

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

YOPAC

ADDRESS (number and street) 1101 WALNUT UNIT #1101

Check if different than previously reported. (ACC) KANSAS CITY MO 64106

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00497305 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on 06 / 26 / 2012 in the State of NY

- (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 04 / 01 / 2012 through 06 / 06 / 2012

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

Type or Print Name of Treasurer J.Thomas Meier

Signature of Treasurer J.Thomas Meier [Electronically Filed] Date 07 / 14 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

YOPAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		20777.88
(b) Cash on Hand at Beginning of Reporting Period.....	15979.03	
(c) Total Receipts (from Line 19)	40500.00	41250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	56479.03	62027.88
7. Total Disbursements (from Line 31).....	7455.08	13003.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	49023.95	49023.95
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
YOPAC

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).....	40250.00	40250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	40250.00	40250.00
(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)	40250.00	40250.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	250.00	1000.00
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))..... ▶	40500.00	41250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	40500.00	41250.00

DETAILED SUMMARY PAGE

of Disbursements

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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	3805.08	9303.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3805.08	9303.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	7000.00
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	-350.00	-3300.00
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)) ..	7455.08	13003.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7455.08	13003.93

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)	40250.00	40250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40250.00	40250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3805.08	9303.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3805.08	9303.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
YOPAC

Full Name (Last, First, Middle Initial) A. Sam Geduldig		Date of Receipt
Mailing Address 1519 Pathfinder Ln		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4326
Name of Employer Clark & Associates		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation Government Affairs		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Lori Hietz		Date of Receipt
Mailing Address 260 Yorkshire Rd		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Topeka	State KS	Zip Code 66606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4331
Name of Employer Aviva		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation Officer		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) C. Mark Hietz		Date of Receipt
Mailing Address 260 Yorkshire Rd		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Topeka	State KS	Zip Code 66606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4333
Name of Employer Aviva		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation Officer		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
YOPAC

A. Ellen Merriman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 W 11th St
 City Kansas City State MO Zip Code 64105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Community Volunteer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **05 / 30 / 2012**
Transaction ID : SA11AI.4337
 Amount of Each Receipt this Period **5000.00**
 Contribution

B. Michael A. Merriman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 W 11th St
 City Kansas City State MO Zip Code 64105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Life Occupation Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **05 / 30 / 2012**
Transaction ID : SA11AI.4335
 Amount of Each Receipt this Period **5000.00**
 Contribution

C. Marybeth M. Sotos
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 W 11th St
 City Kansas City State MO Zip Code 64105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Community Volunteer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **05 / 30 / 2012**
Transaction ID : SA11AI.4339
 Amount of Each Receipt this Period **5000.00**
 Contribution

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 8 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
YOPAC

Full Name (Last, First, Middle Initial) A. Timothy Sotos		Date of Receipt
Mailing Address 300 W 11th St		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Kansas City	MO	64105
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4341
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	Contribution
CLR	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Webb		Date of Receipt
Mailing Address 315 West 3rd		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City	State	Zip Code
Pittsburg	KS	66762
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4327
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	Contribution
Watco Companies	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Stacey Webb		Date of Receipt
Mailing Address 315 West 3rd		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City	State	Zip Code
Pittsburg	KS	66762
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4329
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	Contribution
Homemaker	Homemaker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="15000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="40250.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
YOPAC

Full Name (Last, First, Middle Initial)
A. Kay Wolf for State Representative
Mailing Address 8339 Roe
City State Zip Code
Prairie Village KS 66207
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 11 / 2012
Transaction ID : SA16.4489
Amount of Each Receipt this Period
250.00
Contribution Refund

Full Name (Last, First, Middle Initial)
B.
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶ 250.00

**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)
YOPAC

Full Name (Last, First, Middle Initial)

A. Fiorella's Jack Stack BBQ

Mailing Address 9520 Metcalf Ave

City Overland Park State KS Zip Code 66212

Purpose of Disbursement
PAC Food & Beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : **SB21B.4460**

Amount of Each Disbursement this Period

282.78

Category/
Type

Full Name (Last, First, Middle Initial)

B. Intercontinental Kansas City At the Plaza

Mailing Address 401 Ward Parkway

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
PAC Food & Beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : **SB21B.4463**

Amount of Each Disbursement this Period

1286.30

Category/
Type

Full Name (Last, First, Middle Initial)

C. Kansas Athletics

Mailing Address 1651 Naismith Dr

City Lawrence State KS Zip Code 66045

Purpose of Disbursement
PAC Expense: Memorabilia

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2012

Transaction ID : **SB21B.4428**

Amount of Each Disbursement this Period

310.00

Category/
Type

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

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

1879.08

**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)
YOPAC

Full Name (Last, First, Middle Initial)

A. Koch & Hoos, LLC

Mailing Address 901 N Washington St, Suite 102

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : SB21B.4445

Amount of Each Disbursement this Period

630.00

Full Name (Last, First, Middle Initial)

B. Washington Nationals

Mailing Address 1500 S Capitol St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Event Expense: Tickets

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2012

Transaction ID : SB21B.4468

Amount of Each Disbursement this Period

360.00

Full Name (Last, First, Middle Initial)

C. Washington Nationals Club

Mailing Address 1500 S Capitol St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Food & Beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2012

Transaction ID : SB21B.4466

Amount of Each Disbursement this Period

936.00

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

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

1926.00

3805.08

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
YOPAC

Full Name (Last, First, Middle Initial)

A. ANN MARIE BUERKLE FOR CONGRESS

Date of Disbursement

Mailing Address PO BOX 219

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2012

City State Zip Code
SYRACUSE NY 13214

Transaction ID : SB23.4430

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

ANN MARIE BUERKLE

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 25

Full Name (Last, First, Middle Initial)

B. CHRIS GIBSON FOR CONGRESS

Date of Disbursement

Mailing Address PO BOX 234

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2012

City State Zip Code
SARATOGA SPRINGS NY 12866

Transaction ID : SB23.4436

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

CHRISTOPHER P GIBSON

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 20

Full Name (Last, First, Middle Initial)

C. CRAVAACK FOR CONGRESS CAMPAIGN COMMITTEE

Date of Disbursement

Mailing Address P.O. BOX 40040

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2012

City State Zip Code
ST PAUL MN 55104

Transaction ID : SB23.4433

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

RAYMOND J. CRAVAACK

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District: 08

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

1500.00

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

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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
YOPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MIA LOVE

Mailing Address 913 WEST GROUSE CIRCLE

City SARATOGA SPRINGS State UT Zip Code 84045

Purpose of Disbursement
VOID: Uncashed Check - Orig. Disbursed 12/30/2011

Candidate Name
MIA LOVE

Office Sought: House
 Senate
 President
State: UT District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2012

Transaction ID : **SB23.4492**

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF NAN HAYWORTH

Mailing Address P.O. BOX 188

City CARMEL State NY Zip Code 10512

Purpose of Disbursement
Contribution

Candidate Name
NAN HAYWORTH

Office Sought: House
 Senate
 President
State: NY District: 19

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : **SB23.4439**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. MCSALLY FOR CONGRESS

Mailing Address PO BOX 18612

City TUCSON State AZ Zip Code 85731

Purpose of Disbursement
Contribution

Candidate Name
MARTHA E MCSALLY

Office Sought: House
 Senate
 President
State: AZ District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2012

Transaction ID : **SB23.4457**

Amount of Each Disbursement this Period

2000.00

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

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

2000.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
YOPAC

Full Name (Last, First, Middle Initial)

A. RIBBLE FOR CONGRESS

Mailing Address PO BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement
Contribution

Candidate Name
REID RIBBLE

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2012

Transaction ID : SB23.4442

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

500.00

4000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
YOPAC

Full Name (Last, First, Middle Initial)

A. Amanda Grosserode for State Representative

Mailing Address 12601 W 99th St

City Lenexa State KS Zip Code 66215

Purpose of Disbursement
VOID: Uncashed Check Orig. Disb. 12/30/2011

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4494

Amount of Each Disbursement this Period

B. Bruchman for State Representative

Mailing Address 5016 W 108th Terr, #522

City Overland Park State KS Zip Code 66211

Purpose of Disbursement
VOID: Uncashed Check Orig. Disb. 12/30/2011

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4493

Amount of Each Disbursement this Period

C. Gene Suellentrop for State Representative

Mailing Address 6813 W Northwind Cir

City Wichita State KS Zip Code 67205

Purpose of Disbursement
VOID: Uncashed Check Orig. Disb. 12/30/2011

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4496

Amount of Each Disbursement this Period

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
YOPAC

Full Name (Last, First, Middle Initial)

A. Hildabrand for State Representative

Mailing Address 7352 Royalty Way #108

City Merriam State KS Zip Code 66203

Purpose of Disbursement
VOID: Uncashed Check Orig. Disb. 12/30/2011

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4495

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Paul Morrissey For Attorney General

Mailing Address 126 Rebels Roost Court

City Harpers Ferry State WV Zip Code 25425

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4470

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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