

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 2042  
 Check if different than previously reported. (ACC) Topeka KS 66601-2042

2. **FEC IDENTIFICATION NUMBER** ▼ C C00586370 CITY ▲ STATE ▲ ZIP CODE ▲  
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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of   
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
10 / 01 / 2015 through 12 / 31 / 2015

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 Heather Grote  
Signature of Treasurer Heather Grote *[Electronically Filed]* Date M M / D D / Y Y Y Y  
01 / 29 / 2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**Lynn Jenkins Victory Fund**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	15500.00	46666.30
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15500.00	46666.30
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	6842.26	11644.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6842.26	11644.92
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	5767.95	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Lynn Jenkins Victory Fund**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15400.00	40091.30
(ii) Unitemized.....	100.00	575.00
(iii) TOTAL of contributions from individuals ▶	15500.00	40666.30
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15500.00	46666.30
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	6810.21	11121.57
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	22310.21	57787.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 9

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6842.26	11644.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	12000.00	40375.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	18842.26	52019.92

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2300.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22310.21
25. SUBTOTAL (add Line 23 and Line 24).....	24610.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	18842.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5767.95

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 9
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Lynn Jenkins Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Sue Anderson**

Mailing Address 100 Fall Creek Rd.

City Lawrence State KS Zip Code 66049-9067

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

Name of Employer homemaker Occupation homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2015

**Transaction ID : A3ECD144ED8484129BEE**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**James Klausman**

Mailing Address 5804 SW 44th Ct.

City Topeka State KS Zip Code 66610-1645

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

Name of Employer Midwest Health Management Occupation Insurance Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : A105C673E75DB4CEFA65**

Amount of Each Receipt this Period  
 5400.00

**C.** Full Name (Last, First, Middle Initial)  
**Dana Anderson**

Mailing Address 100 Fall Creek Rd.

City Lawrence State KS Zip Code 66049-9067

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

Name of Employer Macerich Occupation Vice Chairman of the Board

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2015

**Transaction ID : A90A6F3B186AC4A999E9**

Amount of Each Receipt this Period  
 5000.00

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

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

15400.00

15400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lynn Jenkins Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Lynn Jenkins For Congress**

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601-1441

FEC ID number of contributing federal political committee. **C** C00433730

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 8021.36

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : AD528E49D442B4D24A1B**

Amount of Each Receipt this Period  
 4010.00  
 plane and fundraising expenses

**B.** Full Name (Last, First, Middle Initial)  
**Lynn Jenkins For Congress**

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601-1441

FEC ID number of contributing federal political committee. **C** C00433730

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10731.57

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : A2698BF6F1D43412B840**

Amount of Each Receipt this Period  
 2710.21  
 bookkeeping, printing and travel

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

6720.21

6720.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Lynn Jenkins Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Grote and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 28 N. 8th St. Suite 317		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : B16C5D9C7C99A4B4BA34</b>
City Columbia	State MO	
Purpose of Disbursement bookkeeping and compliance		Category/ Type 001
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Strategic Advance Services LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2015
Mailing Address 611 Pennsylvania Ave SE #267		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : B2510208CC7B74C6CB6A</b>
City Washington	State DC	
Purpose of Disbursement travel		Category/ Type 002
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Grote and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2015
Mailing Address 28 N. 8th St. Suite 317		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : BF6FF12AEE915489DB3F</b>
City Columbia	State MO	
Purpose of Disbursement bookkeeping and compliance		Category/ Type 001
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Lynn Jenkins Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Grote and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 28 N. 8th St. Suite 317		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : B30312026A2AB48D682E</b>
City Columbia	State MO	
Zip Code 65201-7708	Purpose of Disbursement bookkeeping and compliance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. A. Harper Development</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 5417 Chadwick		Amount of Each Disbursement this Period 160.47 <b>Transaction ID : BA5462947798346988B3</b>
City Fairway	State KS	
Zip Code 66205-2624	Purpose of Disbursement travel	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Pro Print</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 1033 SW Gage Blvd. Ste 200		Amount of Each Disbursement this Period 249.74 <b>Transaction ID : BB01ADA7D69D24DEABE4</b>
City Topeka	State KS	
Zip Code 66604-2596	Purpose of Disbursement printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	910.21
<b>TOTAL</b> This Period (last page this line number only).....	6710.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 9
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Lynn Jenkins Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Lynn Jenkins For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2015</b>
Mailing Address <b>PO Box 1441</b>		Amount of Each Disbursement this Period <b>200.00</b> Transaction ID : <b>B7AF57379BBBA40EE923</b>
City <b>Topeka</b> State <b>KS</b> Zip Code <b>66601-1441</b>	Purpose of Disbursement Transfer: transfer <b>008</b> Category/Type	
Candidate Name <b>Lynn Jenkins</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>KS</b> District: <b>02</b>		

Full Name (Last, First, Middle Initial) <b>B. Lead Your Nation Now Pac (Lynn Pac)</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2015</b>
Mailing Address <b>PO Box 1872</b>		Amount of Each Disbursement this Period <b>1800.00</b> Transaction ID : <b>B602C8A5D4599495C977</b>
City <b>Topeka</b> State <b>KS</b> Zip Code <b>66601-1872</b>	Purpose of Disbursement Transfer: transfer <b>008</b> Category/Type	
Candidate Name <b>Lead Your Nation Now Pac (Lynn Pac)</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 16 / 2015</b>
Mailing Address <b>320 1st St SE</b>		Amount of Each Disbursement this Period <b>10000.00</b> Transaction ID : <b>BA3D4641CC8144319982</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement Transfer: transfer <b>008</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>12000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>12000.00</b>