## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

chedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KANSANS FOR RESPONSIBLE GOVERNMENT	
	C C00563296
heck if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Strategic Media Services	06 19 2014
Mailing Address 1911 North Ft Myer Dr	
Ste 400	Amount
City State Zip Code	47867.00
Arlington VA 22209	Transaction ID : SE.4115  Date of Disbursement or Obligation
Purpose of Expenditure Advertising Production and Placement  Category/ Type	06 18 2014
Name of Federal Candidate Support Office	Sought: X House District: 04
MICHAEL R POMPEO Oppose	President Senate State: KS
00007.00	rsement For: X Primary General
Per Election for Office Sought 63367.00 2014	Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
	,
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Oppose	President Senate State:
Calcindar Tour To Bato	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	47867.00
/b) CURTOTAL of Uniterpired Independent Europeditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Willis Hartman  [Electronically Filed] Date	6 21 2014
Signature	

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: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F24N Transaction ID:

runs 6/19-6/26

Form/Schedule: Transaction ID: