

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Bob Eye for Congress, Inc.

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	15010.00	29260.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15010.00	29260.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11058.05	11189.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11058.05	11189.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	18070.45	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

Bob Eye for Congress, Inc.

Report Covering the Period: From: / / To: / /

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).....	9000.00	20950.00
(ii) Unitemized.....	6010.00	8310.00
(iii) TOTAL of contributions from individuals ▶	15010.00	29260.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15010.00	29260.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	15010.00	29260.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11058.05	11189.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	11058.05	11189.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	14118.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15010.00
25. SUBTOTAL (add Line 23 and Line 24).....	29128.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11058.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	18070.45

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

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)
Bob Eye for Congress, Inc.

Full Name (Last, First, Middle Initial) William Albott		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 08 / 2012	
Mailing Address 3636 SE Highway 40		Transaction ID : SA11AI.4223	
City Topeka	State KS	Zip Code 66607	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Psychologist	Occupation Self		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
		Check	

Full Name (Last, First, Middle Initial) Glenda Cafer		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 05 / 2012	
Mailing Address 19385 State Highway 157		Transaction ID : SA11AI.4297	
City Kirksville	State MO	Zip Code 63501	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer		Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
		Paypal	

Full Name (Last, First, Middle Initial) John M. Eye		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 08 / 2012	
Mailing Address 1431 W 7th St., Apt. 20		Transaction ID : SA11AI.4235	
City Lawrence	State KS	Zip Code 66044	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Nouveau Construction	Occupation Project Manager		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
		Check	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

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NAME OF COMMITTEE (In Full)
Bob Eye for Congress, Inc.

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

Mailing Address P.O. Box 147

City Lawrence State KS Zip Code 66044

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 05 / 2012

Transaction ID : SA11AI.4291

Amount of Each Receipt this Period
 500.00
 Paypal

B. Full Name (Last, First, Middle Initial)
Nancy Jackson

Mailing Address 1964 N 1550 Rd.

City Eudora State KS Zip Code 66025

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

Name of Employer Occupation
 Kansas University Endowment Development Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 05 / 2012

Transaction ID : SA11AI.4303

Amount of Each Receipt this Period
 500.00
 Paypal

C. Full Name (Last, First, Middle Initial)
David R. Jones

Mailing Address 7124 Ashland Glenn

City Bradento State FL Zip Code 34202

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2012

Transaction ID : SA11AI.4272

Amount of Each Receipt this Period
 2500.00
 Check

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

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

3500.00

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

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NAME OF COMMITTEE (In Full)
Bob Eye for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
M. Elaine Jones

Mailing Address 433-24 Deer Island Dr.

City Aurora State OH Zip Code 44202

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2012

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period
 2500.00

Check

B. Full Name (Last, First, Middle Initial)
Eric Kjorlie

Mailing Address 827 SW Topeka Blvd.

City Topeka State KS Zip Code 66612

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

Name of Employer Occupation
 Self Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2012

Transaction ID : SA11AI.4351

Amount of Each Receipt this Period
 500.00

Check

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

Mailing Address 1709 Indiana

City Lawrence State KS Zip Code 66044

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2012

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period
 250.00

Paypal

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

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

3250.00

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

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NAME OF COMMITTEE (In Full)
Bob Eye for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Mark B. Rockwell

Mailing Address 1201 Wakarusa Dr.
Suite E200

City Lawrence State KS Zip Code 66049

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

Name of Employer Trevino & Rockwell Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2012

Transaction ID : SA11AI.4215

Amount of Each Receipt this Period
300.00

Check

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

Mailing Address 27 Cornell Ave.

City Larkspur State CA Zip Code 94939

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

Name of Employer Sustainable Legacy LLC Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2012

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period
250.00

Check

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

Mailing Address 7934 Main St.

City Kansas City State MO Zip Code 64114

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

Name of Employer Beaver Express Service Occupation Trucking Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2012

Transaction ID : SA11AI.4380

Amount of Each Receipt this Period
250.00

Paypal

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

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

800.00

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

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NAME OF COMMITTEE (In Full)
Bob Eye for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Molly Wood

Mailing Address 1344 Strong Ave.

City Lawrence State KS Zip Code 66044

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

Name of Employer Self Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2012

Transaction ID : SA11Al.4364

Amount of Each Receipt this Period
 400.00
 Paypal

B. 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 / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

400.00

9000.00

**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 10 OF 12		
	<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)
Bob Eye for Congress, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Econ-O-Print		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>03</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		03		2012
M M	/	D D	/	Y Y Y Y								
07		03		2012								
Mailing Address P.O. Box 4041		Amount of Each Disbursement this Period										
City	State Zip Code											
Topeka	KS 66601	<table border="1"> <tr> <td>2437.21</td> </tr> </table>	2437.21									
2437.21												
Purpose of Disbursement	Category/Type	Transaction ID : SB17.4400										
Printed Materials			006									
Candidate Name	Disbursement For: 2012											
Bob Eye for Congress, Inc.	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
Office Sought:	State: KS District: 02											
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Econ-O-Print		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>16</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		16		2012
M M	/	D D	/	Y Y Y Y								
07		16		2012								
Mailing Address P.O. Box 4041		Amount of Each Disbursement this Period										
City	State Zip Code											
Topeka	KS 66601	<table border="1"> <tr> <td>213.54</td> </tr> </table>	213.54									
213.54												
Purpose of Disbursement	Category/Type	Transaction ID : SB17.4420										
6 3/4 Remit			002									
Candidate Name	Disbursement For: 2012											
Bob Eye for Congress, Inc.	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
Office Sought:	State: KS District: 02											
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Econ-O-Print		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>18</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		18		2012
M M	/	D D	/	Y Y Y Y								
07		18		2012								
Mailing Address P.O. Box 4041		Amount of Each Disbursement this Period										
City	State Zip Code											
Topeka	KS 66601	<table border="1"> <tr> <td>438.95</td> </tr> </table>	438.95									
438.95												
Purpose of Disbursement	Category/Type	Transaction ID : SB17.4421										
Fold, insert, seal and mail services			003									
Candidate Name	Disbursement For: 2012											
Bob Eye for Congress, Inc.	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
Office Sought:	State: KS District: 02											
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>3089.70</td> </tr> </table>	3089.70
3089.70		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 11 OF 12			
	<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)
Bob Eye for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Embroidery Plus		Date of Disbursement MM / DD / YYYY 07 / 11 / 2012
Mailing Address 1010 N. Kansas Ave.		Amount of Each Disbursement this Period 456.50 Transaction ID : SB17.4418
City Topeka	State KS	
Purpose of Disbursement T-Shirts (40)	Category/ Type 004	
Candidate Name Bob Eye for Congress, Inc.	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: KS	District: 02	

Full Name (Last, First, Middle Initial) B. Chad Manspeaker		Date of Disbursement MM / DD / YYYY 07 / 06 / 2012
Mailing Address 1304 SW College		Amount of Each Disbursement this Period 2431.62 Transaction ID : SB17.4404
City Topeka	State KS	
Purpose of Disbursement Salary for Campaign Staff	Category/ Type 001	
Candidate Name Bob Eye for Congress, Inc.	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: KS	District: 02	

Full Name (Last, First, Middle Initial) c. OfficeMax		Date of Disbursement MM / DD / YYYY 07 / 03 / 2012
Mailing Address 2109 SW Fairlawn Plaza		Amount of Each Disbursement this Period 568.69 Transaction ID : SB17.4398
City Topeka	State KS	
Purpose of Disbursement Office Supplies and Equipment	Category/ Type 001	
Candidate Name Bob Eye for Congress, Inc.	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: KS	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	3456.81
TOTAL This Period (last page this line number only).....	

**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 12 OF 12			
	<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)
Bob Eye for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Virginia Phillips		Date of Disbursement MM / DD / YYYY 07 / 06 / 2012
Mailing Address 11108 Glen Arbor Rd.		Amount of Each Disbursement this Period 1200.80 Transaction ID : SB17.4402
City Kansas City	State MO	
Zip Code 64114	Purpose of Disbursement Campaign Staff Salary	Category/ Type 001
Candidate Name Bob Eye for Congress, Inc.	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: KS District: 02	

Full Name (Last, First, Middle Initial) B. The Bison Group		Date of Disbursement MM / DD / YYYY 07 / 06 / 2012
Mailing Address 32 S. Pyle St.		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.4408
City Kansas City	State KS	
Zip Code 66101	Purpose of Disbursement Website Graphic Work and Build, emial set up	Category/ Type 004
Candidate Name Bob Eye for Congress, Inc.	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: KS District: 02	

Full Name (Last, First, Middle Initial) c. Winston Meriwether, LLC		Date of Disbursement MM / DD / YYYY 07 / 10 / 2012
Mailing Address P.O. Box 4162		Amount of Each Disbursement this Period 1861.99 Transaction ID : SB17.4410
City Topeka	State KS	
Zip Code 66604	Purpose of Disbursement Consulting Services, Donation Packets & Labels/Printing	Category/ Type 001
Candidate Name Bob Eye for Congress, Inc.	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: KS District: 02	

SUBTOTAL of Disbursements This Page (optional).....	4312.79
TOTAL This Period (last page this line number only).....	10859.30