth**

Mailing Address **26236 W 110th Terrace**

City **Olathe** State **KS** Zip Code **66061-8411**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt

**07 / 02 / 2014**

Transaction ID : **A-CF331**

Amount of Each Receipt this Period

**250**

**B.** Full Name (Last, First, Middle Initial)  
**Gregory A Foster**

Mailing Address **3003 Exposition Boulevard**

City **Santa Monica** State **CA** Zip Code **90404-5026**

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

Name of Employer **IMAX Entertainment** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

**07 / 01 / 2014**

Transaction ID : **A-CF341**

Amount of Each Receipt this Period

**500**

**C.** Full Name (Last, First, Middle Initial)  
**Sara Hoestje**

Mailing Address **20830 W 92nd Street**

City **Lenexa** State **KS** Zip Code **66220-3443**

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

Name of Employer **Mid-America Urology** Occupation **Urologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt

**07 / 04 / 2014**

Transaction ID : **A-CF463**

Amount of Each Receipt this Period

**250**

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

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

**1000.00**

14020640567



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

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

FOR LINE NUMBER:		PAGE 8 OF 29	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Marty King**

Mailing Address 11173 S Glenview Lane

City Olathe State KS Zip Code 66061-7346

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

Name of Employer Brocade Occupation sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2014

Transaction ID : **A-CF468**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**David K Nelson**

Mailing Address 18800 W 116th Street

City Olathe State KS Zip Code 66061-6527

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

Name of Employer Nelson Company Occupation Payment Processing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2014

Transaction ID : **A-CF446**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Kenneth Nevius**

Mailing Address 12820 W 70th Terrace

City Shawnee State KS Zip Code 66216-2629

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2014

Transaction ID : **A-CF472**

Amount of Each Receipt this Period  
**250**

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

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

**2250.00**

14020640568

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

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

FOR LINE NUMBER: PAGE 9 OF 29  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**James Orman**

Mailing Address **2200 E Prairie Creek Drive**

City **Richardson** State **TX** Zip Code **75080-2622**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **07 / 06 / 2014**

Transaction ID : **A-CF444**

Amount of Each Receipt this Period **500**

**B.** Full Name (Last, First, Middle Initial)  
**Bruce A Provo**

Mailing Address **8812 Linden Drive**

City **Prairie Village** State **KS** Zip Code **66207-2222**

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

Name of Employer **The Provo Group** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **07 / 03 / 2014**

Transaction ID : **A-CF333**

Amount of Each Receipt this Period **1000**

**C.** Full Name (Last, First, Middle Initial)  
**David J Rebein**

Mailing Address **PO Box 1147**

City **Dodge City** State **KS** Zip Code **67801-1147**

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

Name of Employer **Rebein, Bangerter, Rebein** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **07 / 14 / 2014**

Transaction ID : **A-CF445**

Amount of Each Receipt this Period **500**

**SUBTOTAL** of Receipts This Page (optional)..... **2000.00**

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

14020640569

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 29

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

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Stan Ricketts</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2014
Mailing Address 23597 Dehoff Drive		Transaction ID : A-CF473
City Tonganoxie	State KS	Zip Code 66086-3349
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250	
Name of Employer Intrust Bank	Occupation Banker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>B. Miles Schnaer</b>		Date of Receipt MM / DD / YYYY 07 / 07 / 2014
Mailing Address 3400 Iowa Street		Transaction ID : A-CF464
City Lawrence	State KS	Zip Code 66046-5208
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500	
Name of Employer Crown Automotive	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>C. Richard Swann</b>		Date of Receipt MM / DD / YYYY 07 / 08 / 2014
Mailing Address 750 Gatlin Avenue		Transaction ID : A-CF443
City Orlando	State FL	Zip Code 32806-6918
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600	
Name of Employer Swann, Hadley, Stump	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020640570

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

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

FOR LINE NUMBER: (check only one)  
 11a  11b  11c  11d  15  
 12  13a  13b  14

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NAME OF COMMITTEE (In Full)  
Orman for U.S. Senate, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jim Tiehen

Mailing Address 12738 Oakmont Drive

City State Zip Code  
Kansas City MO 64145-1141

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
The Tiehen Group, Inc Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2014

Transaction ID : A-CF462

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
Patrick B Walsh

Mailing Address 4715 Annaway Drive

City State Zip Code  
Edina MN 55436-1303

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Spencer Stuart Consulting Office Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2014

Transaction ID : A-CF339

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
Sheila M Walsh

Mailing Address 4715 Annaway Drive

City State Zip Code  
Edina MN 55436-1303

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
none homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2014

Transaction ID : A-CF340

Amount of Each Receipt this Period  
500

**SUBTOTAL** of Receipts This Page (optional)..... 1250.00

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

14020640571

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

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

FOR LINE NUMBER: PAGE 12 OF 29  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Orman for U.S. Senate, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Sheila M Walsh

Mailing Address 4715 Anway Drive

City Edina State MN Zip Code 55436-1303

FEC ID number of contributing federal political committee.  C

Name of Employer none Occupation homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt 07 / 08 / 2014

Transaction ID : A-CF465

Amount of Each Receipt this Period 1000

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey D Warshaw

Mailing Address 136 Main Street Suite 202

City Westport State CT Zip Code 06880-3304

FEC ID number of contributing federal political committee.  C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt 07 / 03 / 2014

Transaction ID : A-CF337

Amount of Each Receipt this Period 2600

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey D Warshaw

Mailing Address 136 Main Street Suite 202

City Westport State CT Zip Code 06880-3304

FEC ID number of contributing federal political committee.  C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt 07 / 03 / 2014

Transaction ID : A-CF352

Amount of Each Receipt this Period 2600

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

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

6200.00

26600.00

14020640572

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

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

FOR LINE NUMBER:  
(check only one)

11a  
12
  11b  
13a
  11c  
13b
  11d  
14
  15

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial)  
**Gregory J Orman**

Mailing Address **26733 W 109th Street**

City **Olathe** State **KS** Zip Code **66061-7499**

FEC ID number of contributing federal political committee. **C S8KS00227**

Name of Employer **Self Employed** Occupation **Entrepreneur**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **46749.47**

Date of Receipt

M  M /  D  D /  V  V  V  V  
**07 / 07 / 2014**

Transaction ID : **A-IF452**

Amount of Each Receipt this Period

**10018**

Inkind: **Ballot Access Consulting**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt

M  M /  D  D /  V  V  V  V

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt

M  M /  D  D /  V  V  V  V

Amount of Each Receipt this Period

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

**10018.00**

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

**10018.00**

14020640573

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Orman for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) <b>A. Adelstein Liston</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014	
Mailing Address 222 W Ontario Street Suite 600		Amount of Each Disbursement this Period 168675	
City Chicago	State IL	Zip Code 60654-3655	Transaction ID : B-E-437
Purpose of Disbursement Media Buy		Category/Type 004	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle International, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014	
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1950	
City Washington	State DC	Zip Code 20003-1164	Transaction ID : B-E-323
Purpose of Disbursement accounting database		Category/Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. Democracy Engine</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014	
Mailing Address 850 Quincy Street NW Apt. 402		Amount of Each Disbursement this Period 9.57	
City Washington	State DC	Zip Code 20011-5873	Transaction ID : B-E-485
Purpose of Disbursement Credit card processing fee		Category/Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

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

170634.57

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

14020640574

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial) <b>A. JKJ Partners</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 8020 E Cedar Avenue		Amount of Each Disbursement this Period 12500 Transaction ID : B-E-325
City Denver	State CO	
Purpose of Disbursement Campaign Advisory Services	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Monticello Village, Llc</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 8801 Renner Avenue Suite 400		Amount of Each Disbursement this Period 1650 Transaction ID : B-E-322
City Lenexa	State KS	
Purpose of Disbursement Rent	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. On Demand Technologies, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 9291 Cody Street		Amount of Each Disbursement this Period 355 Transaction ID : B-E-324
City Overland Park	State KS	
Purpose of Disbursement walking cards and handouts	Candidate Name	Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14505.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020640575



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Orman for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) <b>A. On Demand Technologies, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 9291 Cody Street		Amount of Each Disbursement this Period 660
City Overland Park	State KS	Zip Code 66214-1735
Purpose of Disbursement Postcards	Category/Type 004	
Candidate Name	Transaction ID : B-E-450	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paycor, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 8050 Marshall Drive Suite 100		Amount of Each Disbursement this Period 53
City Lenexa	State KS	Zip Code 66214-1570
Purpose of Disbursement Payroll processing fees	Category/Type 001	
Candidate Name	Transaction ID : B-E-440	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paycor, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 8050 Marshall Drive Suite 100		Amount of Each Disbursement this Period 5043.23
City Lenexa	State KS	Zip Code 66214-1570
Purpose of Disbursement Taxes and Withholdings: see memos	Category/Type 001	
Candidate Name	Transaction ID : B-E-441	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5756.23
<b>TOTAL</b> This Period (last page this line number only).....	

14020640576

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Orman for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) <b>A. Shayne T Thoman</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 4710 Crest Drive		Amount of Each Disbursement this Period 1132.99
City Kansas City	State KS	
Purpose of Disbursement Tax withholding		Transaction ID : B-S-55
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Paycor, Inc(07/14/14)
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. James Edelen</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 13140 W 88th Court		Amount of Each Disbursement this Period 816.99
City Lenexa	State KS	
Purpose of Disbursement Tax withholding		Transaction ID : B-S-50
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Paycor, Inc(07/14/14)
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. Samuel D Aistrup</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 817 Laramie Street Apt. B		Amount of Each Disbursement this Period 217.2
City Manhattan	State KS	
Purpose of Disbursement Tax withholding		Transaction ID : B-S-49
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Paycor, Inc(07/14/14)
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020640577

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Aaron R Estabrook</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014	
Mailing Address 3317 Woodduck Way		Amount of Each Disbursement this Period 538.44	
City Manhattan	State KS	Zip Code 66503-2586	Transaction ID : B-S-51  [MEMO ITEM] Subitemization of Paycor, Inc(07/14/14)
Purpose of Disbursement Tax withholding		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Jeffrey T McGurk</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014	
Mailing Address 5401 Stone Crest Drive		Amount of Each Disbursement this Period 683.59	
City Manhattan	State KS	Zip Code 66503-8795	Transaction ID : B-S-52  [MEMO ITEM] Subitemization of Paycor, Inc(07/14/14)
Purpose of Disbursement Tax withholding		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Ashley M Walker</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014	
Mailing Address 406 Quail Road		Amount of Each Disbursement this Period 211.99	
City Westmoreland	State KS	Zip Code 66549-9813	Transaction ID : B-S-53  [MEMO ITEM] Subitemization of Paycor, Inc(07/14/14)
Purpose of Disbursement Tax withholding		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

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

0.00
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**TOTAL** This Period (last page this line number only).....

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14020640578

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Orman for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)  
**A. Kansas Department of Labor**

Mailing Address PO Box 400

City State Zip Code  
Topeka KS 66601-0400

Purpose of Disbursement  
Unemployment taxes

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 14 / 2014

Amount of Each Disbursement this Period

321.3

Transaction ID : B-S-69

[MEMO ITEM]

Subitemization of Paycor, Inc(07/14/14)

Full Name (Last, First, Middle Initial)  
**B. Internal Revenue Service**

Mailing Address PO Box 37941

City State Zip Code  
Hartford CT 06176-7941

Purpose of Disbursement  
Social Security and Medicare

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 14 / 2014

Amount of Each Disbursement this Period

1120.73

Transaction ID : B-S-70

[MEMO ITEM]

Subitemization of Paycor, Inc(07/14/14)

Full Name (Last, First, Middle Initial)  
**C. Paycor, Inc**

Mailing Address 8050 Marshall Drive  
Suite 100

City State Zip Code  
Lenexa KS 66214-1570

Purpose of Disbursement  
Payroll: see memos

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 14 / 2014

Amount of Each Disbursement this Period

11048.8

Transaction ID : B-E-442

Original vendors exceeding reporting threshold itemized as memo transactions.

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

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

11048.80

14020640579

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Orman for U.S. Senate, Inc.

**A. Samuel D Aistrup**

Full Name (Last, First, Middle Initial)  
Mailing Address 817 Laramie Street  
Apt. B

City Manhattan State KS Zip Code 66502-5687

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2014

Amount of Each Disbursement this Period: 1082.8

Transaction ID : B-S-56

**[MEMO ITEM]**  
Subitemization of Paycor, Inc(07/14/14)

**B. Ashley M Walker**

Full Name (Last, First, Middle Initial)  
Mailing Address 406 Quail Road

City Westmoreland State KS Zip Code 66549-9813

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2014

Amount of Each Disbursement this Period: 1388.01

Transaction ID : B-S-61

**[MEMO ITEM]**  
Subitemization of Paycor, Inc(07/14/14)

**C. James Edelen**

Full Name (Last, First, Middle Initial)  
Mailing Address 13140 W 88th Court

City Lenexa State KS Zip Code 66215-3473

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2014

Amount of Each Disbursement this Period: 2183.01

Transaction ID : B-S-57

**[MEMO ITEM]**  
Subitemization of Paycor, Inc(07/14/14)

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

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

0.00

14020640580

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial)

**A. Aaron R Estabrook**

Mailing Address 3317 Woodduck Way

City State Zip Code  
Manhattan KS 66503-2586

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 14 / 2014

Amount of Each Disbursement this Period

2211.56

Transaction ID : B-S-58

[MEMO ITEM]

Subitemization of Paycor, Inc(07/14/14)

Full Name (Last, First, Middle Initial)

**B. Jeffrey T McGurk**

Mailing Address 5401 Stone Crest Drive

City State Zip Code  
Manhattan KS 66503-8795

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 14 / 2014

Amount of Each Disbursement this Period

1716.41

Transaction ID : B-S-59

[MEMO ITEM]

Subitemization of Paycor, Inc(07/14/14)

Full Name (Last, First, Middle Initial)

**C. Shayne T Thoman**

Mailing Address 4710 Crest Drive

City State Zip Code  
Kansas City KS 66106-3553

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 14 / 2014

Amount of Each Disbursement this Period

2467.01

Transaction ID : B-S-60

[MEMO ITEM]

Subitemization of Paycor, Inc(07/14/14)

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

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

0.00

14020640581

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Orman for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

**A. PCI Consultants**

Mailing Address 26500 Agoura Road

City Calabasas State CA Zip Code 91302-1952

Purpose of Disbursement  
Ballot Access Consulting

Candidate Name

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

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

10000
-------

Transaction ID : B-S-67

[MEMO ITEM]

Subitemization of Gregory Orman(07/07/14)

**B. Peoples Bank**

Mailing Address 13180 Metcalf Avenue

City Overland Park State KS Zip Code 66213-2815

Purpose of Disbursement  
wire fee

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 09 / 2014

Amount of Each Disbursement this Period

20
----

Transaction ID : B-E-438

**C. Peoples Bank**

Mailing Address 13180 Metcalf Avenue

City Overland Park State KS Zip Code 66213-2815

Purpose of Disbursement  
Bank Fee

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 16 / 2014

Amount of Each Disbursement this Period

10
----

Transaction ID : B-E-488

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

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

30.00
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14020640582

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial)

**A. Plan-A-Media**

Mailing Address 2600 Eureka Terrace

City Manhattan State KS Zip Code 66503-8490

Purpose of Disbursement  
banners

Candidate Name

004  
Category/  
Type

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2014

Amount of Each Disbursement this Period

1471.45

Transaction ID : B-E-201

Full Name (Last, First, Middle Initial)

**B. Plan-A-Media**

Mailing Address 2600 Eureka Terrace

City Manhattan State KS Zip Code 66503-8490

Purpose of Disbursement  
yard signs and stakes

Candidate Name

004  
Category/  
Type

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2014

Amount of Each Disbursement this Period

4504.83

Transaction ID : B-E-321

Full Name (Last, First, Middle Initial)

**C. TSYS Merchant Solutions**

Mailing Address 1601 Dodge Street

City Omaha State NE Zip Code 68102-1637

Purpose of Disbursement  
CC processing fees

Candidate Name

001  
Category/  
Type

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2014

Amount of Each Disbursement this Period

2823.65

Transaction ID : B-E-439

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

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

8799.93

1402064058Z



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial)

**A. Westar Energy**

Mailing Address 22342 W 66th Street

City Shawnee State KS Zip Code 66226-3560

Purpose of Disbursement  
Electric Bill

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 16 / 2014

Amount of Each Disbursement this Period

209.97
--------

Transaction ID : B-E-448

001
Category/ Type

Full Name (Last, First, Middle Initial)

**B. Western Kansas Manufacturers Association**

Mailing Address PO Box 1382

City Dodge City State KS Zip Code 67801-1382

Purpose of Disbursement  
Campaign Event - space rental

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 08 / 2014

Amount of Each Disbursement this Period

570
-----

Transaction ID : B-E-281

007
Category/ Type

Full Name (Last, First, Middle Initial)

**C. Aaron Deuser**

Mailing Address 4251 Jefferson Street  
Apt. 342

City Kansas City State MO Zip Code 64111-4567

Purpose of Disbursement  
Reimbursement: see memos

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 16 / 2014

Amount of Each Disbursement this Period

1863.45
---------

Transaction ID : B-E-451

001
Category/ Type

Original vendors exceeding reporting threshold itemized as memo transactions.

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

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

2643.42
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14020640584

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Amtrust North America, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014	
Mailing Address 800 Superior Avenue E Floor 21		Amount of Each Disbursement this Period 1630	
City Cleveland	State OH	Zip Code 44114-2613	Transaction ID : B-S-66
Purpose of Disbursement Worker Comp Policy		Category/Type	
Candidate Name		[MEMO ITEM] Subitemization of Aaron Deuser(07/16/14)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Wynne Jennings</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014	
Mailing Address 10068 Goodman Drive		Amount of Each Disbursement this Period 3000	
City Overland Park	State KS	Zip Code 66212-3433	Transaction ID : B-E-449
Purpose of Disbursement Finance Consulting		Category/Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Gregory J Orman</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014	
Mailing Address 26733 W 109th Street		Amount of Each Disbursement this Period 10018	
City Olathe	State KS	Zip Code 66061-7499	Transaction ID : B-I-452
Purpose of Disbursement Inkind: Ballot Access Consulting		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13018.00
<b>TOTAL</b> This Period (last page this line number only).....	226435.95

14020640585

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scott B Poor And Associates Pa</b>		Nature of Debt (Purpose): Legal Services	
Mailing Address 200 W Douglas Avenue Suite 600			
City	State	Zip Code	
Wichita	KS	67202-3006	
Outstanding Balance Beginning This Period <input type="text" value="0"/>		Transaction ID : SD10-DEBT491	
Amount Incurred This Period <input type="text" value="594"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="594"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hamilton Campaigns</b>		Nature of Debt (Purpose): Survey Research consulting	
Mailing Address 4201 Connecticut Avenue NW Suite 610			
City	State	Zip Code	
Washington	DC	20008-1119	
Outstanding Balance Beginning This Period <input type="text" value="0"/>		Transaction ID : SD10-DEBT461	
Amount Incurred This Period <input type="text" value="7000"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="7000"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Plan-A-Media</b>		Nature of Debt (Purpose): banners	
Mailing Address 2600 Eureka Terrace			
City	State	Zip Code	
Manhattan	KS	66503-8490	
Outstanding Balance Beginning This Period <input type="text" value="1471.45"/>		Transaction ID : SD10-DEBT201	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="1471.45"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>	

1) SUBTOTALS This Period This Page (optional) ...	<input type="text" value="7594.00"/>
2) TOTALS This Period (last page this line number) ...	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

14020640586

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Orman for U.S. Senate, Inc.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Western Kansas Manufacturers Association**

Nature of Debt (Purpose):  
 Campaign Event - space rental

Mailing Address PO Box 1382

City State Zip Code  
 Dodge City KS 67801-1382

Transaction ID : SD10-DEBT281

Outstanding Balance Beginning This Period

Amount Incurred This Period  Payment This Period  Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Research and Policy Consultants, LLC**

Nature of Debt (Purpose):  
 Research

Mailing Address PO Box 53256

City State Zip Code  
 Washington DC 20009-9256

Transaction ID : SD10-DEBT454

Outstanding Balance Beginning This Period

Amount Incurred This Period  Payment This Period  Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Utrecht, Kleinfeld, Fiori, Zeglis & Partners**

Nature of Debt (Purpose):  
 Legal Services

Mailing Address 1900 M Street NW Suite 500

City State Zip Code  
 Washington DC 20036-3522

Transaction ID : SD10-DEBT455

Outstanding Balance Beginning This Period

Amount Incurred This Period  Payment This Period  Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	<input type="text" value="9379.20"/>
2) <b>TOTALS</b> This Period (last page this line number) ...	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

14020640587



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 29 OF 29
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Orman for U.S. Senate, Inc.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Combat Brands, LLC</b>		Nature of Debt (Purpose): Event space rental
Mailing Address 22342 W 66th Street		
City Shawnee	State KS	Zip Code 66226-3560

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT492	
Amount Incurred This Period <input type="text" value="100"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="100"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PR Newswire Association, LLC</b>		Nature of Debt (Purpose): Press Release
Mailing Address PO Box 5897		
City New York	State NY	Zip Code 10087-5897

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT493	
Amount Incurred This Period <input type="text" value="610"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="610"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kansas Association of Broadcasters</b>		Nature of Debt (Purpose): Radio/TV directory
Mailing Address 214 SW 6th Avenue Suite 300		
City Topeka	State KS	Zip Code 66603-3775

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT497	
Amount Incurred This Period <input type="text" value="50"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="50"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	<input type="text" value="760.00"/>
2) <b>TOTALS</b> This Period (last page this line number) ...	<input type="text" value="42864.05"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="42864.05"/>

14020640589

ANCY ERICKSON  
SECRETARY

ANA K. MEDALLUM  
SUPERINTENDENT  
MAIL DATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-71  
PHONE (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

**7-24-14**

HAND DELIVERED \_\_\_\_\_

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DEL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

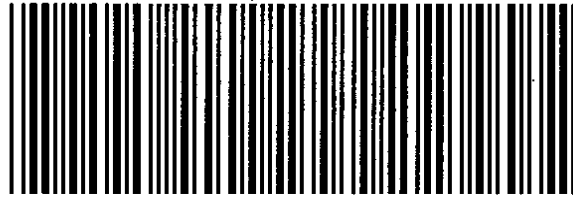
PREPARER

**DH**

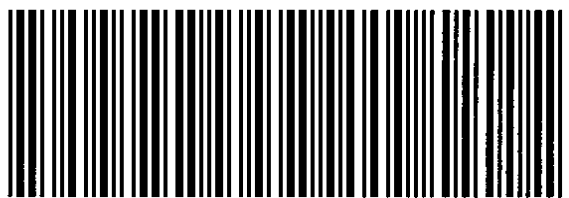
DATE PREPARED

**7-24-14**

14020640590



SEN PATCH



SEN PATCH

14020640591