SECRETARY OF THE SENATE
09 APR 21 PM 12:01

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines.

PAT ROBERTS FOR U. S. SENATE, INC.

PO BOX 433

ADDRESS (number and street) ▼

☐ Check if different than previously reported. (ACC)

GREAT BEND — KS — 67530

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

C C00128876

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

STATE ▼ DISTRICT: KS

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) 12-Day **PRE-** Election Report for the:

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

Election on MM / DD / YYYY in the State of

(b) 30-Day **Post-** Election Report for the:

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

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2009 through 03 / 31 / 2009

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 ROBERT PARRISH (Richard A. Ball Assistant Treasurer)

Signature of Treasurer Richard A. Ball, Asst. Treas. Date 04 / 09 / 2009

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)

29020192568

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

PAT ROBERTS FOR U. S. SENATE, INC.

Report Covering the Period: From: 01 / 01 / 2009 To: 03 / 31 / 2009

	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)) ...	9425.00	19838.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	9425.00	19488.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	64050.82	384083.31
(b) Total Offsets to Operating Expenditures (from Line 14)	75.82	468.82
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	63975.00	383614.49
8. Cash on Hand at Close of Reporting Period (from Line 27)	83097.42	
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)	25000.00	

For further information contact:

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

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

29020192669

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

PAT ROBERTS FOR U. S. SENATE, INC.

Report Covering the Period: From: 01 / 01 / 2009 To: 03 / 31 / 2009

I. RECEIPTS	COLUMN A 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)	1000.00	
(ii) Unitemized	125.00	
(iii) TOTAL of contributions from individuals ▶	1125.00	9538.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	8300.00	10300.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	9425.00	19838.00
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.)	75.82	468.82
15. OTHER RECEIPTS (Dividends, Interest, etc.)	239.53	269.49
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	9740.35	20576.31

29020192670

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	64050.82	384083.31
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 (such as PACs)	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	350.00
(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	350.00
21. OTHER DISBURSEMENTS	0.00	1200.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21)	64050.82	385633.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	137407.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	9740.35
25. SUBTOTAL (add Line 23 and Line 24)	147148.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	64050.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	83097.42

29020192671

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)
[ ] 9
[X] 10

NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wilson Grand Communications

Mailing Address
429 North St. Asaph Street

City: Alexandria
State: VA
Zip Code: 22314

Nature of Debt (Purpose):
Advertising Contract for 2008 Election

Outstanding Balance Beginning This Period: 25000.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 25000.00

1) **SUBTOTALS** This Period This Page (optional)	25000.00
2) **TOTALS** This Period (last page this line number only)	25000.00
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)	
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)	25000.00

29020192972

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)

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 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)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A. Full Name (Last, First, Middle Initial)
Mann, Tracey

Mailing Address
28 Crestview Drive

City: Salina
State: KS
Zip Code: 67401

FEC ID number of contributing federal political committee.: C

Name of Employer: Zimmer Real Estate Services
Occupation: Real Estate Agent

Receipt For:
[X] Primary [ ] General
[ ] Other (specify): ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 02 / 24 / 2009

Transaction ID: C-124-05gU01

Amount of Each Receipt this Period: 1000.00

[ ] Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 1000.00

29020192673

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
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): The Kroger PAC
Mailing Address: 1014 Vine St.
City: Cincinnati State: OH Zip Code: 45202
FEC ID number of contributing federal political committee: C 00059238
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼: 500.00
Date of Receipt: 01 / 12 / 2009
Transaction ID: C-113-001d01
Amount of Each Receipt this Period: 500.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Oneok Employees PAC
Mailing Address: P. O. Box 871
City: Tulsa State: OK Zip Code: 74102
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼: 2300.00
Date of Receipt: 01 / 29 / 2009
Transaction ID: C-147-02sm02
Amount of Each Receipt this Period: 2300.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Agricultural Retailers Association PAC
Mailing Address: 1156 15th Street NW Ste 302
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C 00264770
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼: 1000.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: C-2-02CW0D
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 3800.00

TOTAL This Period (last page this line number only) ▶ 3800.00

29020192674

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
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Aircraft Owners & Pilots Assn PAC
Mailing Address: AOPA, 421 Aviation Way
City: Frederick State: MD Zip Code: 21701
FEC ID number of contributing federal political committee: C 00131185
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: C-3-01h90A
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Amgen PAC
Mailing Address: One Amgen Center Drive
City: Thousand Oaks State: CA Zip Code: 91320
FEC ID number of contributing federal political committee: C 00251876
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: C-5-02yQ06
Amount of Each Receipt this Period: 1000.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): NCPA PAC
Mailing Address: National Community Pharmacists Ass, Political Action Committee
City: Alexandria State: VA Zip Code: 22314
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 2500.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: C-139-035Y06
Amount of Each Receipt this Period: 2500.00
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶ 8300.00

29020192675

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
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A. Full Name (Last, First, Middle Initial)
Westar Energy

Mailing Address
PO Box 758500

City: Topeka
State: KS
Zip Code: 66675

FEC ID number of contributing federal political committee: C

Name of Employer

Occupation

Receipt For:
☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼
75.82

Date of Receipt
MM 02 / DD 24 / YYYY 2009

Transaction ID: C-206-03HA01

Amount of Each Receipt this Period
75.82

☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

Refund-Credit Balance

29020192675

SUBTOTAL of Receipts This Page (optional) ▶ 75.82

TOTAL This Period (last page this line number only) ▶ 75.82

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
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Banc Of America Investment Services Inc.
Mailing Address: 900 West Trade Street, Nci-026-05-1
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 16.47
Date of Receipt: 01 / 31 / 2009
Transaction ID: C-14-02GE1s
Amount of Each Receipt this Period: 3.10
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: 2006 Broadway
City: Great Bend State: KS Zip Code: 67530
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 29.56
Date of Receipt: 01 / 31 / 2009
Transaction ID: C-21-02GD1v
Amount of Each Receipt this Period: 4.24
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Capitol Hill Lists
Mailing Address: 264 N Lumpkin St. #202
City: Athens State: GA Zip Code: 30601
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify):
Election Cycle-to-Date: 223.46
Date of Receipt: 02 / 03 / 2009
Transaction ID: C-40-04NY01
Amount of Each Receipt this Period: 223.46
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
List Rental Income

SUBTOTAL of Receipts This Page (optional) 230.80

TOTAL This Period (last page this line number only) 230.80

26020192677

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
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Banc Of America Investment Services Inc.
Mailing Address: 900 West Trade Street, Nci-026-05-1
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 16.47
Date of Receipt: 02 / 28 / 2009
Transaction ID: C-15-02GE1t
Amount of Each Receipt this Period: 1.50
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

B.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: 2006 Broadway
City: Great Bend State: KS Zip Code: 67530
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 29.56
Date of Receipt: 02 / 28 / 2009
Transaction ID: C-22-02GD1w
Amount of Each Receipt this Period: 2.88
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

C.
Full Name (Last, First, Middle Initial): Banc Of America Investment Services Inc.
Mailing Address: 900 West Trade Street, Nci-026-05-1
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify): ▼
Election Cycle-to-Date ▼ 16.47
Date of Receipt: 03 / 31 / 2009
Transaction ID: C-16-02GE1u
Amount of Each Receipt this Period: 0.65
☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 5.03

TOTAL This Period (last page this line number only) ▶ 235.83

29020192578

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
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A. Full Name (Last, First, Middle Initial)
Bank Of America

Mailing Address
2006 Broadway

City: Great Bend
State: KS
Zip Code: 67530

FEC ID number of contributing federal political committee: C

Name of Employer:
Occupation:

Receipt For:
☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼ 29.56

Date of Receipt: MM 03 / DD 31 / YYYY 2009

Transaction ID: C-23-02GD1x

Amount of Each Receipt this Period: 3.70

☐ Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ▶ 3.70

TOTAL This Period (last page this line number only) ▶ 239.53

29020192679

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 78522
City: Phoenix State: AZ Zip Code: 85062
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-03Go0J
Date of Disbursemenmt: 01 / 06 / 2009
Amount of Each Disbursement this Period: 42.34
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 78522
City: Phoenix State: AZ Zip Code: 85062
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-03Go0K
Date of Disbursemenmt: 02 / 03 / 2009
Amount of Each Disbursement this Period: 35.93
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 78522
City: Phoenix State: AZ Zip Code: 85062
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-03Go0L
Date of Disbursemenmt: 03 / 04 / 2009
Amount of Each Disbursement this Period: 35.93
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 114.20
TOTAL This Period (last page this line number only) 114.20

26020192680

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 5001
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D11-04RI0B
Date of Disbursemenmt: 01 / 12 / 2009
Amount of Each Disbursement this Period: 153.95
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 5001
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Expenses
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D12-04RI0C
Date of Disbursemenmt: 02 / 11 / 2009
Amount of Each Disbursement this Period: 146.90
Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T
Mailing Address: PO Box 5001
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D13-04RI0D
Date of Disbursemenmt: 03 / 09 / 2009
Amount of Each Disbursement this Period: 147.24
Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 448.09

TOTAL This Period (last page this line number only) 562.29

29020192681

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D18-03HZ0a
Date of Disbursemenmt: 02 / 03 / 2009
Amount of Each Disbursement this Period: 88.33
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: PO Box 6463
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D19-03HZ0b
Date of Disbursemenmt: 03 / 04 / 2009
Amount of Each Disbursement this Period: 88.33
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: P. O. Box 650553
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D40-03IF0Y
Date of Disbursemenmt: 01 / 14 / 2009
Amount of Each Disbursement this Period: 147.55
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 324.21

TOTAL This Period (last page this line number only) 886.50

29020192682

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: P. O. Box 650553
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D41-03IF0Z
Date of Disbursemenmt: MM 02 / DD 14 / YYYY 2009
Amount of Each Disbursement this Period: 157.34
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): AT&T Mobility
Mailing Address: P. O. Box 650553
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D42-03IF0a
Date of Disbursemenmt: MM 03 / DD 13 / YYYY 2009
Amount of Each Disbursement this Period: 60.41
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Ball Consulting Group
Mailing Address: PO Box 1511
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Acctng/Bkkpg Dec '08
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D53-034d0H
Date of Disbursemenmt: MM 01 / DD 17 / YYYY 2009
Amount of Each Disbursement this Period: 2411.21
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2628.96

TOTAL This Period (last page this line number only) ▶ 3515.46

29020192683

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Ball Consulting Group
Mailing Address: PO Box 1511
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Acctng/Bkkpg Jan 2009
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D54-034d0I
Date of Disbursemenmt: 02 / 11 / 2009
Amount of Each Disbursement this Period: 2344.78
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 15731
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (436)Dec '08 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D59-02GY2G
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 730.83
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Amazon.com
Mailing Address:
City: Internet State: Zip Code:
Purpose of Disbursement: (436)Gift for Speaker in
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D1-05gP01
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 69.99
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 3075.61

TOTAL This Period (last page this line number only) 6591.07

26020192584

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 15731
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (436)Annual Membership
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-02GY2H
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 60.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Electro Rent Corp.
Mailing Address: 6060 Sepulveda Blvd
City: Van Nuys State: CA Zip Code: 91411
Purpose of Disbursement: (436)Office Eq. Rental
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-04E40A
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 109.60
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Fedex
Mailing Address: PO Box 1140
City: Memphis State: TN Zip Code: 38101
Purpose of Disbursement: (436)Shipping Expenses
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-01Du1v
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 47.97
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 6591.07

29020192685

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Fedex Kinko's
Mailing Address: 2201 SW Wanamaker Rd
City: Topeka State: KS Zip Code: 66614
Purpose of Disbursement: (436)Folding Sheets
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-04Dx0A
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 31.08
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Food Lion #1315
Mailing Address:
City: Edgewater State: MD Zip Code:
Purpose of Disbursement: (436)Food/Drink-Xmas Lunc
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D7-02pj0U
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 116.03
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Google
Mailing Address: Google.com/chCA, CC@Google.COMCA
City: Internet State: Zip Code:
Purpose of Disbursement: (436)Google Ads
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D9-04et06
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 23.54
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 6591.07

29020192585

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Johnny's Half Shell
Mailing Address: 400 North Capitol St. NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: (436)Campaign Lunch
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D10-031104
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 51.91
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): McAffee Com
Mailing Address:
City: State: CA Zip Code:
Purpose of Disbursement: (436)Softwr-Virus Protctn
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D11-038N05
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 74.92
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Virgin Mobile USA
Mailing Address:
City: State: NJ Zip Code:
Purpose of Disbursement: (436)Phone Equipment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D12-058605
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 69.66
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00
TOTAL This Period (last page this line number only) ▶ 6591.07

29020192687

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 15731
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (438)Jan 2009 Pymt
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D61-02GY2I
Date of Disbursemenmt: 02 / 20 / 2009
Amount of Each Disbursement this Period: 475.02
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Capitol Plaza Topeka Hotel
Mailing Address: Falling Waters Grille, 1717 Southwest Blvd
City: Topeka State: KS Zip Code: 66612
Purpose of Disbursement: (438)KS Day W/Chambliss
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-032P09
Date of Disbursemenmt: 02 / 20 / 2009
Amount of Each Disbursement this Period: 110.22
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Domino's Pizza #04329 or 04338
Mailing Address: 15 K. Street NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: (438)New Staff Lunch
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-02EE0M
Date of Disbursemenmt: 02 / 20 / 2009
Amount of Each Disbursement this Period: 55.14
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 475.02

TOTAL This Period (last page this line number only) 7066.09

28020192688

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Fedex
Mailing Address: PO Box 1140
City: Memphis State: TN Zip Code: 38101
Purpose of Disbursement: (438)Shipping Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-01Du1w
Date of Disbursemenmt: MM 02 / DD 20 / YYYY 2009
Amount of Each Disbursement this Period: 5.93
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Network Solutions
Mailing Address: 505 Huntmar Park Drive
City: Herndon State: VA Zip Code: 20170
Purpose of Disbursement: (438)Website Domain Names
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-02Ph05
Date of Disbursemenmt: MM 02 / DD 20 / YYYY 2009
Amount of Each Disbursement this Period: 74.75
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Ten Penh
Mailing Address: 1001 Pennsylvania Ave. NW
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement: (438)Lunch Mtg-A. Presley
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-030I04
Date of Disbursemenmt: MM 02 / DD 20 / YYYY 2009
Amount of Each Disbursement this Period: 59.70
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 7066.09

29020192689

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): T. M. Pres Inaugural 20
Mailing Address: 55th Presidentail Inaugural Commit
City: State: Zip Code:
Purpose of Disbursement: (438)Internet Chg-Tckts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D7-02wY02
Date of Disbursemenmt: 02 / 20 / 2009
Amount of Each Disbursement this Period: 17.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): U. S. Senate Restaurants
Mailing Address: Senate Office Bldgs, 1ST & C. Sts NW
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (438)Luncheon Mtg
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D8-02Dz25
Date of Disbursemenmt: 02 / 20 / 2009
Amount of Each Disbursement this Period: 34.50
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): U. S. Senate Restaurants
Mailing Address: Senate Office Bldgs, 1ST & C. Sts NW
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (438)Lunch Mtg-Fin. Comm.
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D9-02Dz26
Date of Disbursemenmt: 02 / 20 / 2009
Amount of Each Disbursement this Period: 41.50
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

TOTAL This Period (last page this line number only) ..... ▶ 7066.09

29020192 6990

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 15731
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (440)Feb 2009 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D62-02GY2J
Date of Disbursemenmt: 03 / 18 / 2009
Amount of Each Disbursement this Period: 212.80
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Electro Rent Corp.
Mailing Address: 6060 Sepulveda Blvd
City: Van Nuys State: CA Zip Code: 91411
Purpose of Disbursement: (440)Equipment Rental
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D2-04E40B
Date of Disbursemenmt: 03 / 18 / 2009
Amount of Each Disbursement this Period: 185.90
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: P.O. Box 15019
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (435)Dec Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D66-02wl0y
Date of Disbursemenmt: 01 / 16 / 2009
Amount of Each Disbursement this Period: 492.43
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 705.23

TOTAL This Period (last page this line number only) ..... ▶ 7771.32

29020192591

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Office Depot
Mailing Address: 6700 B. Richmond Highway
City: Alexandria State: VA Zip Code: 22306
Purpose of Disbursement: (435)Supplies
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D1-01NG0Y
Date of Disbursemenmt: 01 / 16 / 2009
Amount of Each Disbursement this Period: 38.83
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Red Hot & Blue Restaurant
Mailing Address: 169 Hillwood Ave
City: Falls Church State: VA Zip Code: 22046
Purpose of Disbursement: (435)Meal/Meeting Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D3-05gK01
Date of Disbursemenmt: 01 / 16 / 2009
Amount of Each Disbursement this Period: 379.27
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Senate Gift Shop
Mailing Address: Senate Dirksen Bldg, Sdg-42
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (435)Gifts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D4-02Dq1v
Date of Disbursemenmt: 01 / 16 / 2009
Amount of Each Disbursement this Period: 20.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

TOTAL This Period (last page this line number only) ..... ▶ 7771.32

29020192692

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: P.O. Box 15019
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (437)Jan '09 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D67-02wI0z
Date of Disbursemenmt: 02 / 12 / 2009
Amount of Each Disbursement this Period: 1984.39
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): American Air
Mailing Address:
City: Tulsa State: OK Zip Code:
Purpose of Disbursement: (437)Travel-Tickets
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D1-05gR01
Date of Disbursemenmt: 02 / 12 / 2009
Amount of Each Disbursement this Period: 1771.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Cato Travel
Mailing Address: Senate Russell Bld, 1ST & C. St. NE
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (437)Travel Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D2-02to0i
Date of Disbursemenmt: 02 / 12 / 2009
Amount of Each Disbursement this Period: 25.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1984.39

TOTAL This Period (last page this line number only) ▶ 9755.71

29020192593

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Office Depot
Mailing Address: 6700 B. Richmond Highway
City: Alexandria State: VA Zip Code: 22306
Purpose of Disbursement: (437)Office Supplies
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-01NG0Z
Date of Disbursemenmt: 02 / 12 / 2009
Amount of Each Disbursement this Period: 81.89
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: P.O. Box 15019
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: (439)Feb 2009 Payment
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D68-02wl10
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 1046.67
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Amazon.com
Mailing Address:
City: Internet State: Zip Code:
Purpose of Disbursement: (439)Gifts-Hosting KS Day
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-05gP02
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 183.31
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 1046.67

TOTAL This Period (last page this line number only) 10802.38

29020192694

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Amazon.com
Mailing Address:
City: Internet State: Zip Code:
Purpose of Disbursement: (439)Gifts-Hosting
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-05gP03
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 55.79
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Capitol Plaza Hotel
Mailing Address: 1717 SW Topeka Blvd
City: Topeka State: KS Zip Code: 66612
Purpose of Disbursement: (439)Travel-Lodging
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D4-02FI0s
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 187.32
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): J. R. Koontz Flowers
Mailing Address: 155 N. Market, Ste 110
City: Wichita State: KS Zip Code: 67214
Purpose of Disbursement: (439)Flowers(Karin Wisdom
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D7-02Ei08
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 84.99
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only) 10802.38

26020192595

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Midwest Express Airline
Mailing Address: 6744 S. Howell Ave.
City: Oak Creek State: WI Zip Code: 53154
Purpose of Disbursement: (439)Travel-Tickets
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D9-01dn0s
Date of Disbursemenmt: MM 03 / DD 17 / YYYY 2009
Amount of Each Disbursement this Period: 319.20
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Senate Gift Shop
Mailing Address: Senate Dirksen Bldg, Sdg-42
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (439)Gifts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D10-02Dq1w
Date of Disbursemenmt: MM 03 / DD 17 / YYYY 2009
Amount of Each Disbursement this Period: 42.50
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Senate Gift Shop
Mailing Address: Senate Dirksen Bldg, Sdg-42
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: (439)Gifts
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D11-02Dq1x
Date of Disbursemenmt: MM 03 / DD 17 / YYYY 2009
Amount of Each Disbursement this Period: 42.50
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 10802.38

29020192599

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bellwether Consulting Group
Mailing Address: 666 11th st, nw, Suite 800
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Fundrsng Consltng Feb '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D71-03YL0d
Date of Disbursemenmt: 02 / 03 / 2009
Amount of Each Disbursement this Period: 1000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Bellwether Consulting Group
Mailing Address: 666 11th st, nw, Suite 800
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Fundrsng/Cnsltng Mar '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D72-03YL0e
Date of Disbursemenmt: 02 / 24 / 2009
Amount of Each Disbursement this Period: 1000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Bellwether Consulting Group
Mailing Address: 666 11th st, nw, Suite 800
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Deposit-Event 2/26/09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D73-03YL0f
Date of Disbursemenmt: 03 / 09 / 2009
Amount of Each Disbursement this Period: 50.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2050.00

TOTAL This Period (last page this line number only) ▶ 12852.38

28020192697

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Bellwether Consulting Group
Mailing Address: 666 11th st, nw, Suite 800
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Fundrsng/Cnsltng Apr 2009
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D74-03YL0g
Date of Disbursemenmt: 03 / 26 / 2009
Amount of Each Disbursement this Period: 1000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Capitol Plaza Hotel
Mailing Address: 1717 SW Topeka Blvd
City: Topeka State: KS Zip Code: 66612
Purpose of Disbursement: Food Gift-Sen. Chambaliss
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D98-02FI0r
Date of Disbursemenmt: 02 / 05 / 2009
Amount of Each Disbursement this Period: 48.27
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Cox Communications,
Mailing Address: P. O. Box 22142
City: Tulsa State: OK Zip Code: 74121
Purpose of Disbursement: Communication Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D133-03IG0I
Date of Disbursemenmt: 01 / 06 / 2009
Amount of Each Disbursement this Period: 236.25
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 1284.52

TOTAL This Period (last page this line number only) 14136.90

29020192698

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Cox Communications,
Mailing Address: P. O. Box 22142
City: Tulsa State: OK Zip Code: 74121
Purpose of Disbursement: Communication Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D134-03IG0J
Date of Disbursemenmt: 02 / 03 / 2009
Amount of Each Disbursement this Period: 236.26
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Cox Communications,
Mailing Address: P. O. Box 22142
City: Tulsa State: OK Zip Code: 74121
Purpose of Disbursement: Communication Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D135-03IG0K
Date of Disbursemenmt: 03 / 04 / 2009
Amount of Each Disbursement this Period: 236.26
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Deer Park
Mailing Address: Processing Center, P.O. Box 856192
City: Louisville State: KY Zip Code: 40285
Purpose of Disbursement: Coffee Service
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D147-03YM04
Date of Disbursemenmt: 03 / 18 / 2009
Amount of Each Disbursement this Period: 344.36
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 816.88

TOTAL This Period (last page this line number only) ..... ▶ 14953.78

29020192698

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Distinctive Stationery
Mailing Address: 204 Azar Court
City: Baltimore State: MD Zip Code: 21227
Purpose of Disbursement: Printing-Christmas Cards
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D156-02yh04
Date of Disbursemenmt: 03 / 18 / 2009
Amount of Each Disbursement this Period: 1424.63
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Gray Horse Farms LLC
Mailing Address: 201 S Kansas Ave
City: Topeka State: KS Zip Code: 66605
Purpose of Disbursement: Rent-Dec '08/Jan '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D192-05dx02
Date of Disbursemenmt: 01 / 14 / 2009
Amount of Each Disbursement this Period: 560.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Gray Horse Farms LLC
Mailing Address: 201 S Kansas Ave
City: Topeka State: KS Zip Code: 66605
Purpose of Disbursement: Rent-Feb 2009
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D193-05dx03
Date of Disbursemenmt: 01 / 26 / 2009
Amount of Each Disbursement this Period: 280.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 2264.63

TOTAL This Period (last page this line number only) 17218.41

29020192700

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Gray Horse Farms LLC
Mailing Address: 201 S Kansas Ave
City: Topeka State: KS Zip Code: 66605
Purpose of Disbursement: Rent-March 2009
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D194-05dx04
Date of Disbursemenmt: MM 02 / DD 24 / YYYY 2009
Amount of Each Disbursement this Period: 280.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Hoover, Scheremerhorn, Edwards,
Mailing Address: Pinaire & Rombold, 811 North Washington Street
City: Junction City State: KS Zip Code: 66441
Purpose of Disbursement: Elec Canvas/Recount
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D212-05gH01
Date of Disbursemenmt: MM 01 / DD 08 / YYYY 2009
Amount of Each Disbursement this Period: 2998.70
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Hsbc Business Solutions
Mailing Address: PO Box 5239
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Office Supplies
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D216-02yg0N
Date of Disbursemenmt: MM 01 / DD 17 / YYYY 2009
Amount of Each Disbursement this Period: 15.02
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3293.72

TOTAL This Period (last page this line number only) ▶ 20512.13

29020192701

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)

[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Hsbc Business Solutions
Mailing Address: PO Box 5239
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Office Supplies
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D217-02yg0O
Date of Disbursemenmt: MM 02 / DD 14 / YYYY 2009
Amount of Each Disbursement this Period: 9.66
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Internal Revenue Service
Mailing Address:
City: Ogden State: UT Zip Code: 84201
Purpose of Disbursement: 940 Unemploymt Payroll Tx
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D233-02MM1B
Date of Disbursemenmt: MM 01 / DD 06 / YYYY 2009
Amount of Each Disbursement this Period: 174.48
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Internal Revenue Service
Mailing Address:
City: Ogden State: UT Zip Code: 84201
Purpose of Disbursement: 1120 Extension-Corp Txs
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D234-02MM1C
Date of Disbursemenmt: MM 03 / DD 13 / YYYY 2009
Amount of Each Disbursement this Period: 2809.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 2993.14

TOTAL This Period (last page this line number only) ..... ▶ 23505.27

29020192702

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Investment Company Institute (ICI PAC)
Mailing Address: Political Action Committee, 1401 H. Street NW Suite 1200
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: Catering/Rm/Staff
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D236-02Q001
Date of Disbursemenmt: 01 / 26 / 2009
Amount of Each Disbursement this Period: 1715.20
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Kansas Day Club
Mailing Address: PO Box 2153
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Banquet Reservations
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D244-01200P
Date of Disbursemenmt: 01 / 23 / 2009
Amount of Each Disbursement this Period: 600.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Kansas Employment Security Fund
Mailing Address: Kansas Dept Of Human Resources, P. O. Box 400
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: 4th Qtr Payroll Taxes
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D245-01KS0D
Date of Disbursemenmt: 01 / 06 / 2009
Amount of Each Disbursement this Period: 988.70
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 3303.90

TOTAL This Period (last page this line number only) 26809.17

29020192703

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Kansas Withholding Tax
Mailing Address: Kansas Dept Of Revenue, 915 SW Harrison Street
City: Topeka State: KS Zip Code: 66625
Purpose of Disbursement: 4th Qtr 2008 St WH Tax
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D251-01KR0E
Date of Disbursemenmt: 01 / 06 / 2009
Amount of Each Disbursement this Period: 4282.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Kensinger, David A.
Mailing Address: 5421 SW Quail Run Dr.
City: Topeka State: KS Zip Code: 66610
Purpose of Disbursement: Fundrsng Consltng-Jan '09
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D255-02Mo07
Date of Disbursemenmt: 01 / 06 / 2009
Amount of Each Disbursement this Period: 15000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Linweld
Mailing Address: P. O. Box 1858
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: 40X Helium-Balloon Grd
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D270-01NQ0p
Date of Disbursemenmt: 01 / 29 / 2009
Amount of Each Disbursement this Period: 40.60
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 19322.60

TOTAL This Period (last page this line number only) ▶ 46131.77

29020192704

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Linweld
Mailing Address: P. O. Box 1858
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Helium Cylinder
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D271-01NQ0q
Date of Disbursemenmt: 02 / 03 / 2009
Amount of Each Disbursement this Period: 4.38
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Linweld
Mailing Address: P. O. Box 1858
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Helium Cyclinders
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D272-01NQ0r
Date of Disbursemenmt: 03 / 04 / 2009
Amount of Each Disbursement this Period: 11.34
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): McKellar Group Inc.
Mailing Address: 523 Grand Boulevard, Suite 1D
City: Kansas City State: MO Zip Code: 64106
Purpose of Disbursement: Fundraising-Wines/Spirits
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D289-036v0P
Date of Disbursemenmt: 01 / 08 / 2009
Amount of Each Disbursement this Period: 351.02
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 366.74

TOTAL This Period (last page this line number only) 46498.51

29020192705

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Native Sons & Daughters Of Kansas
Mailing Address: PO Box 546
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Banquet Tickets
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D310-02un06
Date of Disbursemenmt: 01 / 23 / 2009
Amount of Each Disbursement this Period: 120.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Add Adv Vote Functn Pg
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D316-031R0s
Date of Disbursemenmt: 01 / 29 / 2009
Amount of Each Disbursement this Period: 740.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: New Contract-Web Site
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D317-031R0t
Date of Disbursemenmt: 03 / 13 / 2009
Amount of Each Disbursement this Period: 2000.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2860.00

TOTAL This Period (last page this line number only) ▶ 49358.51

29020192706

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): New Media Communications
Mailing Address: 3046 Brecksville Road
City: Richfield State: OH Zip Code: 44286
Purpose of Disbursement: Conf.,Hosting Web Site
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D318-031R0u
Date of Disbursemenmt: MM 03 / DD 13 / YYYY 2009
Amount of Each Disbursement this Period: 175.94
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Postmaster-Great Bend
Mailing Address:
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Roll of Stamps
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D350-01771f
Date of Disbursemenmt: MM 01 / DD 06 / YYYY 2009
Amount of Each Disbursement this Period: 42.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Postmaster-Great Bend
Mailing Address:
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Certified Fees,Stamps
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D351-01771g
Date of Disbursemenmt: MM 01 / DD 27 / YYYY 2009
Amount of Each Disbursement this Period: 50.42
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 268.36

TOTAL This Period (last page this line number only) ..... ▶ 49626.87

29020192707

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Postmaster--Dodge City
Mailing Address:
City: Dodge City State: KS Zip Code: 67801
Purpose of Disbursement: Box Rental
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D355-012F0K
Date of Disbursemenmt: 01 / 23 / 2009
Amount of Each Disbursement this Period: 44.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Roberts, Franki
Mailing Address: 2203 White Oakes Drive
City: Alexandria State: VA Zip Code: 22306
Purpose of Disbursement: Reimb-RCS luncheon
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D374-01Em1M
Date of Disbursemenmt: 01 / 16 / 2009
Amount of Each Disbursement this Period: 40.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Roberts, Franki
Mailing Address: 2203 White Oakes Drive
City: Alexandria State: VA Zip Code: 22306
Purpose of Disbursement: Reimb-Rep Women's Fed
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D375-01Em1N
Date of Disbursemenmt: 02 / 03 / 2009
Amount of Each Disbursement this Period: 60.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 144.00

TOTAL This Period (last page this line number only) 49770.87

29020192708

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Roberts, Franki
Mailing Address: 2203 White Oakes Drive
City: Alexandria State: VA Zip Code: 22306
Purpose of Disbursement: Reimb-Cong. Club
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D376-01Em1O
Date of Disbursemenmt: 03 / 13 / 2009
Amount of Each Disbursement this Period: 200.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Seaton, Seaton & Gillespie, LLP
Mailing Address: P.O. Box 816
City: Manhattan State: KS Zip Code: 66505
Purpose of Disbursement: Recount/Canvass-Prof Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D386-05gI01
Date of Disbursemenmt: 01 / 08 / 2009
Amount of Each Disbursement this Period: 1207.50
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Smith Audio Visual
Mailing Address: 310 SW 6TH Ave.
City: Topeka State: KS Zip Code: 66603
Purpose of Disbursement: Audio Eq Rental
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D403-02Db03
Date of Disbursemenmt: 02 / 05 / 2009
Amount of Each Disbursement this Period: 182.67
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1590.17

TOTAL This Period (last page this line number only) ..... ▶ 51361.04

29020192709

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 105243
City: Atlanta State: GA Zip Code: 30348
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D411-04W207
Date of Disbursemenmt: 01 / 12 / 2009
Amount of Each Disbursement this Period: 120.07
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 105243
City: Atlanta State: GA Zip Code: 30348
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D412-04W208
Date of Disbursemenmt: 02 / 12 / 2009
Amount of Each Disbursement this Period: 110.41
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 105243
City: Atlanta State: GA Zip Code: 30348
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D413-04W209
Date of Disbursemenmt: 03 / 13 / 2009
Amount of Each Disbursement this Period: 105.23
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 335.71

TOTAL This Period (last page this line number only) 51696.75

29020192710

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P. O. Box 660108
City: Dallas State: TX Zip Code: 75266
Purpose of Disbursement: Telephone Bank
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D450-02Mn1Y
Date of Disbursemenmt: 01 / 29 / 2009
Amount of Each Disbursement this Period: 256.54
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Verizon Wireless
Mailing Address: P. O. Box 660108
City: Dallas State: TX Zip Code: 75266
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D451-02Mn1Z
Date of Disbursemenmt: 03 / 04 / 2009
Amount of Each Disbursement this Period: 256.54
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Ward Loyd Law Offices, LLC
Mailing Address: 118 West Pine Street, Post Office Box 834
City: Garden City State: KS Zip Code: 67846
Purpose of Disbursement: Legal Fees-Elec Contest
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D463-05gG01
Date of Disbursemenmt: 01 / 08 / 2009
Amount of Each Disbursement this Period: 11112.52
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 11625.60

TOTAL This Period (last page this line number only) ▶ 63322.35

29020192711

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Wolfe's Camera Shops Inc.
Mailing Address: 635 Kansas Ave., P. O. Box 1437
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Photography Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D473-02EM0v
Date of Disbursemenmt: 01 / 06 / 2009
Amount of Each Disbursement this Period: 224.04
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Wolfe's Camera Shops Inc.
Mailing Address: 635 Kansas Ave., P. O. Box 1437
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Photography Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D474-02EM0w
Date of Disbursemenmt: 02 / 05 / 2009
Amount of Each Disbursement this Period: 9.62
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Wolfe's Camera Shops Inc.
Mailing Address: 635 Kansas Ave., P. O. Box 1437
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Photography Expense
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D475-02EM0x
Date of Disbursemenmt: 03 / 04 / 2009
Amount of Each Disbursement this Period: 27.80
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 261.46

TOTAL This Period (last page this line number only) 63583.81

29020192712

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Dunkin Donuts and Baskin Robbins
Mailing Address: 3033 Solomons Island Rd
City: Edgewater State: MD Zip Code:
Purpose of Disbursement: (436)Food for Luncheon
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-05gO01
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 29.96
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Giant #750
Mailing Address:
City: Alexandria State: VA Zip Code:
Purpose of Disbursement: (436)Staff Christmas Lunc
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D8-02x103
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 46.17
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Schneiders Of Capitol Hill
Mailing Address: 300 Massachusetts Ave.
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: (438)Gifts at KS Day
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-02rN03
Date of Disbursemenmt: 02 / 20 / 2009
Amount of Each Disbursement this Period: 76.28
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0

TOTAL This Period (last page this line number only) 0

29020192713

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Dirksen South
Mailing Address: 13202627
City: Washington State: DC Zip Code:
Purpose of Disbursement: (440)Luncheon Meeting
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-05gZ01
Date of Disbursemenmt: 03 / 18 / 2009
Amount of Each Disbursement this Period: 18.50
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Postmaster
Mailing Address: Belle View Branch
City: Alexandria State: VA Zip Code:
Purpose of Disbursement: (440)Postage
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D3-05gY01
Date of Disbursemenmt: 03 / 18 / 2009
Amount of Each Disbursement this Period: 8.40
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Panda Garden
Mailing Address: 600 SW 10th Ave
City: Topeka State: KS Zip Code: 66612
Purpose of Disbursement: (435)Travel-Meal
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D2-05gJ01
Date of Disbursemenmt: 01 / 16 / 2009
Amount of Each Disbursement this Period: 43.55
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0

TOTAL This Period (last page this line number only) 0

29020192714

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Sonic
Mailing Address: 1151 S. W. Gage
City: Topeka State: KS Zip Code: 66604
Purpose of Disbursement: (435)Travel-Meal
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D5-01nX03
Date of Disbursemenmt: 01 / 16 / 2009
Amount of Each Disbursement this Period: 10.78
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Senate Catering
Mailing Address:
City: Washington State: DC Zip Code:
Purpose of Disbursement: (437)Catering-Food
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D4-05gS01
Date of Disbursemenmt: 02 / 12 / 2009
Amount of Each Disbursement this Period: 19.98
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): TLF Le Prin Temps
Mailing Address:
City: Washington State: DC Zip Code:
Purpose of Disbursement: (437)Flowers(T Owens)
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D5-05gT01
Date of Disbursemenmt: 02 / 12 / 2009
Amount of Each Disbursement this Period: 86.52
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0

TOTAL This Period (last page this line number only) ..... ▶ 0

29020192715

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): 1-800 Flowers.Com.Inc.
Mailing Address: Internet
City: State: Zip Code:
Purpose of Disbursement: (439)Flowers
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D1-05gW01
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 54.99
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Fountain/Sevil
Mailing Address: Airport
City: Kansas City State: MO Zip Code:
Purpose of Disbursement: (439)Travel-Food
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D5-05gX01
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 21.82
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Hudson News 310 Ws
Mailing Address: Rria-Terminal A.
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: (439)Travel-Food/Meal
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D6-02wI08
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 14.25
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 0

TOTAL This Period (last page this line number only) 0

29020192716

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Midwest Express
Mailing Address:
City: Washington State: Zip Code:
Purpose of Disbursement: (439)Travel Fee
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D8-05g102
Date of Disbursemenmt: 03 / 17 / 2009
Amount of Each Disbursement this Period: 40.00
MEMO
Credit Card Item
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Britt, David I.
Mailing Address: 5314 W. 66th Terrace
City: Prairie Village State: KS Zip Code: 66208
Purpose of Disbursement: Walk Door to Door-Vote
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D87-05gN01
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 60.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Corporation Service Company
Mailing Address: P.O. Box 13397
City: Philadelphia State: PA Zip Code: 19101
Purpose of Disbursement: Legal Fees
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify): ▼
Transaction ID: D122-05ga01
Date of Disbursemenmt: 03 / 25 / 2009
Amount of Each Disbursement this Period: 180.23
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 240.23

TOTAL This Period (last page this line number only) ..... ▶ 240.23

29020192717

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)
[X] 17 [ ] 18 [ ] 19a
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (in Full)
PAT ROBERTS FOR U. S. SENATE, INC. C00128876

A.
Full Name (Last, First, Middle Initial): Lashley, Trenton
Mailing Address: 5200 Hadley Court, Apt #2
City: Overland Park State: KS Zip Code: 66202
Purpose of Disbursement: Walk Door to Door
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D268-05gM01
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 100.00
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Restaurant Associates
Mailing Address: C/O Bank of America Illinois, 91337 Collections Drive
City: Chicago State: IL Zip Code: 60693
Purpose of Disbursement: Meals/Rep Pol,String,Comm
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D368-05gV01
Date of Disbursemenmt: 03 / 18 / 2009
Amount of Each Disbursement this Period: 70.98
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Scheel, Mark
Mailing Address: 5738 Maple Dr
City: Mission State: KS Zip Code: 66202
Purpose of Disbursement: Door to Door Get Votes
Candidate Name:
Category/Type:
Office Sought: State: District:
Disbursement For: [X] Primary [ ] General [ ] Other (specify):
Transaction ID: D381-05gL01
Date of Disbursemenmt: 01 / 17 / 2009
Amount of Each Disbursement this Period: 55.80
[ ] Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 226.78

TOTAL This Period (last page this line number only) 467.01

29020192718

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

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29020192721