

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

08 OCT 24 AM 9:54

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 STATE DISTRICT 3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (b) 12-Day PRE- Election Report for the: Primary, General, Runoff, Convention, Special Election on 11/09/2008 in the State of KS (b) 30-Day Post- Election Report for the: General, Runoff, Special Election on 10/15/2008 in the State of

5. Covering Period 10/01/2008 through 10/15/2008

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 A. PARRISH, (RICHARD A. BALL ASSIST. TREAS)

Signature of Treasurer [Signature] Date 10/20/2008

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

28020692737

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

PAT ROBERTS FOR U. S. SENATE, INC.

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

|  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ...  | 200204.25               | 5448956.43                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 1000.00                 | 15710.90                           |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                              | 199204.25               | 5433245.53                         |
| <b>7. Net Operating Expenditures</b>   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 1420384.44              | 5935173.82                         |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....  | 897.60                  | 8648.22                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....  | 1419486.84              | 5926525.60                         |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27) .....</b>                                       | <b>608061.74</b>        |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D) .....</b>  | <b>0.00</b>             |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D) .....</b> | <b>0.00</b>             |                                    |

**For further information contact:**

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

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

28020692738

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

PAT ROBERTS FOR U. S. SENATE, INC.

Report Covering the Period: From:  /  /

To:  /  /

| I. RECEIPTS   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>   |                         |                                    |
| (a) Individuals/Persons Other Than Political Committees   |                         |                                    |
| (i) Itemized (use Schedule A) .....   | 84271.00                |                                    |
| (ii) Unitemized .....   | 38411.25                |                                    |
| (iii) TOTAL of contributions from individuals .....   | 122682.25               | 2879501.52                         |
| (b) Political Party Committees .....  | 2250.00                 | 12689.25                           |
| (c) Other Political Committees (such as PACs) .....   | 75272.00                | 2556765.66                         |
| (d) The Candidate .....   | 0.00                    | 0.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))                      | 200204.25               | 5448956.43                         |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>   | 0.00                    | 542316.79                          |
| <b>13. LOANS:</b>   |                         |                                    |
| (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                               |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                               | 897.60                  | 8648.22                            |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>   | 0.00                    | 139285.33                          |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....</b> | 201101.85               | 6139206.77                         |

28020692739

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES .....  | 1420384.44              | 5935173.82                         |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                   | 0.00                    | 95140.32                           |
| 19. LOAN REPAYMENTS:  |                         |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate .....               | 0.00                    | 0.00                               |
| (b) Of All Other Loans .....  | 0.00                    | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(such as PACs) .....                       | 0.00                    | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:  |                         |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....        | 0.00                    | 7580.00                            |
| (b) Political Party Committees .....                                    | 0.00                    | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                  | 1000.00                 | 8130.90                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)) ..... | 1000.00                 | 15710.90                           |
| 21. OTHER DISBURSEMENTS .....   | 0.00                    | 59535.58                           |
| 22. TOTAL DISBURSEMENTS<br>(add Lines 17, 18, 19(c), 20(d), and 21) ▶   | 1421384.44              | 6105560.62                         |

**III. CASH SUMMARY**

|  |            |
|--|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....                                | 1828344.33 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) .....                            | 201101.85  |
| 25. SUBTOTAL (add Line 23 and Line 24) .....   | 2029446.18 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....                               | 1421384.44 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25) ..... | 608061.74  |

28020692740

**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 1 OF 78

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

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

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Bert, R. E.</b>  |                                    | Date of Receipt<br>10 / 01 / 2008   |
| Mailing Address<br>7373 E. 29th St. N., Apt No W-410  |                                    | Transaction ID: C-1550-03M804   |
| City<br>Wichita   | State<br>KS                        | Zip Code<br>67226   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>100.00  |
| Name of Employer<br>None  | Occupation<br>Retired              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br>750.00 |   |

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Canales, Ricardo</b>   |                                    | Date of Receipt<br>10 / 01 / 2008   |
| Mailing Address<br>334 Lindberg Ave   |                                    | Transaction ID: C-2736-05Ly01   |
| City<br>McAllen   | State<br>TX                        | Zip Code<br>78501   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>500.00  |
| Name of Employer<br>Canales Erasto & Ricardo  | Occupation<br>Physician            | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br>500.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Castrillon, Augusto</b>  |                                     | Date of Receipt<br>10 / 01 / 2008   |
| Mailing Address<br>2805 Santa Esperanza   |                                     | Transaction ID: C-2906-05Lz01   |
| City<br>Mission   | State<br>TX                         | Zip Code<br>78572   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                     | Amount of Each Receipt this Period<br>1000.00   |
| Name of Employer<br>Castrillon Family Clinic  | Occupation<br>Physician             | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br>1000.00 |   |

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

1600.00

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

1600.00

28020692741











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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 74

11a 12     11b 13a     11c 13b     11d 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

Full Name (Last, First, Middle Initial)

**A. Higdon, John Kenneth**

Mailing Address

9007 Salem Drive #1

City

Lenexa

State

KS

Zip Code

66215

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
10 / 03 / 2008

Transaction ID: C-7465-02Y505

Amount of Each Receipt this Period

100.00

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

Full Name (Last, First, Middle Initial)

**B. Joiner, Mary F.**

Mailing Address

2507 Russell Pkwy.

City

Great Bend

State

KS

Zip Code

67530

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY  
10 / 03 / 2008

Transaction ID: C-8410-04x004

Amount of Each Receipt this Period

150.00

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

Full Name (Last, First, Middle Initial)

**C. King, Patricia**

Mailing Address

3035 Menlo St

City

Wichita

State

KS

Zip Code

67211

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-Employed - Tony King & Co

Occupation

Ro Estates

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
10 / 03 / 2008

Transaction ID: C-8928-03Vz04

Amount of Each Receipt this Period

100.00

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

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

350.00

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

7800.00

28020692747



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 74

11a 12  11b 13a  11c 13b  11d 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

Full Name (Last, First, Middle Initial)

**A. Martin, John B.**

Mailing Address  
5422 Foster St.

City State Zip Code  
Overland Park KS 66202

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

Name of Employer Occupation  
Self-Employed Artist

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **750.00**

Date of Receipt

**10 / 03 / 2008**

Transaction ID: C-10371-02iL0B

Amount of Each Receipt this Period

**50.00**

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

Full Name (Last, First, Middle Initial)

**B. McKenna, Frank G.**

Mailing Address  
408 38th St

City State Zip Code  
Newport Beach CA 92663

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

Name of Employer Occupation  
Beecher Carlson Holdings Exec Insurance

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **400.00**

Date of Receipt

**10 / 03 / 2008**

Transaction ID: C-10746-05N001

Amount of Each Receipt this Period

**400.00**

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

Full Name (Last, First, Middle Initial)

**C. Meiergerd, Donald C.**

Mailing Address  
1530 N. Coarch House Rd

City State Zip Code  
Wichita KS 67235

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

Name of Employer Occupation  
None Retired from Cargill Meat Solutions

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **305.00**

Date of Receipt

**10 / 03 / 2008**

Transaction ID: C-10892-02ZW0

Amount of Each Receipt this Period

**50.00**

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

SUBTOTAL of Receipts This Page (optional) **500.00**

TOTAL This Period (last page this line number only) **10950.00**

28020692749

**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 10 OF 74

11a 12  11b 13a  11c 13b  11d 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

Full Name (Last, First, Middle Initial)

**A. Mersereau, Terri S.**

Mailing Address

PO 2727

City

Seaside

State

OR

Zip Code

97138

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

10 / 03 / 2008

Transaction ID: C-10974-04QM0

Amount of Each Receipt this Period

300.00

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

Full Name (Last, First, Middle Initial)

**B. Monroe, Thomas D.**

Mailing Address

10130 Hillgrass Cir

City

Colorado Springs

State

CO

Zip Code

80920

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

10 / 03 / 2008

Transaction ID: C-11315-049P03

Amount of Each Receipt this Period

300.00

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

Full Name (Last, First, Middle Initial)

**C. Moore, Eva**

Mailing Address

2 Jade St

City

Eustis

State

FL

Zip Code

32726

Date of Receipt

10 / 03 / 2008

Transaction ID: C-11357-04MU0

3

750.00

11700.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

28020692750

**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 11 OF 74

11a 12  11b 13a  11c 13b  11d 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

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

**C**

150.00

Name of Employer  
None

Occupation  
Retired

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

270.00

Full Name (Last, First, Middle Initial)

**A. Morris, Joe C.**

Date of Receipt

10 / 03 / 2008

Mailing Address

12448 Granada Drive

Transaction ID: C-11451-01B20

City

Leawood

State

KS

Zip Code

66209

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

**C**

50.00

Name of Employer  
The Capital Corporation

Occupation  
Chairman

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

750.00

Full Name (Last, First, Middle Initial)

**B. Parrish, Robert**

Date of Receipt

10 / 03 / 2008

Mailing Address

1911 McKinney Dr.

Transaction ID: C-12488-00h00E

City

Great Bend

State

KS

Zip Code

67530

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

**C**

1000.00

Name of Employer  
None

Occupation  
Retired

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1825.00

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

1050.00

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

12750.00

28020692751



**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 13 OF 74

11a 12     11b 13a     11c 13b     11d 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**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Robinson, Delbert R.</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 03 / 2008</b>                                      |
| Mailing Address<br><b>801 Alabama St</b>  |   | Transaction ID: <b>C-13769-04Cv05</b>   |
| City<br><b>Lake Arthur</b>  | State<br><b>NM</b>                        | Zip Code<br><b>88253</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>100.00</b>   |
| Name of Employer<br><b>Self Employed</b>  | Occupation<br><b>Sales</b>                | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>310.00</b> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Schirmer, Ellen</b>  |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 03 / 2008</b>                                      |
| Mailing Address<br><b>125 W. 2ND</b>  |   | Transaction ID: <b>C-14362-01i707</b>   |
| City<br><b>Holton</b>   | State<br><b>KS</b>                        | Zip Code<br><b>66436</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>50.00</b>  |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>263.00</b> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Schnacke, Donald P.</b>  |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 03 / 2008</b>                                      |
| Mailing Address<br><b>1445 SW Westover Rd.</b>  |   | Transaction ID: <b>C-14424-02Ga0</b>  |
| City<br><b>Topeka</b>   | State<br><b>KS</b>                        | Zip Code<br><b>66604</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>300.00</b>   |
| Name of Employer<br><b>Self-Employed</b>  | Occupation<br><b>Attorney</b>             | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>450.00</b> |   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>450.00</b>   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>14250.00</b> |

28020692753

**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 14 OF 74

11a 12     11b 13a     11c 13b     11d 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

Full Name (Last, First, Middle Initial)  
**A. Sherman, Russell**

Mailing Address  
6590 Delbarton St  
City                      State                      Zip Code  
San Diego                      CA                      92120

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

Name of Employer                      Occupation  
**Best Efforts**                      **Best Efforts**

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
235.00

Date of Receipt  
10 / 03 / 2008

Transaction ID: C-14835-04PS0

Amount of Each Receipt this Period  
150.00

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

Full Name (Last, First, Middle Initial)  
**B. Spare, Randall**

Mailing Address  
PO Box 888  
City                      State                      Zip Code  
Ashland                      KS                      67831

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

Name of Employer                      Occupation  
**Ashland Vet Clinic**                      **DVM**

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
10 / 03 / 2008

Transaction ID: C-15365-04I602

Amount of Each Receipt this Period  
450.00

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

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

Mailing Address  
#9 Log Cabin Drive  
City                      State                      Zip Code  
St. Louis                      MO                      63124

Date of Receipt  
10 / 03 / 2008

Transaction ID: C-15437-01Kw0  
3

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

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

700.00  
14950.00

28020692754

**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 12  11b 13a  11c 13b  11d 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

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

100.00

Name of Employer  
Self-Employed

Occupation  
Homemaker

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1100.00

Full Name (Last, First, Middle Initial)

A. Thornhill, Margot

Date of Receipt

10 / 03 / 2008

Mailing Address

5510 Falmouth Rd

Transaction ID: C-16366-04PG0

City

Fairway

State

KS

Zip Code

66205

Amount of Each Receipt this Period

300.00

FEC ID number of contributing federal political committee.

C

Name of Employer  
None

Occupation  
Retired

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

400.00

Full Name (Last, First, Middle Initial)

B. Todd, Duane M.

Date of Receipt

10 / 03 / 2008

Mailing Address

211 S 3rd St

Transaction ID: C-16433-04D502

City

Seneca

State

KS

Zip Code

66538

Amount of Each Receipt this Period

200.00

FEC ID number of contributing federal political committee.

C

Name of Employer  
None

Occupation  
Retired

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

450.00

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

500.00

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

15450.00

28020692755



**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 17 OF 74

11a 12     11b 13a     11c 13b     11d 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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Anderson, Betty</b>  |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 06 / 2008</b>                                     |
| Mailing Address<br><b>90 Old Creek Rd</b>   |   | Transaction ID: <b>C-441-05QL01</b>  |
| City<br><b>Palos Park</b>   | State<br><b>IL</b>                        | Zip Code<br><b>60464</b>   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>250.00</b>  |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1 |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>250.00</b> |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Baumgartner Jr., John H.</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 06 / 2008</b>                                     |
| Mailing Address<br><b>2886 Highland Ave</b>   |   | Transaction ID: <b>C-1231-048R06</b>   |
| City<br><b>Broomall</b>   | State<br><b>PA</b>                        | Zip Code<br><b>19008</b>   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>100.00</b>  |
| Name of Employer<br><b>Self Employed</b>  | Occupation<br><b>Mechanic</b>             | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1 |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>700.00</b> |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Bingham, Larry</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 06 / 2008</b>                                     |
| Mailing Address<br><b>2847 Gaineswood Ave</b>   |   | Transaction ID: <b>C-1645-05H102</b>   |
| City<br><b>Baxter Springs</b>   | State<br><b>KS</b>                        | Zip Code<br><b>66713</b>   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>500.00</b>  |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1 |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>750.00</b> |  |

|   |                 |
|---|-----------------|
| SUBTOTAL of Receipts This Page (optional) .....           | <b>850.00</b>   |
| TOTAL This Period (last page this line number only) ..... | <b>18075.00</b> |

28020692757



**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 19 OF 74

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Kernan Jr., James S.</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 06 / 2008</b>                                     |
| Mailing Address<br><b>273 Clinton St</b>  |   | Transaction ID: <b>C-8816-03wQ03</b>   |
| City<br><b>Whitesboro</b>   | State<br><b>NY</b>                        | Zip Code<br><b>13492</b>   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>150.00</b>  |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1 |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>500.00</b> |  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. McCall Jr., Peter L.</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 06 / 2008</b>                                      |
| Mailing Address<br><b>3316 Society Hill Rd</b>  |   | Transaction ID: <b>C-10560-048K02</b>   |
| City<br><b>Society Hill</b>   | State<br><b>SC</b>                        | Zip Code<br><b>29593</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>100.00</b>   |
| Name of Employer<br><b>Best Efforts</b>   | Occupation<br><b>Best Efforts</b>         | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>250.00</b> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mullins, Jack A.</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 06 / 2008</b>                                      |
| Mailing Address<br><b>224 Ridgewood Dr.</b>   |   | Transaction ID: <b>C-11582-03rm03</b>   |
| City<br><b>Victoria</b>   | State<br><b>TX</b>                        | Zip Code<br><b>77901</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>100.00</b>   |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>300.00</b> |   |

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

**350.00**

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

**18800.00**

28020692759







**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 23 OF 74

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

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Illian, Dan R.</b>   |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 07 / 2008   |
| Mailing Address<br>5510 SW Tawakoni Rd  |                                    | Transaction ID: C-8025-04Q105   |
| City<br>Andover   | State<br>KS                        | Zip Code<br>67002   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>50.00   |
| Name of Employer<br>Best Efforts  | Occupation<br>Best Efforts         | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br>250.00 |   |

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Jacobsen, Bruce</b>  |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 07 / 2008   |
| Mailing Address<br>1019 Walloon Ct  |                                    | Transaction ID: C-8167-046y03   |
| City<br>Lake Orion  | State<br>MI                        | Zip Code<br>48360   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>25.00   |
| Name of Employer<br>Jacobsen's Flower Inc.  | Occupation<br>Florist              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br>250.00 |   |

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Kensinger, Clyde</b>   |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 07 / 2008   |
| Mailing Address<br>3130 SW 31st Ct  |                                    | Transaction ID: C-8801-05No01   |
| City<br>Topeka  | State<br>KS                        | Zip Code<br>66614   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>500.00  |
| Name of Employer<br>Core First Bank & Trust   | Occupation<br>Banker               | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br>500.00 |   |

SUBTOTAL of Receipts This Page (optional) ..... 575.00

TOTAL This Period (last page this line number only) ..... 21560.00

28020692763



**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 12  11b 13a  11c 13b  11d 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

Full Name (Last, First, Middle Initial)

**A. Newell, Carrol**

Mailing Address  
322 S.E. 100th Ave.

City State Zip Code  
Stafford KS 67578

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

Name of Employer Occupation  
Self Employed Housekeeper

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **335.00**

Date of Receipt

**10** / **07** / **2008**

Transaction ID: C-11933-00f904

Amount of Each Receipt this Period

**150.00**

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

Full Name (Last, First, Middle Initial)

**B. Olmon, L. B.**

Mailing Address  
1300 NE 16th Ave., Apt. 605

City State Zip Code  
Portland OR 97232

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **400.00**

Date of Receipt

**10** / **07** / **2008**

Transaction ID: C-12228-04y102

Amount of Each Receipt this Period

**300.00**

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

Full Name (Last, First, Middle Initial)

**C. Pearson, Matthew M.**

Mailing Address  
327 Woodlands Center - Box 15

City State Zip Code  
Harrison NY 10528

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

Name of Employer Occupation  
Herrin Foods Attorney at Law

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **1000.00**

Date of Receipt

**10** / **07** / **2008**

Transaction ID: C-12571-05Nr01

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) .....

**1450.00**

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

**23245.00**

28020692765



**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 27 OF 74

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

Amount of Each Receipt this Period

FEC ID number of contributing  
federal political committee.

C

500.00

Name of Employer  
Best Efforts

Occupation  
Best Efforts

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

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

Full Name (Last, First, Middle Initial)

A. Sacchi, Albert

Date of Receipt

10 / 07 / 2008

Mailing Address

760 S Maple Ave

Transaction ID: C-14136-03ph03

City

Montebello

State

CA

Zip Code

90640

Amount of Each Receipt this Period

FEC ID number of contributing  
federal political committee.

C

100.00

Name of Employer  
Best Efforts

Occupation  
Best Efforts

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

300.00

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

Full Name (Last, First, Middle Initial)

B. Straus, Leo

Date of Receipt

10 / 07 / 2008

Mailing Address

302 Estate Ln

Transaction ID: C-15813-03rF07

City

Brookville

State

OH

Zip Code

45309

Amount of Each Receipt this Period

FEC ID number of contributing  
federal political committee.

C

40.00

Name of Employer  
None

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

340.00

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

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

140.00

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

28485.00

28020692767









**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 32 OF 74

11a 12     11b 13a     11c 13b     11d 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

Full Name (Last, First, Middle Initial)

**A. Mershon, James C.**

Mailing Address

7617 Donegal Ln

City

Wichita

State

KS

Zip Code

67206

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
10 / 08 / 2008

Transaction ID: C-10979-03Hk04

Amount of Each Receipt this Period

100.00

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

Full Name (Last, First, Middle Initial)

**B. Meyerhoff, Harvey M.**

Mailing Address

25 S. Charles Street, Ste 2100

City

Baltimore

State

MD

Zip Code

21201

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
10 / 08 / 2008

Transaction ID: C-11039-03Pa02

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)

Full Name (Last, First, Middle Initial)

**C. Miller, Martin**

Mailing Address

780 Armyllis Ave

City

Oradell

State

NJ

Zip Code

07649

FEC ID number of contributing federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
10 / 08 / 2008

Transaction ID: C-11137-03uT04

Amount of Each Receipt this Period

100.00

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

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

1200.00

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

31855.00

28020692772





**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 35 OF 74

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

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

500.00

Name of Employer  
Westar Energy

Occupation  
Sr VP

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

A. Straus, Leo

Date of Receipt

10 / 08 / 2008

Mailing Address

302 Estate Ln

Transaction ID: C-15812-03rF06

City

Brookville

State

OH

Zip Code

45309

Amount of Each Receipt this Period

40.00

FEC ID number of contributing federal political committee.

C

Name of Employer  
None

Occupation  
Retired

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

340.00

Full Name (Last, First, Middle Initial)

B. Walker, Donna M. E.

Date of Receipt

10 / 08 / 2008

Mailing Address

PO Box 581

Transaction ID: C-17009-020y08

City

Johnson

State

KS

Zip Code

67855

Amount of Each Receipt this Period

100.00

FEC ID number of contributing federal political committee.

C

Name of Employer  
None

Occupation  
Semi Retired Farmer

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

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

35145.00

28020692775



**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 37 OF 74

11a 12     11b 13a     11c 13b     11d 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**

Full Name (Last, First, Middle Initial)

**A. Covell, Betty V.**

Mailing Address

15707 Bradford Dr.

City

Laurel

State

MD

Zip Code

20707

FEC ID number of contributing  
federal political committee.

[Empty]

Name of Employer

US Govt-Navy Dept

Occupation

Retired

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

[Empty] 250.00

Date of Receipt

MM / DD / YYYY  
10 / 09 / 2008

Transaction ID: C-3676-04ir02

Amount of Each Receipt this Period

[Empty] 100.00

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

Full Name (Last, First, Middle Initial)

**B. Desilva, Peter J.**

Mailing Address

1234 W. 58th St.

City

Kansas City

State

MO

Zip Code

64113

FEC ID number of contributing  
federal political committee.

[Empty]

Name of Employer

UMB Financial Corp

Occupation

President & Chief Operating Officer

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

[Empty] 2000.00

Date of Receipt

MM / DD / YYYY  
10 / 09 / 2008

Transaction ID: C-4349-03Gv02

Amount of Each Receipt this Period

[Empty] 1000.00

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

Full Name (Last, First, Middle Initial)

**C. Dimiceli, Gloria**

Mailing Address

12 Westgate Dr.

City

Sayville

State

NY

Zip Code

11782

FEC ID number of contributing  
federal political committee.

[Empty]

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

[Empty] 215.00

Date of Receipt

MM / DD / YYYY  
10 / 09 / 2008

Transaction ID: C-4469-04C505

Amount of Each Receipt this Period

[Empty] 35.00

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

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

[Empty] 1135.00

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

[Empty] 36805.00

28020692777



**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 39 OF 74

11a 12     11b 13a     11c 13b     11d 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**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Jones, Jim</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 09 / 2008</b>                                      |
| Mailing Address<br><b>2401 Spring Garden St</b>   |   | Transaction ID: <b>C-8460-03de09</b>  |
| City<br><b>Leavenworth</b>  | State<br><b>KS</b>                        | Zip Code<br><b>66048</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>25.00</b>  |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>240.00</b> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Keane, John R.</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 09 / 2008</b>                                      |
| Mailing Address<br><b>33 Ellsworth Ave</b>  |   | Transaction ID: <b>C-8708-03pa08</b>  |
| City<br><b>Staten Island</b>  | State<br><b>NY</b>                        | Zip Code<br><b>10312</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>75.00</b>  |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>              | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>500.00</b> |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Oswalt, Ellen H.</b>   |  | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 09 / 2008</b>                                      |
| Mailing Address<br><b>1010 N 2nd St</b>   |  | Transaction ID: <b>C-12313-03cq0A</b>   |
| City<br><b>Garden City</b>  | State<br><b>KS</b>                         | Zip Code<br><b>67846</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>50.00</b>  |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>               | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>1050.00</b> |   |

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

**150.00**

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

**37330.00**

2802069279











**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 45 OF 74

11a 12    11b 13a    11c 13b    11d 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

Full Name (Last, First, Middle Initial)

**A. Daehnke, Sigurd S.**

Mailing Address

3 N. Berwick Ct

City

Winfield

State

KS

Zip Code

67156

FEC ID number of contributing federal political committee.

C

Name of Employer  
Westside Clinic

Occupation  
Physician

Receipt For:

Primary    General  
 Other (specify): ▼

Election Cycle-to-Date ▼

330.00

Date of Receipt

MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: C-3980-01fL08

Amount of Each Receipt this Period

50.00

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

Full Name (Last, First, Middle Initial)

**B. Ebert, James E.**

Mailing Address

5680 N. K-99 Hwy

City

Wamego

State

KS

Zip Code

66547

FEC ID number of contributing federal political committee.

C

Name of Employer  
Reed Co - Ebert Const.

Occupation  
Equipment Sales

Receipt For:

Primary    General  
 Other (specify): ▼

Election Cycle-to-Date ▼

538.00

Date of Receipt

MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: C-4835-01jJ0C

Amount of Each Receipt this Period

50.00

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

Full Name (Last, First, Middle Initial)

**C. Engel, William R.**

Mailing Address

7059 Couburn Ln

City

Johnston

State

IA

Zip Code

50131

FEC ID number of contributing federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

Primary    General  
 Other (specify): ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: C-5031-04Dh03

Amount of Each Receipt this Period

200.00

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

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

300.00

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

39190.00

28020592785



**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 47 OF 74

11a 12     11b 13a     11c 13b     11d 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

Full Name (Last, First, Middle Initial)

**A. Hess, Marie D.**

Mailing Address  
74 Humphrey Dr.

City                      State                      Zip Code  
Syosset                      NY                      11791

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

Name of Employer                      Occupation  
**Best Efforts**                      **Best Efforts**

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
[ ]                      260.00

Date of Receipt

M/M / D/D / Y-Y-Y-Y  
10 / 10 / 2008

Transaction ID: C-7409-04C405

Amount of Each Receipt this Period

[ ]                      100.00

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

Full Name (Last, First, Middle Initial)

**B. Jones, Larry**

Mailing Address  
PO Box 230

City                      State                      Zip Code  
Holcomb                      KS

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

Name of Employer                      Occupation  
**Self Employed**                      **Rancher**

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
[ ]                      500.00

Date of Receipt

M/M / D/D / Y-Y-Y-Y  
10 / 10 / 2008

Transaction ID: C-8473-03H501

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)

Full Name (Last, First, Middle Initial)

**C. Kershaw, Charles**

Mailing Address  
5 Haise Way

City                      State                      Zip Code  
Merrimack                      NH                      03054

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

Name of Employer                      Occupation  
**None**                      **Retired**

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
[ ]                      375.00

Date of Receipt

M/M / D/D / Y-Y-Y-Y  
10 / 10 / 2008

Transaction ID: C-8836-03qj07

Amount of Each Receipt this Period

[ ]                      100.00

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

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

[ ]                      700.00

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

[ ]                      41040.00

28020692787







**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 51 OF 74

11a 12  11b 13a  11c 13b  11d 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

Full Name (Last, First, Middle Initial)

**A. Talkington, Robert V.**

Mailing Address

20 W. Buchanan, PO Box 715

City

Iola

State

KS

Zip Code

66749

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Talkington Law Office

Occupation

Attorney

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: C-16037-01Tz0B

Amount of Each Receipt this Period

100.00

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

Full Name (Last, First, Middle Initial)

**B. Taylor, J.**

Mailing Address

6800 S Granite Ave, Apt 245

City

Tulsa

State

OK

Zip Code

74136

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: C-16097-04S602

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)

Full Name (Last, First, Middle Initial)

**C. Ueltschi, A. L.**

Mailing Address

City

Flushing

State

NY

Zip Code

11371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Marine Air Terminal

Occupation

Flight Safety Internatl Chairman

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: C-16663-05OZ0

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) .....

1600.00

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

45365.00

28020692791









**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 56 OF 74

11a 12     11b 13a     11c 13b     11d 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**

Full Name (Last, First, Middle Initial)

**A. Comanich, George**

Mailing Address  
5104 Tamarach Dr.

City                      State                      Zip Code  
Baytown                      TX                      77521

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

Name of Employer                      Occupation  
None                      Retired

Receipt For:                      Election Cycle-to-Date ▼  
 Primary     General                      [ ] 1500.00  
 Other (specify): ▼

Date of Receipt

/  /

Transaction ID: C-3429-04h104

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)

Full Name (Last, First, Middle Initial)

**B. Defamco L. P.**

Mailing Address  
4901 Wornall Ste 10

City                      State                      Zip Code  
Kansas City                      MO                      64112

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

Name of Employer                      Occupation  
Partnership

Receipt For:                      Election Cycle-to-Date ▼  
 Primary     General                      [ ] 1500.00  
 Other (specify): ▼

Date of Receipt

/  /

Transaction ID: C-4258-03GI02

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)

Full Name (Last, First, Middle Initial)

**C. Devinki, Sam**

Mailing Address  
4901 Wornall Ste 10

City                      State                      Zip Code  
Kansas City                      MO                      64112

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

Name of Employer                      Occupation  
Defamco LP                      Partner - Real Estate Co

Receipt For:                      Election Cycle-to-Date ▼  
 Primary     General                      [ ] 1500.00  
 Other (specify): ▼

Date of Receipt

/  /

Transaction ID: C-4370-03GJ02

Amount of Each Receipt this Period

[ ] 1000.00

**MEMO**

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

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

[ ] 1500.00

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

[ ] 51825.00

28020692796





**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 59 OF 74

11a 12     11b 13a     11c 13b     11d 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

Full Name (Last, First, Middle Initial)

**A. Hower, Cynthia**

Mailing Address  
17352 222ND Rd.

City                      State                      Zip Code  
Holton                      KS                      66436

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

Name of Employer                      Occupation  
Kellerman Insurance                      President Insurance & Real Estate Age

Receipt For:  
 Primary     General  
 Other (specify): ▼                      Election Cycle-to-Date ▼  
[ ]                      250.00

Date of Receipt

M /  D /  Y  
10 / 14 / 2008

Transaction ID: C-7827-02PN04

Amount of Each Receipt this Period

[ ]                      50.00

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

Full Name (Last, First, Middle Initial)

**B. Humphrey, Mark**

Mailing Address  
P. O. Box 2256

City                      State                      Zip Code  
Wichita                      KS                      67201

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

Name of Employer                      Occupation  
Koch Industries, Inc.                      Senior VP, Tax

Receipt For:  
 Primary     General  
 Other (specify): ▼                      Election Cycle-to-Date ▼  
[ ]                      3300.00

Date of Receipt

M /  D /  Y  
10 / 14 / 2008

Transaction ID: C-7926-03N402

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)

Full Name (Last, First, Middle Initial)

**C. Isenberg, John D.**

Mailing Address  
4400 W. 87th Terr

City                      State                      Zip Code  
Prairie Village                      KS                      66207

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

Name of Employer                      Occupation  
Western Extralite Co.                      President

Receipt For:  
 Primary     General  
 Other (specify): ▼                      Election Cycle-to-Date ▼  
[ ]                      2500.00

Date of Receipt

M /  D /  Y  
10 / 14 / 2008

Transaction ID: C-8103-038X02

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) .....▶

[ ]                      3350.00

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

[ ]                      57175.00

28020692799





**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 62 OF 74

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

Full Name (Last, First, Middle Initial)  
**A. Maupin, Robert B.**

Mailing Address  
5614 SW Hawick Ln  
City: Topeka State: KS Zip Code: 66614

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

Name of Employer: None Occupation: Retired

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 2500.00

Date of Receipt: 10 / 14 / 2008  
Transaction ID: C-10491-01WK0

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)

Full Name (Last, First, Middle Initial)  
**B. McSpadden, Steve A.**

Mailing Address  
2815 E. 19th Ave.  
City: Winfield State: KS Zip Code: 67156

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

Name of Employer: Union State Bank Occupation: Banker

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 450.00

Date of Receipt: 10 / 14 / 2008  
Transaction ID: C-10839-01h004

Amount of Each Receipt this Period: 100.00

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

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

Mailing Address  
2 Westboro Pl  
City: Topeka State: KS Zip Code: 66604

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

Name of Employer: None Occupation: Retired

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 1400.00

Date of Receipt: 10 / 14 / 2008  
Transaction ID: C-11634-03EL04

Amount of Each Receipt this Period: 150.00

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

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

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

750.00

60125.00

28020692802

















**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: 71 OF 74

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

Full Name (Last, First, Middle Initial)  
**A. Lerner, Michael**

Mailing Address  
6501 W. 106TH St.  
City Overland Park State KS Zip Code 66212

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

Name of Employer **King Louie America** Occupation **Executive**

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **4600.00**

Date of Receipt: 10 / 15 / 2008  
Transaction ID: C-9752-038a04  
Amount of Each Receipt this Period: 600.00

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

Full Name (Last, First, Middle Initial)  
**B. McCall Jr., Peter L.**

Mailing Address  
3316 Society Hill Rd  
City Society Hill State SC Zip Code 29593

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

Name of Employer **Best Efforts** Occupation **Best Efforts**

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **250.00**

Date of Receipt: 10 / 15 / 2008  
Transaction ID: C-10561-048K03  
Amount of Each Receipt this Period: 50.00

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

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

Mailing Address  
13553 Kensington Pl  
City Carmel State IN Zip Code 46032

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

Name of Employer **None** Occupation **Retired**

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **305.00**

Date of Receipt: 10 / 15 / 2008  
Transaction ID: C-11130-03r108  
Amount of Each Receipt this Period: 50.00

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

SUBTOTAL of Receipts This Page (optional) ..... **700.00**

TOTAL This Period (last page this line number only) ..... **79476.00**

28020692811







**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 75 OF 74

11a 12     11b 13a     11c 13b     11d 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

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Skapin, Elizabeth M.</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 15 / 2008</b>                                      |
| Mailing Address<br><b>4445 W 215th St</b>   |   | Transaction ID: <b>C-15021-03oA0</b>  |
| City<br><b>Fairview Park</b>  | State<br><b>OH</b>                        | Zip Code<br><b>44126</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>20.00</b>  |
| Name of Employer<br><b>Best Efforts</b>   | Occupation<br><b>Best Efforts</b>         | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>245.00</b> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Stauffer, Franklin</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 15 / 2008</b>                                      |
| Mailing Address<br><b>620 E Arch St</b>   |   | Transaction ID: <b>C-15552-04sZ04</b>   |
| City<br><b>Palmyra</b>  | State<br><b>PA</b>                        | Zip Code<br><b>17078</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>50.00</b>  |
| Name of Employer<br><b>Best Efforts</b>   | Occupation<br><b>Best Efforts</b>         | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>275.00</b> |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Sunderland, Robert</b>   |  | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 15 / 2008</b>                                      |
| Mailing Address<br><b>953 Pyrite Ave</b>  |  | Transaction ID: <b>C-15902-03rq08</b>   |
| City<br><b>Henderson</b>  | State<br><b>NV</b>                         | Zip Code<br><b>89011</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>100.00</b>   |
| Name of Employer<br><b>None</b>   | Occupation<br><b>Retired</b>               | <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ | Election Cycle-to-Date ▼<br><b>1750.00</b> |   |

|   |                 |
|---|-----------------|
| SUBTOTAL of Receipts This Page (optional) .....           | <b>170.00</b>   |
| TOTAL This Period (last page this line number only) ..... | <b>84246.00</b> |

28020692815

**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 76 OF 76

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

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

Full Name (Last, First, Middle Initial)

A. Zimmerman, John Max

Mailing Address

4607 Spyglass Drive

City

Hutchinson

State

KS

Zip Code

67502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
10 / 15 / 2008

Transaction ID: C-18138-01tn09

Amount of Each Receipt this Period

25.00

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

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

25.00

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

84271.00

28020692816

**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 1 OF 2

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

Full Name (Last, First, Middle Initial)

**A. Geary County Republican Women**

Mailing Address

6003 W. Hwy K-18

City

Junction City

State

KS

Zip Code

66441

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M /  D /  Y  
10 / 10 / 2008

Transaction ID: C-6019-027z02

Amount of Each Receipt this Period

50.00

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

Full Name (Last, First, Middle Initial)

**B. RNC Member Senate Fund**

Mailing Address

2870 Dobie Rd

City

Mason

State

MI

Zip Code

48854

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M /  D /  Y  
10 / 10 / 2008

Transaction ID: C-13202-050i01

Amount of Each Receipt this Period

2000.00

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

Full Name (Last, First, Middle Initial)

**C. Rice County Republican**

Mailing Address

Central Committee, PO Box 287

City

Lyons

State

KS

Zip Code

67554

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M /  D /  Y  
10 / 10 / 2008

Transaction ID: C-13570-050Y0

Amount of Each Receipt this Period

100.00

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

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

2150.00

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

2150.00

28020692817

**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 2 OF 2

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

Full Name (Last, First, Middle Initial)

**A. Russell County Republican Central Comm**

Mailing Address

Mr. E. W. Berry, 18966 Michaelis Rd.

City

State

Zip Code

Russell

KS

67665

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  
 Other (specify): ▼

General

Election Cycle-to-Date ▼

100.00

Date of Receipt

MM / DD / YYYY  
10 / 10 / 2008

Transaction ID: C-14079-027x03

Amount of Each Receipt this Period

100.00

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

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

100.00

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

2250.00

28020692818





**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 3 OF 11

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

Full Name (Last, First, Middle Initial)

**A. Ohio's 17 Star PAC**

Mailing Address

P.O. Box 340917

City

Columbus

State

OH

Zip Code

43234

FEC ID number of contributing  
federal political committee.

**C** 00364737

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

10 / 07 / 2008

Transaction ID: C-12197-05Np01

Amount of Each Receipt this Period

3000.00

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

Full Name (Last, First, Middle Initial)

**B. Wyeth Good Government Fund**

Mailing Address

Five Giralda Farms

City

Madison

State

NJ

Zip Code

07940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

6500.00

Date of Receipt

10 / 07 / 2008

Transaction ID: C-17986-038G0

Amount of Each Receipt this Period

2000.00

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

Full Name (Last, First, Middle Initial)

**C. American Bakers Association PAC**

Mailing Address

1300 I Street, NW, Suite 700 West

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

10 / 08 / 2008

Transaction ID: C-334-03Zi03

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) .....▶

6000.00

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

19500.00

28020692821



**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 11

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

Full Name (Last, First, Middle Initial)

**A. International Council of Shopping Centers**

Mailing Address

(ICSC-PAC), 1399 New York Ave. NW

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

MM / DD / YYYY  
10 / 08 / 2008

Transaction ID: C-8060-03XR05

Amount of Each Receipt this Period

3000.00

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

Full Name (Last, First, Middle Initial)

**B. International Council of Shopping Centers**

Mailing Address

(ICSC-PAC), 1399 New York Ave. NW

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

MM / DD / YYYY  
10 / 08 / 2008

Transaction ID: C-8061-03XR06

Amount of Each Receipt this Period

2000.00

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

Full Name (Last, First, Middle Initial)

**C. Westar Energy Employees**

Mailing Address

Fed Pac Govt Afair Dept, P. O. Box 889

City State Zip Code  
Topeka KS 66601

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

MM / DD / YYYY  
10 / 08 / 2008

Transaction ID: C-17379-034Y02

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)

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

5500.00

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

27172.00

28020692823

**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 11

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

Full Name (Last, First, Middle Initial)

**A. Kansas Republican Veterans Club**

Mailing Address

900 S.W. 31st St, Apt. 124

City

State

Zip Code

Topeka

KS

66611

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

10 /  10 /  2008

Transaction ID: C-8624-02Eh03

Amount of Each Receipt this Period

100.00

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

Full Name (Last, First, Middle Initial)

**B. Moran for Kansas**

Mailing Address

P.O. Box 541

City

State

Zip Code

Belleville

KS

66935

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

10 /  10 /  2008

Transaction ID: C-11396-05Oh0

Amount of Each Receipt this Period

2000.00

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

Full Name (Last, First, Middle Initial)

**C. National Beer Wholesalers Assn NBWA PAC**

Mailing Address

1101 King Street, Suite 600

City

State

Zip Code

Alexandria

VA

22314

FEC ID number of contributing federal political committee.

**C** 00144766

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

10 /  10 /  2008

Transaction ID: C-11750-00280B

Amount of Each Receipt this Period

5000.00

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

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

7100.00

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

34272.00

28020692824

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 11

|                              |                              |   |                              |
|------------------------------|------------------------------|---|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b            | <input type="checkbox"/> 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)

PAT ROBERTS FOR U. S. SENATE, INC.

C00128876

Full Name (Last, First, Middle Initial)

**A. A. O. T. P. A. C.**

Mailing Address

American Occupational Therapy Asso, 4720 Montgomery Lane

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing federal political committee.

**C** 00089086

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

10 / 14 / 2008

Transaction ID: C-322-01Ep04

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)

Full Name (Last, First, Middle Initial)

**B. American Association Of Clinical**

Mailing Address

Urologists - American Urological A, ( Uropac )

City

Schaumburg

State

IL

Zip Code

60173

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

10 / 14 / 2008

Transaction ID: C-330-03TL02

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)

Full Name (Last, First, Middle Initial)

**C. American Crystal Sugar Company PAC**

Mailing Address

101 North Third Street

City

Moorhead

State

MN

Zip Code

56560

FEC ID number of contributing federal political committee.

**C** 00110338

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

10 / 14 / 2008

Transaction ID: C-358-000E0G

Amount of Each Receipt this Period

5000.00

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

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

42772.00

28020692825

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 11

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

Full Name (Last, First, Middle Initial)

**A. Hawker Beechcraft Inc. P. A. C.**

Mailing Address  
(HB PAC), P. O. Box 85

City State Zip Code  
Wichita KS 67201

FEC ID number of contributing federal political committee. **C** 00434183

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

10 / 14 / 2008

Transaction ID: C-7137-03MX06

Amount of Each Receipt this Period

4000.00

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

Full Name (Last, First, Middle Initial)

**B. Investment Company Institute (ICI PAC)**

Mailing Address  
Political Action Committee, 1401 H. Street NW Suite 1200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** 00105981

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
8500.00

Date of Receipt

10 / 14 / 2008

Transaction ID: C-8071-02Q00B

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)

Full Name (Last, First, Middle Initial)

**C. Leo A Daly Company PAC**

Mailing Address  
8600 Indian Hills Drive

City State Zip Code  
Omaha NE 68114

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

10 / 14 / 2008

Transaction ID: C-9739-05Pj01

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) .....▶

6000.00

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

48772.00

28020692826

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

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

Full Name (Last, First, Middle Initial)

**A. Marriott International Inc. P. A. C.**

Mailing Address

Dept 52-904, Marriott Drive

City State Zip Code  
Marriott Corp DC 20058

FEC ID number of contributing federal political committee. **C** 00284810

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

MM / DD / YYYY  
10 / 14 / 2008

Transaction ID: C-10305-028202

Amount of Each Receipt this Period

2000.00

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

Full Name (Last, First, Middle Initial)

**B. Merck Employees P. A. C.**

Mailing Address

Merck Pac, 601 Pennsylvania Avenue NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** 00097485

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

MM / DD / YYYY  
10 / 14 / 2008

Transaction ID: C-10936-037403

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)

Full Name (Last, First, Middle Initial)

**C. National Assn Of Insurance & Financial Adv**

Mailing Address

Naifa, 2901 Telestar Court

City State Zip Code  
Falls Church VA 22042

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

MM / DD / YYYY  
10 / 14 / 2008

Transaction ID: C-11744-02qu05

Amount of Each Receipt this Period

5000.00

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

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

8000.00

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

56772.00

28020692827



**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)

|                              |                              |   |                              |
|------------------------------|------------------------------|---|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b            | <input type="checkbox"/> 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) **PAT ROBERTS FOR U. S. SENATE, INC.** C00128876

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

Mailing Address  
5550 Meadowbrook Ct.  
City: Rolling Meadows State: IL Zip Code: 60008

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **5000.00**

Date of Receipt: 10 / 15 / 2008  
Transaction ID: C-11911-05SI01  
Amount of Each Receipt this Period: **5000.00**

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

Full Name (Last, First, Middle Initial)  
**B. Schwan PAC**

Mailing Address  
115 W College Dr  
City: Marshall State: MN Zip Code: 56258

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **3000.00**

Date of Receipt: 10 / 15 / 2008  
Transaction ID: C-14546-05So01  
Amount of Each Receipt this Period: **3000.00**

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

Full Name (Last, First, Middle Initial)  
**C. Squire Sanders & Dempsey LLP PAC**

Mailing Address  
1201 Pennsylvanis Avenue NW  
City: Washington State: DC Zip Code: 20004

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: 10 / 15 / 2008  
Transaction ID: C-15470-05Sm0  
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) **10500.00**

**TOTAL** This Period (last page this line number only) **75272.00**

28020692829

**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 1 OF 1

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

Full Name (Last, First, Middle Initial)

**A. Capitol Plaza Hotel**

Mailing Address

1717 SW Topeka Blvd

City

Topeka

State

KS

Zip Code

66612

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

897.60

Date of Receipt

MM / DD / YYYY  
10 / 14 / 2008

Transaction ID: C-2754-02FI01

Amount of Each Receipt this Period

897.60

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

**Refund**

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

897.60

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

897.60

28020692830

**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)

17 20a     18 20b     19a 20c     21

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Connell Donatelli, Inc.</b> |   | Transaction ID: D1202-05Cb01   |
| Mailing Address<br>PO Box 1877   |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 01 / 2008   |
| City<br>Alexandria   | State<br>VA   | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px; text-align: right;">28533.45</div> |
| Zip Code<br>22313  |   |  |
| Purpose of Disbursement<br>Advertising                                       |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53                           |
| Candidate Name   |   |  |
| Office Sought:   | Disbursement For:   | Category/<br>Type  |
| State:                      District:  | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Towns, Leroy</b> |   | Transaction ID: D4146-011i1m  |
| Mailing Address<br>102 Barnhill Place                             |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 01 / 2008  |
| City<br>Chapel Hill   | State<br>NC   | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px; text-align: right;">1700.00</div> |
| Zip Code<br>27514   |   |   |
| Purpose of Disbursement<br>Oct-Fundrsng Consulting                |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53                          |
| Candidate Name  |   |   |
| Office Sought:  | Disbursement For:   | Category/<br>Type   |
| State:                      District:                             | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Wilson Grand Communications Inc.</b> |   | Transaction ID: D4529-01Ej1T  |
| Mailing Address<br>429 N. Saint Asaph Street  |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 01 / 2008  |
| City<br>Alexandria  | State<br>VA   | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px; text-align: right;">272711.97</div> |
| Zip Code<br>22314   |   |   |
| Purpose of Disbursement<br>Ads-Media buys   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53                            |
| Candidate Name  |   |   |
| Office Sought:  | Disbursement For:   | Category/<br>Type   |
| State:                      District:   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |   |

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

302945.42

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

302945.42

28020692831

**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 2 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address  
PO Box 6463

City                      State                      Zip Code  
Carol Stream                      IL                      60197

Purpose of Disbursement  
Telephone Expense

Candidate Name

Office Sought:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D168-03HZ0T  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 02 / 2008

Amount of Each Disbursement this Period

88.65

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Cox Communications,**

Mailing Address  
P. O. Box 22142

City                      State                      Zip Code  
Tulsa                      OK                      74121

Purpose of Disbursement  
Communication Expense

Candidate Name

Office Sought:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D1285-03IG0F  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 02 / 2008

Amount of Each Disbursement this Period

236.25

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Linweld**

Mailing Address  
P. O. Box 1858

City                      State                      Zip Code  
Topeka                      KS                      66601

Purpose of Disbursement  
Advertising-Helium/Ballns

Candidate Name

Office Sought:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D2344-01NQ0k  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 02 / 2008

Amount of Each Disbursement this Period

32.56

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Category/  
Type

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

357.46

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

303302.88

28020692832

**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 3 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. Dan Moses**

Mailing Address  
2900 Oriole Dr.

City                      State                      Zip Code  
Wichita                      KS                      67204

Purpose of Disbursement  
Office Space Rent

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D2633-05M001  
Date of Disbursement

M/M / D/D / Y-Y-Y-Y  
10 / 02 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Roberts, Franki**

Mailing Address  
2203 White Oakes Drive

City                      State                      Zip Code  
Alexandria                      VA                      22306

Purpose of Disbursement  
Reimb-Mtg Meal Exp

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D3416-01Em11  
Date of Disbursement

M/M / D/D / Y-Y-Y-Y  
10 / 02 / 2008

Amount of Each Disbursement this Period

30.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address  
P. O. Box 660108

City                      State                      Zip Code  
Dallas                      TX                      75266

Purpose of Disbursement  
Telephone Expense

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D4363-02Mn1U  
Date of Disbursement

M/M / D/D / Y-Y-Y-Y  
10 / 02 / 2008

Amount of Each Disbursement this Period

258.76

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

1288.76

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

304591.64

28020692833

**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)

17 20a     18 20b     19a 20c     21

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

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Adams, Elizabeth</b> |   | Transaction ID: D185-04aa09  |  |
| Mailing Address<br>7709 E. Foster                                     |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 03 / 2008   |  |
| City<br>Wichita   | State<br>KS   | Zip Code<br>67206  | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px; text-align: right;">233.42</div> |
| Purpose of Disbursement<br>Reimb-Mileage                              |   | Category/<br>Type  |  |
| Candidate Name  |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |  |
| Office Sought:  | Disbursement For:   |  |  |
| State:                      District:                                 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Casey, Matthew A.</b> |   | Transaction ID: D889-04AC0G  |  |
| Mailing Address<br>915 Fremont St                                      |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 03 / 2008   |  |
| City<br>Manhattan  | State<br>KS   | Zip Code<br>66502  | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px; text-align: right;">268.52</div> |
| Purpose of Disbursement<br>Mileage Reimbursement                       |   | Category/<br>Type  |  |
| Candidate Name   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |  |
| Office Sought:   | Disbursement For:   |  |  |
| State:                      District:                                  | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Collins, Heather D.</b> |   | Transaction ID: D1190-04JN0E   |  |
| Mailing Address<br>10801 W 48th Street                                   |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 03 / 2008   |  |
| City<br>Shawnee  | State<br>KS   | Zip Code<br>66203  | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px; text-align: right;">133.38</div> |
| Purpose of Disbursement<br>Mileage Reimbursement                         |   | Category/<br>Type  |  |
| Candidate Name   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |  |
| Office Sought:   | Disbursement For:   |  |  |
| State:                      District:                                    | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |

|   |           |
|---|-----------|
| SUBTOTAL of Disbursements This Page (optional) .....      | 635.32    |
| TOTAL This Period (last page this line number only) ..... | 305226.96 |

28020692834

**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 5 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. Couture-Lovelady, Travis L.**

Mailing Address  
10644 W 115th St

City                      State                      Zip Code  
Overland Park                      KS                      66210

Purpose of Disbursement  
Reimb-Mileage

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1251-04AL0J  
Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2008

Amount of Each Disbursement this Period

613.67

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Cox, Nathan D.**

Mailing Address  
4205 Vicksburg St

City                      State                      Zip Code  
Hutchinson                      KS                      67502

Purpose of Disbursement  
Reimb- Mileage

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1268-04AJ0F  
Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2008

Amount of Each Disbursement this Period

69.03

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Embroidery Plus**

Mailing Address  
1010 N. Kansas Ave

City                      State                      Zip Code  
Topeka                      KS                      66608

Purpose of Disbursement  
Bumper Stickers

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1417-03Vk07  
Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2008

Amount of Each Disbursement this Period

1080.95

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

1763.65

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

306990.61

28020692835

**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 6 OF 33

17 20a     18 20b     19a 20c     21

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

|   |   |                     |   |  |  |               |               |                     |
|---|---|---------------------|---|--|--|---------------|---------------|---------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Jayhawk Tower Partners LLC</b> |   |                     | Transaction ID: D2007-03nM06<br>Date of Disbursement  |  |  |               |               |                     |
| Mailing Address<br>700 SW Jackson, Suite 200                                    |   |                     | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align:center;">M D M<br/>10 /</td> <td style="width:33%; text-align:center;">D D D<br/>03 /</td> <td style="width:33%; text-align:center;">Y Y Y Y Y Y<br/>2008</td> </tr> </table> |  |  | M D M<br>10 / | D D D<br>03 / | Y Y Y Y Y Y<br>2008 |
| M D M<br>10 /   | D D D<br>03 /   | Y Y Y Y Y Y<br>2008 |   |  |  |               |               |                     |
| City<br>Topeka  |   | State<br>KS         | Zip Code<br>66603   |  |  |               |               |                     |
| Purpose of Disbursement<br>Parking Fees   |   |                     | Amount of Each Disbursement this Period<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align:right;">42.00</td> </tr> </table>   |  |  | 42.00         |               |                     |
| 42.00   |   |                     |   |  |  |               |               |                     |
| Candidate Name  |   |                     |   |  |  |               |               |                     |
| Office Sought:  | Disbursement For:   |                     | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |  |  |               |               |                     |
| State:                      District:   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |                     |   |  |  |               |               |                     |

|  |   |                     |   |  |  |               |               |                     |
|--|---|---------------------|---|--|--|---------------|---------------|---------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Kohl, Heath</b> |   |                     | Transaction ID: D2248-04AF01<br>Date of Disbursement  |  |  |               |               |                     |
| Mailing Address<br>12131 S. Rene St                              |   |                     | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align:center;">M D M<br/>10 /</td> <td style="width:33%; text-align:center;">D D D<br/>03 /</td> <td style="width:33%; text-align:center;">Y Y Y Y Y Y<br/>2008</td> </tr> </table> |  |  | M D M<br>10 / | D D D<br>03 / | Y Y Y Y Y Y<br>2008 |
| M D M<br>10 /  | D D D<br>03 /   | Y Y Y Y Y Y<br>2008 |   |  |  |               |               |                     |
| City<br>Olathe   |   | State<br>KS         | Zip Code<br>66062   |  |  |               |               |                     |
| Purpose of Disbursement<br>Reimb-Mileage                         |   |                     | Amount of Each Disbursement this Period<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align:right;">865.22</td> </tr> </table>  |  |  | 865.22        |               |                     |
| 865.22   |   |                     |   |  |  |               |               |                     |
| Candidate Name   |   |                     |   |  |  |               |               |                     |
| Office Sought:   | Disbursement For:   |                     | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |  |  |               |               |                     |
| State:                      District:                            | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |                     |   |  |  |               |               |                     |

|   |   |                     |   |  |  |               |               |                     |
|---|---|---------------------|---|--|--|---------------|---------------|---------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Niemann, Ginger R.</b> |   |                     | Transaction ID: D2749-053Y04<br>Date of Disbursement  |  |  |               |               |                     |
| Mailing Address<br>796 Greeley Rd                                       |   |                     | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align:center;">M D M<br/>10 /</td> <td style="width:33%; text-align:center;">D D D<br/>03 /</td> <td style="width:33%; text-align:center;">Y Y Y Y Y Y<br/>2008</td> </tr> </table> |  |  | M D M<br>10 / | D D D<br>03 / | Y Y Y Y Y Y<br>2008 |
| M D M<br>10 /   | D D D<br>03 /   | Y Y Y Y Y Y<br>2008 |   |  |  |               |               |                     |
| City<br>Nortonville   |   | State<br>KS         | Zip Code<br>66060   |  |  |               |               |                     |
| Purpose of Disbursement<br>Reimb-Mileage                                |   |                     | Amount of Each Disbursement this Period<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align:right;">196.26</td> </tr> </table>  |  |  | 196.26        |               |                     |
| 196.26  |   |                     |   |  |  |               |               |                     |
| Candidate Name  |   |                     |   |  |  |               |               |                     |
| Office Sought:  | Disbursement For:   |                     | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |  |  |               |               |                     |
| State:                      District:                                   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |                     |   |  |  |               |               |                     |

|   |  |           |
|---|--|-----------|
| SUBTOTAL of Disbursements This Page (optional) .....      | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align:right;">1103.48</td> </tr> </table>   | 1103.48   |
| 1103.48   |  |           |
| TOTAL This Period (last page this line number only) ..... | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align:right;">308094.09</td> </tr> </table> | 308094.09 |
| 308094.09   |  |           |

28020692836

**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 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. Pro Print Incorporated**

Mailing Address  
2028 S. W. Gage Boulevard

City                                      State                                      Zip Code  
Topeka                                      KS                                      66604

Purpose of Disbursement  
Printing Expense

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D3187-01SE12  
Date of Disbursement

M/M / D/D / Y-Y-Y-Y  
10 / 03 / 2008

Amount of Each Disbursement this Period

1118.56

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Wilson Grand Communications Inc.**

Mailing Address  
429 N. Saint Asaph Street

City                                      State                                      Zip Code  
Alexandria                                      VA                                      22314

Purpose of Disbursement  
Broadcast TV, Cable-Ads

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D4530-01Ej1U  
Date of Disbursement

M/M / D/D / Y-Y-Y-Y  
10 / 03 / 2008

Amount of Each Disbursement this Period

835096.85

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Wolfe's Camera Shops Inc.**

Mailing Address  
635 Kansas Ave., P. O. Box 1437

City                                      State                                      Zip Code  
Topeka                                      KS                                      66601

Purpose of Disbursement  
Photography Expense

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D4631-02EM0s  
Date of Disbursement

M/M / D/D / Y-Y-Y-Y  
10 / 03 / 2008

Amount of Each Disbursement this Period

20.33

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

836235.74

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

1144329.83

28020692837

**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 33

17 20a     18 20b     19a 20c     21

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

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Adams, Elizabeth</b> |  | Transaction ID: D184-04aa08<br>Date of Disbursement<br>MM / DD / YYYY<br>10 / 07 / 2008                |                   |
| Mailing Address<br>7709 E. Foster                                     |  | Amount of Each Disbursement this Period<br>447.54  |                   |
| City<br>Wichita   | State<br>KS  | Zip Code<br>67206  | Category/<br>Type |
| Purpose of Disbursement<br>Salary                                     |  |  |                   |
| Candidate Name  |  |  |                   |
| Office Sought:  | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |                   |
| State:  | District:  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |                   |

|  |  |  |                   |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Casey, Matthew A.</b> |  | Transaction ID: D888-04AC0F<br>Date of Disbursement<br>MM / DD / YYYY<br>10 / 07 / 2008                |                   |
| Mailing Address<br>915 Fremont St                                      |  | Amount of Each Disbursement this Period<br>815.70  |                   |
| City<br>Manhattan  | State<br>KS  | Zip Code<br>66502  | Category/<br>Type |
| Purpose of Disbursement<br>Salary                                      |  |  |                   |
| Candidate Name   |  |  |                   |
| Office Sought:   | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |                   |
| State:   | District:  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |                   |

|  |  |  |                   |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Chaney, Chelsea</b> |  | Transaction ID: D958-04AD0D<br>Date of Disbursement<br>MM / DD / YYYY<br>10 / 07 / 2008                |                   |
| Mailing Address<br>P.O. Box 65                                       |  | Amount of Each Disbursement this Period<br>729.47  |                   |
| City<br>Independence   | State<br>KS  | Zip Code<br>67301  | Category/<br>Type |
| Purpose of Disbursement<br>Salary                                    |  |  |                   |
| Candidate Name   |  |  |                   |
| Office Sought:   | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |                   |
| State:   | District:  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |                   |

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

1992.71

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

1146322.54

28020692838

**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 33

17 20a     18 20b     19a 20c     21

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

|   |                                   |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|---|-----------------------------------|---|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------|-----------|---------|---------|------------------|---|--|------|--|--|---|--|--|--|--|--|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Collins, Heather D.</b>  |                                   | Transaction ID: D1189-04JN0D<br>Date of Disbursement: <table border="1" style="display: inline-table; margin-left: 20px;"> <tr><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td></tr> <tr><td>10</td><td></td><td></td><td>07</td><td></td><td></td><td>2008</td><td></td><td></td><td></td></tr> </table> | M                        | M                                   | /                        | D                        | D                        | /                        | Y                        | Y                        | Y                        | Y      | 10        |         |         | 07               |   |  | 2008 |  |  |   |  |  |  |  |  |  |  |  |  |
| M   | M                                 | /   | D                        | D                                   | /                        | Y                        | Y                        | Y                        | Y                        |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| 10  |                                   |   | 07                       |                                     |                          | 2008                     |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Mailing Address<br>10801 W 48th Street  |                                   | Amount of Each Disbursement this Period<br><table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"> </td><td>571.35</td></tr> </table>   |                          | 571.35                              |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|   | 571.35                            |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| City                                      State                                      Zip Code<br>Shawnee                                      KS                                      66203   | Purpose of Disbursement<br>Salary |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Candidate Name<br>_____   |                                   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Office Sought:                      Disbursement For:<br><table style="width: 100%;"> <tr> <td style="width: 20px;"><input type="checkbox"/></td> <td style="width: 20px;"><input type="checkbox"/></td> <td style="width: 20px;"><input checked="" type="checkbox"/></td> <td style="width: 20px;"><input type="checkbox"/></td> </tr> <tr> <td>State:</td> <td>District:</td> <td>Primary</td> <td>General</td> <td>Other (specify):</td> <td colspan="5">▼</td> </tr> </table> | <input type="checkbox"/>          |   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | State: | District: | Primary | General | Other (specify): | ▼ |  |      |  |  | Category/<br>Type<br><table border="1" style="width: 100%; text-align: center;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/>  | <input type="checkbox"/>          | <input checked="" type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| State:  | District:                         | Primary   | General                  | Other (specify):                    | ▼                        |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|   |                                   |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |

|   |                                   |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|---|-----------------------------------|---|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------|-----------|---------|---------|------------------|---|--|------|--|--|---|--|--|--|--|--|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Connell, John P.</b>   |                                   | Transaction ID: D1201-04q804<br>Date of Disbursement: <table border="1" style="display: inline-table; margin-left: 20px;"> <tr><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td></tr> <tr><td>10</td><td></td><td></td><td>07</td><td></td><td></td><td>2008</td><td></td><td></td><td></td></tr> </table> | M                        | M                                   | /                        | D                        | D                        | /                        | Y                        | Y                        | Y                        | Y      | 10        |         |         | 07               |   |  | 2008 |  |  |   |  |  |  |  |  |  |  |  |  |
| M   | M                                 | /   | D                        | D                                   | /                        | Y                        | Y                        | Y                        | Y                        |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| 10  |                                   |   | 07                       |                                     |                          | 2008                     |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Mailing Address<br>7223 SW 25th St.   |                                   | Amount of Each Disbursement this Period<br><table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"> </td><td>1169.80</td></tr> </table>  |                          | 1169.80                             |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|   | 1169.80                           |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| City                                      State                                      Zip Code<br>Topeka                                      KS                                      66614  | Purpose of Disbursement<br>Salary |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Candidate Name<br>_____   |                                   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Office Sought:                      Disbursement For:<br><table style="width: 100%;"> <tr> <td style="width: 20px;"><input type="checkbox"/></td> <td style="width: 20px;"><input type="checkbox"/></td> <td style="width: 20px;"><input checked="" type="checkbox"/></td> <td style="width: 20px;"><input type="checkbox"/></td> </tr> <tr> <td>State:</td> <td>District:</td> <td>Primary</td> <td>General</td> <td>Other (specify):</td> <td colspan="5">▼</td> </tr> </table> | <input type="checkbox"/>          |   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | State: | District: | Primary | General | Other (specify): | ▼ |  |      |  |  | Category/<br>Type<br><table border="1" style="width: 100%; text-align: center;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/>  | <input type="checkbox"/>          | <input checked="" type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| State:  | District:                         | Primary   | General                  | Other (specify):                    | ▼                        |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|   |                                   |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |

|   |                                   |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|---|-----------------------------------|---|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------|-----------|---------|---------|------------------|---|--|------|--|--|---|--|--|--|--|--|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Couture-Lovelady, Travis L.</b>  |                                   | Transaction ID: D1250-04AL01<br>Date of Disbursement: <table border="1" style="display: inline-table; margin-left: 20px;"> <tr><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td></tr> <tr><td>10</td><td></td><td></td><td>07</td><td></td><td></td><td>2008</td><td></td><td></td><td></td></tr> </table> | M                        | M                                   | /                        | D                        | D                        | /                        | Y                        | Y                        | Y                        | Y      | 10        |         |         | 07               |   |  | 2008 |  |  |   |  |  |  |  |  |  |  |  |  |
| M   | M                                 | /   | D                        | D                                   | /                        | Y                        | Y                        | Y                        | Y                        |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| 10  |                                   |   | 07                       |                                     |                          | 2008                     |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Mailing Address<br>10644 W 115th St   |                                   | Amount of Each Disbursement this Period<br><table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"> </td><td>755.47</td></tr> </table>   |                          | 755.47                              |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|   | 755.47                            |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| City                                      State                                      Zip Code<br>Overland Park                                      KS                                      66210   | Purpose of Disbursement<br>Salary |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Candidate Name<br>_____   |                                   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| Office Sought:                      Disbursement For:<br><table style="width: 100%;"> <tr> <td style="width: 20px;"><input type="checkbox"/></td> <td style="width: 20px;"><input type="checkbox"/></td> <td style="width: 20px;"><input checked="" type="checkbox"/></td> <td style="width: 20px;"><input type="checkbox"/></td> </tr> <tr> <td>State:</td> <td>District:</td> <td>Primary</td> <td>General</td> <td>Other (specify):</td> <td colspan="5">▼</td> </tr> </table> | <input type="checkbox"/>          |   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | State: | District: | Primary | General | Other (specify): | ▼ |  |      |  |  | Category/<br>Type<br><table border="1" style="width: 100%; text-align: center;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/>  | <input type="checkbox"/>          | <input checked="" type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
| State:  | District:                         | Primary   | General                  | Other (specify):                    | ▼                        |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |
|   |                                   |   |                          |                                     |                          |                          |                          |                          |                          |                          |                          |        |           |         |         |                  |   |  |      |  |  |   |  |  |  |  |  |  |  |  |  |

|   |  |  |            |
|---|--|--|------------|
| SUBTOTAL of Disbursements This Page (optional) .....      | <table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"> </td><td>2496.62</td></tr> </table>    |  | 2496.62    |
|   | 2496.62  |  |            |
| TOTAL This Period (last page this line number only) ..... | <table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"> </td><td>1148819.16</td></tr> </table> |  | 1148819.16 |
|   | 1148819.16   |  |            |

28020692839

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. Cox, Nathan D.**

Mailing Address  
4205 Vicksburg St

City                      State                      Zip Code  
Hutchinson                      KS                      67502

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1267-04AJ0E  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 07 / 2008

Amount of Each Disbursement this Period

729.47

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Farinola, David A.**

Mailing Address  
12203 Texas St

City                      State                      Zip Code  
Wichita                      KS                      67235

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1491-04JU07  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 07 / 2008

Amount of Each Disbursement this Period

586.35

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Haase, Molly J.**

Mailing Address  
1000 New Jersey Ave SE, #528

City                      State                      Zip Code  
Washington                      DC                      20003

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1741-04AK0C  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 07 / 2008

Amount of Each Disbursement this Period

2330.78

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

3646.60

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

1152465.76

28020692840



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 33

17 20a     18 20b     19a 20c     21

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

|   |   |
|---|---|
| <p><b>A. Mank, Rebecca P.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Mailing Address<br/>8806 W. 76 Terrace</p> <p>City    State    Zip Code<br/>Overland Park    KS    66204</p> <p>Purpose of Disbursement<br/>Salary</p> <p>Candidate Name</p> <p>Office Sought:    <input type="checkbox"/>    <input type="checkbox"/>    <input type="checkbox"/></p> <p>State:    District:</p> <p>Disbursement For:<br/><input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify): ▼</p>                               | <p>Transaction ID: D2384-03nQ0J<br/>Date of Disbursement<br/>MM / DD / YYYY<br/>10 / 07 / 2008</p> <p>Amount of Each Disbursement this Period<br/>1602.53</p> <p><input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53</p> |
| <p><b>B. McKellar Group Inc.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Mailing Address<br/>523 Grand Boulevard, Suite 1D</p> <p>City    State    Zip Code<br/>Kansas City    MO    64106</p> <p>Purpose of Disbursement<br/>Fundrsng Consulting-Sept</p> <p>Candidate Name</p> <p>Office Sought:    <input type="checkbox"/>    <input type="checkbox"/>    <input type="checkbox"/></p> <p>State:    District:</p> <p>Disbursement For:<br/><input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify): ▼</p> | <p>Transaction ID: D2466-036v0N<br/>Date of Disbursement<br/>MM / DD / YYYY<br/>10 / 07 / 2008</p> <p>Amount of Each Disbursement this Period<br/>4000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53</p> |
| <p><b>C. McManus, Ashley J.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Mailing Address<br/>1832 SW Lincoln</p> <p>City    State    Zip Code<br/>Topeka    KS    66604</p> <p>Purpose of Disbursement<br/>Salary</p> <p>Candidate Name</p> <p>Office Sought:    <input type="checkbox"/>    <input type="checkbox"/>    <input type="checkbox"/></p> <p>State:    District:</p> <p>Disbursement For:<br/><input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify): ▼</p>                                       | <p>Transaction ID: D2526-038R0y<br/>Date of Disbursement<br/>MM / DD / YYYY<br/>10 / 07 / 2008</p> <p>Amount of Each Disbursement this Period<br/>1592.15</p> <p><input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53</p> |

|   |            |
|---|------------|
| SUBTOTAL of Disbursements This Page (optional) .....      | 7194.68    |
| TOTAL This Period (last page this line number only) ..... | 1249259.93 |

28020692842

**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 13 OF 33

17 20a     18 20b     19a 20c     21

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

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Niemann, Ginger R.</b> |   | Transaction ID: D2748-053Y03<br>Date of Disbursement: <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2008"/> |  |
| Mailing Address<br>796 Greeley Rd                                       |   | Amount of Each Disbursement this Period<br><input type="text" value="545.35"/>  |  |
| City<br>Nortonville   | State<br>KS   |   |  |
| Purpose of Disbursement<br>Salary                                       |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |  |
| Candidate Name  |   |   |  |
| Office Sought:  | Disbursement For:   |   |  |
| State:      District:   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |   |  |

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Raby, Dallas J.</b> |   | Transaction ID: D3283-05Cr02<br>Date of Disbursement: <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2008"/> |  |
| Mailing Address<br>9940 El Monte St                                  |   | Amount of Each Disbursement this Period<br><input type="text" value="426.24"/>  |  |
| City<br>Overland Park  | State<br>KS   |   |  |
| Purpose of Disbursement<br>Salary                                    |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |  |
| Candidate Name   |   |   |  |
| Office Sought:   | Disbursement For:   |   |  |
| State:      District:  | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Reid, Caleb T.</b> |   | Transaction ID: D3330-04JM0B<br>Date of Disbursement: <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2008"/> |  |
| Mailing Address<br>4520 SE 101st Street                             |   | Amount of Each Disbursement this Period<br><input type="text" value="639.35"/>  |  |
| City<br>Berryton  | State<br>KS   |   |  |
| Purpose of Disbursement<br>Salary                                   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53  |  |
| Candidate Name  |   |   |  |
| Office Sought:  | Disbursement For:   |   |  |
| State:      District:   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |   |  |

|   |   |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) .....      | <input type="text" value="1610.94"/>    |
| TOTAL This Period (last page this line number only) ..... | <input type="text" value="1250870.87"/> |

28020692843

**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 14 OF 33

17 20a     18 20b     19a 20c     21

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

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Rowden, Mary E.</b> |  | Transaction ID: D3537-032u1H   |  |
| Mailing Address<br>3137 SW Randolph Ave., Apt 207                    |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 07 / 2008   |  |
| City<br>Topeka   | State<br>KS  | Zip Code<br>66611  | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px;">1349.92</div> |
| Purpose of Disbursement<br>Salary                                    |  | Category/<br>Type<br><div style="border: 1px solid black; padding: 2px;"></div>                        |  |
| Candidate Name   |  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |  |
| Office Sought:<br>State:                      District:              | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |

|  |  |  |   |
|--|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Stacy, J. Patrick</b> |  | Transaction ID: D3834-04JO07   |   |
| Mailing Address<br>1301 West Campus Rd                                 |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 07 / 2008   |   |
| City<br>Lawrence   | State<br>KS  | Zip Code<br>66044  | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px;">123.88</div> |
| Purpose of Disbursement<br>Salary                                      |  | Category/<br>Type<br><div style="border: 1px solid black; padding: 2px;"></div>                        |   |
| Candidate Name   |  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |   |
| Office Sought:<br>State:                      District:                | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |   |

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Wilson Grand Communications Inc.</b> |  | Transaction ID: D4531-01Ej1V   |   |
| Mailing Address<br>429 N. Saint Asaph Street  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 07 / 2008   |   |
| City<br>Alexandria  | State<br>VA  | Zip Code<br>22314  | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 2px;">25376.40</div> |
| Purpose of Disbursement<br>Broadcasting-Radio   |  | Category/<br>Type<br><div style="border: 1px solid black; padding: 2px;"></div>                        |   |
| Candidate Name  |  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |   |
| Office Sought:<br>State:                      District:                               | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |   |

|   |  |
|---|--|
| SUBTOTAL of Disbursements This Page (optional) .....      | <div style="border: 1px solid black; padding: 2px;">26850.20</div>   |
| TOTAL This Period (last page this line number only) ..... | <div style="border: 1px solid black; padding: 2px;">1277721.07</div> |

28020692844

**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 15 OF 33

17 /  18 /  19a /  21  
20a / 20b / 20c

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

Full Name (Last, First, Middle Initial)

**A. Adams, Elizabeth**

Mailing Address  
7709 E. Foster

City State Zip Code  
Wichita KS 67206

Purpose of Disbursement  
Reimb-Mileage

Candidate Name

Office Sought:

State: District:

Disbursement For:

Primary  General  
 Other (specify): ▼

Transaction ID: D186-04aa0A  
Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2008

Amount of Each Disbursement this Period

155.61

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Christian Press**

Mailing Address  
504 N. Main, P.O. Box 492

City State Zip Code  
Newton KS 67114

Purpose of Disbursement  
1/2 page ads

Candidate Name

Office Sought:

State: District:

Disbursement For:

Primary  General  
 Other (specify): ▼

Transaction ID: D978-04v002  
Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2008

Amount of Each Disbursement this Period

785.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Conservative Victory Fund**

Mailing Address  
1101pennsylvania Ave. SE Ste 201

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
\* In-Kind->Creating/Faxing announcem

Candidate Name

Office Sought:

State: District:

Disbursement For:

Primary  General  
 Other (specify): ▼

Transaction ID: D1207-028405  
Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2008

Amount of Each Disbursement this Period

422.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Category/  
Type

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

1362.61

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

1279083.68

28020692845



**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 17 OF 33

17  
20a     18  
20b     19a  
20c     21

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

Full Name (Last, First, Middle Initial)

**A. Highwood Capital, LLC**

Mailing Address  
915 E Street, NW, #613

City                      State                      Zip Code  
Washington                      DC                      20004

Purpose of Disbursement  
Oct Fundrng Consultng

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D1813-03YI0D  
Date of Disbursement

M M / D D / Y Y Y Y  
10 / 08 / 2008

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Internal Revenue Service**

Mailing Address

City                      State                      Zip Code  
Ogden                      UT                      84201

Purpose of Disbursement  
941 Payroll Tax Deposit

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D1982-02MM13  
Date of Disbursement

M M / D D / Y Y Y Y  
10 / 08 / 2008

Amount of Each Disbursement this Period

530.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Jake's**

Mailing Address  
2311A West 4th

City                      State                      Zip Code  
Pittsburg                      KS                      66762

Purpose of Disbursement  
Tent Rental-Event

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D1999-05Na01  
Date of Disbursement

M M / D D / Y Y Y Y  
10 / 08 / 2008

Amount of Each Disbursement this Period

210.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

5740.00

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

1290837.75

28020692847

**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 18 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. 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

3rd Qtr '08 Unemplmt Txx

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary

General

Other (specify): ▼

State:

District:

Transaction ID: D2105-01KS0C

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2008

Amount of Each Disbursement this Period

2723.57

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Kansas Withholding Tax**

Mailing Address

Kansas Dept Of Revenue, 915 SW Harrison Street

City

Topeka

State

KS

Zip Code

66625

Purpose of Disbursement

3rd Qtr St WH Taxes

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary

General

Other (specify): ▼

State:

District:

Transaction ID: D2188-01KR0D

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2008

Amount of Each Disbursement this Period

5431.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Matrix**

Mailing Address

P. O. Box 742501

City

Cincinnati

State

OH

Zip Code

45274

Purpose of Disbursement

Comm-Teleconferencing

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary

General

Other (specify): ▼

State:

District:

Transaction ID: D2421-03JX0B

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2008

Amount of Each Disbursement this Period

139.70

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

8294.27

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

1299132.02

28020692848

**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 19 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. New Media Communications**

Mailing Address  
3046 Brecksville Road

City                                      State                                      Zip Code  
Richfield                                      OH                                      44286

Purpose of Disbursement  
Hosting Web Site -Oct '08

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D2731-031R0m  
Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 08 / 2008

Amount of Each Disbursement this Period

160.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Pacific Fundraising Group**

Mailing Address  
Attn:Nicole Zamora, 2208 29th Street

City                                      State                                      Zip Code  
Sacramento                                      CA                                      95817

Purpose of Disbursement  
Fundrsng Consulting

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D2876-03mW05  
Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 08 / 2008

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Panter, Jarrod T.**

Mailing Address  
11624 Caenen Street

City                                      State                                      Zip Code  
Overland Park                                      KS                                      66210

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:                      State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D2881-05NZ01  
Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 08 / 2008

Amount of Each Disbursement this Period

1544.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

2204.00

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

1301336.02

28020692849

**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 20 OF 33

17  
20a     18  
20b     19a  
20c     21

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

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Pro Print Incorporated</b>  |             | Transaction ID: D3188-01SE13   |
| Mailing Address<br>2028 S. W. Gage Boulevard   |             | Date of Disbursement<br>MM / DD / YYYY<br>10 / 08 / 2008   |
| City<br>Topeka   | State<br>KS | Zip Code<br>66604  |
| Purpose of Disbursement<br>Printing Expense  |             | Amount of Each Disbursement this Period<br>3547.47   |
| Candidate Name   |             | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |             |  |
| State:   | District:   | Category/Type  |

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Reid, Caleb T.</b>  |             | Transaction ID: D3331-04JMOC   |
| Mailing Address<br>4520 SE 101st Street  |             | Date of Disbursement<br>MM / DD / YYYY<br>10 / 08 / 2008   |
| City<br>Berryton   | State<br>KS | Zip Code<br>66409  |
| Purpose of Disbursement<br>Reimb-Mileage   |             | Amount of Each Disbursement this Period<br>64.35   |
| Candidate Name   |             | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |             |  |
| State:   | District:   | Category/Type  |

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Rowden, Mary E.</b>   |             | Transaction ID: D3538-032u11   |
| Mailing Address<br>3137 SW Randolph Ave., Apt 207  |             | Date of Disbursement<br>MM / DD / YYYY<br>10 / 08 / 2008   |
| City<br>Topeka   | State<br>KS | Zip Code<br>66611  |
| Purpose of Disbursement<br>Reimb-Mileage   |             | Amount of Each Disbursement this Period<br>180.18  |
| Candidate Name   |             | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |             |  |
| State:   | District:   | Category/Type  |

|   |            |
|---|------------|
| SUBTOTAL of Disbursements This Page (optional) .....      | 3792.00    |
| TOTAL This Period (last page this line number only) ..... | 1305128.02 |

28020692850

**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 21 OF 33

17 20a     18 20b     19a 20c     21

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Rowden, Mary E.</b> |  | Transaction ID: D3539-032u1J   |
| Mailing Address<br>3137 SW Randolph Ave., Apt 207                    |  | Date of Disbursement<br>MM/DD/YYYY <input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2008"/> |
| City<br>Topeka   | State<br>KS  | Zip Code<br>66611  |
| Purpose of Disbursement<br>Petty Cash Fund                           |  | Amount of Each Disbursement this Period<br><input type="text" value="600.00"/>   |
| Candidate Name   |  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53                                   |
| Office Sought:   | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |
| State:   | District:  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Shawnee Mission Ford Inc.</b> |  | Transaction ID: D3698-032Y0C   |
| Mailing Address<br>11501 Shawnee Mission Parkway, P. O. Box 3179               |  | Date of Disbursement<br>MM/DD/YYYY <input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2008"/> |
| City<br>Shawnee  | State<br>KS  | Zip Code<br>66203  |
| Purpose of Disbursement<br>Car Rental  |  | Amount of Each Disbursement this Period<br><input type="text" value="344.39"/>   |
| Candidate Name   |  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53                                   |
| Office Sought:   | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |
| State:   | District:  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. The Hart Agency Inc.</b> |  | Transaction ID: D3965-02Ns07   |
| Mailing Address<br>Suite 168, 4350 Shawnee Mission Pkwy                   |  | Date of Disbursement<br>MM/DD/YYYY <input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2008"/> |
| City<br>Shawnee Mission   | State<br>KS  | Zip Code<br>66205  |
| Purpose of Disbursement<br>Advertising-Yard Signs                         |  | Amount of Each Disbursement this Period<br><input type="text" value="4719.67"/>  |
| Candidate Name  |  | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53                                   |
| Office Sought:  | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |
| State:  | District:  |  |

|   |   |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) .....      | <input type="text" value="5664.06"/>    |
| TOTAL This Period (last page this line number only) ..... | <input type="text" value="1310792.08"/> |

28020692851





**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 24 OF 33

17  
20a     18  
20b     19a  
20c     21

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

Full Name (Last, First, Middle Initial)

**A. Public Opinion Strategies L. L. C.**

Mailing Address

214 North Fayette Street

City

Alexandria

State

VA

Zip Code

22314

Purpose of Disbursement

Statewide Survey-500 Vtrs

Candidate Name

Category/  
Type

Office Sought:

State:   
District:

Disbursement For:

Primary     General  
 Other (specify): ▼

Transaction ID: D3198-01GT0L

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 09 / 2008

Amount of Each Disbursement this Period

18000.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Wilson Grand Communications Inc.**

Mailing Address

429 N. Saint Asaph Street

City

Alexandria

State

VA

Zip Code

22314

Purpose of Disbursement

Radio Ads

Candidate Name

Category/  
Type

Office Sought:

State:   
District:

Disbursement For:

Primary     General  
 Other (specify): ▼

Transaction ID: D4533-01Ej1X

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 09 / 2008

Amount of Each Disbursement this Period

14273.75

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. 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:

Primary     General  
 Other (specify): ▼

Transaction ID: D138-04RI05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 10 / 2008

Amount of Each Disbursement this Period

154.19

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

32427.94

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

1379976.74

28020692854

**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)

17 20a     18 20b     19a 20c     21

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

|   |   |  |   |
|---|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Cole Hargrave Snodgrass &amp; Associates</b> |   | Transaction ID: <b>D1175-02WU02</b>  |   |
| Mailing Address<br><b>201 Robert S. Kerr, Suite 301</b>                                       |   | Date of Disbursement<br>MM / DD / YYYY<br><b>10 / 10 / 2008</b>  |   |
| City<br><b>Oklahoma City</b>  | State<br><b>OK</b>  | Zip Code<br><b>73102</b>   | Amount of Each Disbursement this Period<br><b>7200.00</b> |
| Purpose of Disbursement<br><b>Polling-KS Survey</b>   |   | Category/<br>Type  |   |
| Candidate Name  |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |   |
| Office Sought:  | Disbursement For:   |  |   |
| State:      District:   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |   |

|  |   |  |   |
|--|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Haase, Molly J.</b> |   | Transaction ID: <b>D1742-04AK0D</b>  |   |
| Mailing Address<br><b>1000 New Jersey Ave SE, #528</b>               |   | Date of Disbursement<br>MM / DD / YYYY<br><b>10 / 10 / 2008</b>  |   |
| City<br><b>Washington</b>  | State<br><b>DC</b>  | Zip Code<br><b>20003</b>   | Amount of Each Disbursement this Period<br><b>67.86</b> |
| Purpose of Disbursement<br><b>Reimb-Mileage</b>                      |   | Category/<br>Type  |   |
| Candidate Name   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |   |
| Office Sought:   | Disbursement For:   |  |   |
| State:      District:  | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |   |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Niemann, Ginger R.</b> |   | Transaction ID: <b>D2750-053Y05</b>  |  |
| Mailing Address<br><b>796 Greeley Rd</b>                                |   | Date of Disbursement<br>MM / DD / YYYY<br><b>10 / 10 / 2008</b>  |  |
| City<br><b>Nortonville</b>  | State<br><b>KS</b>  | Zip Code<br><b>66060</b>   | Amount of Each Disbursement this Period<br><b>204.63</b> |
| Purpose of Disbursement<br><b>Reimb-Mileage</b>                         |   | Category/<br>Type  |  |
| Candidate Name  |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |  |
| Office Sought:  | Disbursement For:   |  |  |
| State:      District:   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |

|   |                   |
|---|-------------------|
| SUBTOTAL of Disbursements This Page (optional) .....      | <b>7472.49</b>    |
| TOTAL This Period (last page this line number only) ..... | <b>1387449.23</b> |

28020692855





**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)

|   |                                    |                                     |                             |
|---|------------------------------------|-------------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 21 |
|---|------------------------------------|-------------------------------------|-----------------------------|

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AT&amp;T Mobility</b> |   | Transaction ID: D457-03IF0V<br>Date of Disbursement  |
| Mailing Address<br>P. O. Box 650553                                    |   | <input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y<br>10 / 14 / 2008 |
| City<br>Dallas   | State<br>TX   | Zip Code<br>75265  |
| Purpose of Disbursement<br>Telephone Expense                           | Category/<br>Type   | Amount of Each Disbursement this Period<br>61.87   |
| Candidate Name   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought:<br>State: District:                                     | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>Other (specify): ▼ |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AT&amp;T Mobility</b> |   | Transaction ID: D458-03IF0W<br>Date of Disbursement  |
| Mailing Address<br>P. O. Box 650553                                    |   | <input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y<br>10 / 14 / 2008 |
| City<br>Dallas   | State<br>TX   | Zip Code<br>75265  |
| Purpose of Disbursement<br>Telephone Expense                           | Category/<br>Type   | Amount of Each Disbursement this Period<br>244.46  |
| Candidate Name   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought:<br>State: District:                                     | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>Other (specify): ▼ |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Bellwether Consulting Group</b> |   | Transaction ID: D741-03YL0X<br>Date of Disbursement  |
| Mailing Address<br>666 11th st, nw, Suite 800                                    |   | <input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y<br>10 / 14 / 2008 |
| City<br>Washington   | State<br>DC   | Zip Code<br>20001  |
| Purpose of Disbursement<br>Fundrsng/Consltng-Dinner                              | Category/<br>Type   | Amount of Each Disbursement this Period<br>2223.46   |
| Candidate Name   |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought:<br>State: District:   | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>Other (specify): ▼ |  |

|   |            |
|---|------------|
| SUBTOTAL of Disbursements This Page (optional) .....      | 2529.79    |
| TOTAL This Period (last page this line number only) ..... | 1402894.81 |

28020692858



**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 30 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. Farinola, David A.**

Mailing Address  
12203 Texas St

City                      State                      Zip Code  
Wichita                      KS                      67235

Purpose of Disbursement  
Reimb-Mileage

Candidate Name

Category/  
Type

Office Sought:      
                           
                           
State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1492-04jU08  
Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 14 / 2008

Amount of Each Disbursement this Period

279.05

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Hsbc Business Solutions**

Mailing Address  
PO Box 5239

City                      State                      Zip Code  
Carol Stream                      IL                      60197

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought:      
                           
                           
State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1891-02yg0K  
Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 14 / 2008

Amount of Each Disbursement this Period

93.65

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Kohl, Heath**

Mailing Address  
12131 S. Rene St

City                      State                      Zip Code  
Olathe                      KS                      66062

Purpose of Disbursement  
Reimb-Mileage

Candidate Name

Category/  
Type

Office Sought:      
                           
                           
State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D2249-04AF0J  
Date of Disbursement

M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 14 / 2008

Amount of Each Disbursement this Period

107.64

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

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

480.34

1410613.20

28020692860

**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 31 OF 33

17 20a     18 20b     19a 20c     21

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

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. McManus, Ashley J.</b> |  | Transaction ID: D2527-038R0z   |  |
| Mailing Address<br>1832 SW Lincoln                                      |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2008   |  |
| City<br>Topeka  | State<br>KS  | Zip Code<br>66604  | Amount of Each Disbursement this Period<br><input type="text" value="353.93"/> |
| Purpose of Disbursement<br>Reimb-Mileage                                |  | Category/<br>Type<br><input type="text"/>  |  |
| Candidate Name  |  | <input type="checkbox"/> Refund or Disposal of Excessive<br>Contributions Required under<br>11 C.F.R. 400.53 |  |
| Office Sought:<br><input type="text"/>                                  | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |
| State:<br><input type="text"/>  | District:<br><input type="text"/>  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. New Media Communications</b> |  | Transaction ID: D2732-031R0n   |  |
| Mailing Address<br>3046 Brecksville Road                                      |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2008   |  |
| City<br>Richfield   | State<br>OH  | Zip Code<br>44286  | Amount of Each Disbursement this Period<br><input type="text" value="555.00"/> |
| Purpose of Disbursement<br>Update Web Site                                    |  | Category/<br>Type<br><input type="text"/>  |  |
| Candidate Name  |  | <input type="checkbox"/> Refund or Disposal of Excessive<br>Contributions Required under<br>11 C.F.R. 400.53 |  |
| Office Sought:<br><input type="text"/>  | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |
| State:<br><input type="text"/>  | District:<br><input type="text"/>  |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Panter, Jarrod T.</b> |  | Transaction ID: D2882-05NZ02   |  |
| Mailing Address<br>11624 Caenen Street                                 |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2008   |  |
| City<br>Overland Park  | State<br>KS  | Zip Code<br>66210  | Amount of Each Disbursement this Period<br><input type="text" value="176.67"/> |
| Purpose of Disbursement<br>Reimb-Mileage                               |  | Category/<br>Type<br><input type="text"/>  |  |
| Candidate Name   |  | <input type="checkbox"/> Refund or Disposal of Excessive<br>Contributions Required under<br>11 C.F.R. 400.53 |  |
| Office Sought:<br><input type="text"/>                                 | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): ▼ |  |  |
| State:<br><input type="text"/>   | District:<br><input type="text"/>  |  |  |

|   |   |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) .....      | <input type="text" value="1085.60"/>    |
| TOTAL This Period (last page this line number only) ..... | <input type="text" value="1411698.80"/> |

28020692861

**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)

|  |                              |                              |                             |
|--|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 21 |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c |                             |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Postmaster</b> |   | Transaction ID: D3095-02Jr1q   |
| Mailing Address<br>Topeka Main PO                               |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2008   |
| City<br>Topeka  | State<br>KS   | Zip Code<br>66603  |
| Purpose of Disbursement<br>BRM-Postage                          | Category/<br>Type   | Amount of Each Disbursement this Period<br>250.00  |
| Candidate Name  |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought:<br>State: District:                              | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>Other (specify): ▼ |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sprint</b> |   | Transaction ID: D3795-04W204   |
| Mailing Address<br>PO Box 105243                            |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2008   |
| City<br>Atlanta   | State<br>GA   | Zip Code<br>30348  |
| Purpose of Disbursement<br>Telephone Expense                | Category/<br>Type   | Amount of Each Disbursement this Period<br>123.19  |
| Candidate Name  |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought:<br>State: District:                          | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>Other (specify): ▼ |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. The Hart Agency Inc.</b> |   | Transaction ID: D3966-02Ns08   |
| Mailing Address<br>Suite 168, 4350 Shawnee Mission Pkwy                   |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2008   |
| City<br>Shawnee Mission   | State<br>KS   | Zip Code<br>66205  |
| Purpose of Disbursement<br>Yard 2 side signs                              | Category/<br>Type   | Amount of Each Disbursement this Period<br>4717.57   |
| Candidate Name  |   | <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53 |
| Office Sought:<br>State: District:  | Disbursement For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>Other (specify): ▼ |  |

|   |            |
|---|------------|
| SUBTOTAL of Disbursements This Page (optional) .....      | 5090.76    |
| TOTAL This Period (last page this line number only) ..... | 1416789.56 |

28020692862

**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 33 OF 33

17 20a     18 20b     19a 20c     21

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

Full Name (Last, First, Middle Initial)

**A. American Pre-Sort, Inc.**

Mailing Address  
540 NW Tyler Ct, Ste. 101

City                                      State                                      Zip Code  
Topeka                                      KS                                      66608

Purpose of Disbursement  
Postage for mailing

Candidate Name

Office Sought:                      District:  
  
State:                                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D401-04cv02  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 15 / 2008

Amount of Each Disbursement this Period

3334.42

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Intuit**

Mailing Address  
Reorder Dept, P. O. Box 34328

City                                      State                                      Zip Code  
Seattle                                      WA                                      98124

Purpose of Disbursement  
Supplies-Checks

Candidate Name

Office Sought:                      District:  
  
State:                                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D1987-012b0A  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 15 / 2008

Amount of Each Disbursement this Period

87.76

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Postmaster-Great Bend**

Mailing Address

City                                      State                                      Zip Code  
Great Bend                                      KS                                      67530

Purpose of Disbursement  
FEC mailing, Stamps

Candidate Name

Office Sought:                      District:  
  
State:                                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Category/  
Type

Transaction ID: D2990-01771b  
Date of Disbursement

M/M / D/D / YYY-YY-YY  
10 / 15 / 2008

Amount of Each Disbursement this Period

62.70

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

3484.88

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

1420274.44

28020692863



**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 1 OF 1

17  
20a     18  
20b     19a  
20c     21

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

Full Name (Last, First, Middle Initial)

**A. Futures Industry PAC**

Mailing Address

Action Committee (FIPAC), 2001 Pennsylvania Avenue NW

City                                      State                                      Zip Code  
Washington                                      DC                                      20006

Purpose of Disbursement  
Retd ck upd-Acct Closed

22R  
**Category/  
Type**

Candidate Name

Office Sought:   
  
  
State:                      District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1675-019r01  
Date of Disbursement

M/M / D/D / YYYYY  
10 / 02 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

1000.00

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

1000.00

28020692865

GREAT BEND, KS 67530



SECRETARY OF THE SENATE  
OFFICE OF PUBLIC RECORDS  
PO BOX 5109  
ALEXANDRIA, VA 22301-0109

EXPERIMENTAL  
TO THE SENATE  
OFFICE



NANCY ERICKSON  
SECRETARY

PAMELA B. GAVIN  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7118  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED 10-20-08  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

|                  | SHIPPING DATE | NEXT BUSINESS DAY DELIVERY |
|------------------|---------------|----------------------------|
| FEDERAL EXPRESS  | _____         | <input type="checkbox"/>   |
| UPS              | _____         | <input type="checkbox"/>   |
| DHL              | _____         | <input type="checkbox"/>   |
| AIRBORNE EXPRESS | _____         | <input type="checkbox"/>   |

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  NO POSTMARK

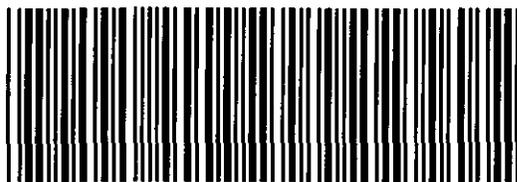
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD

DATE PREPARED 10-24-08

28020692867



28020692868