

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

KANSANS FOR RESPONSIBLE GOVERNMENT

ADDRESS (number and street)

11310 E 21ST NORTH SUITE G

PMB #51

☐ Check if different than previously reported. (ACC)

WICHITA

KS

67206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00563296

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

MM / DD /

YY

2014

in the
State of

KS

(d) 30-Day

POST-Election

Report for the:

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

Election on

MM / DD /

YY

2014

in the
State of

5. Covering Period

MM / DD /

YY

2014

through

MM / DD /

YY

2014

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 Willis Hartman

Signature of Treasurer

Willis Hartman

[Electronically Filed]

Date

MM / DD /

YY

2014

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

KANSANS FOR RESPONSIBLE GOVERNMENT

Report Covering the Period: From: M M / D D / Y Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y Y 07 / 16 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	60716.65	
(c) Total Receipts (from Line 19)	55000.00	226000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	115716.65	226000.00
7. Total Disbursements (from Line 31)	103366.87	213650.22
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12349.78	12349.78
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

KANSANS FOR RESPONSIBLE GOVERNMENT

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2014

To:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

55000.00

226000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

55000.00

226000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

55000.00

226000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

55000.00

226000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

55000.00

226000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4554.87	7495.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4554.87	7495.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	98812.00	206155.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	103366.87	213650.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103366.87	213650.22

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	55000.00	226000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55000.00	226000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	4554.87	7495.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	4554.87	7495.22

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

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

FOR LINE NUMBER: PAGE 6 OF 10
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

KANSANS FOR RESPONSIBLE GOVERNMENT

Full Name (Last, First, Middle Initial)

A. Willis Hartman

Mailing Address 10500 E. Berkeley Square Parkway
Ste 100

City State Zip Code
Wichita KS 67206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hartman Oil Co Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 09 2014

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period

55000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

55000.00

55000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 10

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

KANSANS FOR RESPONSIBLE GOVERNMENT

Full Name (Last, First, Middle Initial)

A. Twin Oaks Connect

Mailing Address 57 Waddell St SE

City	State	Zip Code
Marietta	GA	30060

Purpose of Disbursement
Marketing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2014

Transaction ID : SB21B.4185

Amount of Each Disbursement this Period

4419.35

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

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

Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

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

Amount of Each Disbursement this Period

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

4419.35

4419.35

Full Name of Payee Strategic Media Services		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 07 / 2014	
Mailing Address 1911 North Ft Myer Dr Ste 400		Amount 6439.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : SE.4127 Date of Disbursement or Obligation MM / DD / YYYY 07 / 01 / 2014
Purpose of Expenditure Advertising Production and Placement		Category/ Type	
Name of Federal Candidate TODD TIAHRT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: KS
Calendar Year-To-Date Per Election for Office Sought		128668.80	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	21325.80
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 9 OF 10
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) KANSANS FOR RESPONSIBLE GOVERNMENT			FEC IDENTIFICATION NUMBER ▼ C C00563296	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			MM / DD / YYYY	
Full Name of Payee Strategic Media Services		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 09 / 2014		
Mailing Address 1911 North Ft Myer Dr Ste 400		Amount 22630.20		
City Arlington	State VA	Zip Code 22209	Transaction ID : SE.4128	
Purpose of Expenditure Advertising Production and Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 01 / 2014	
Name of Federal Candidate MICHAEL R POMPEO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		151299.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Strategic Media Services		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 09 / 2014		
Mailing Address 1911 North Ft Myer Dr Ste 400		Amount 10850.00		
City Arlington	State VA	Zip Code 22209	Transaction ID : SE.4150	
Purpose of Expenditure Advertising Production and Costs		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 10 / 2014	
Name of Federal Candidate MICHAEL R POMPEO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		162149.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		33480.20		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Willis Hartman</i>		Date MM / DD / YYYY 07 / 24 / 2014		
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 10 OF 10
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) KANSANS FOR RESPONSIBLE GOVERNMENT			FEC IDENTIFICATION NUMBER ▼ C C00563296	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			M M / D D / Y Y Y Y Y Y	
Full Name of Payee Strategic Media Services		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 1911 North Ft Myer Dr Ste 400		Amount 6439.00		
City Arlington	State VA	Zip Code 22209	Transaction ID : SE.4153	
Purpose of Expenditure Advertising Production and Placement		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 10 / 2014	
Name of Federal Candidate TODD TIAHRT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		168588.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Strategic Media Services		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 16 / 2014		
Mailing Address 1911 North Ft Myer Dr Ste 400		Amount 37567.00		
City Arlington	State VA	Zip Code 22209	Transaction ID : SE.4154	
Purpose of Expenditure Advertising Production and Placement		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 10 / 2014	
Name of Federal Candidate MICHAEL R POMPEO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		206155.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		44006.00		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		98812.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Willis Hartman		Date M M / D D / Y Y Y Y Y Y 07 / 24 / 2014		
[Electronically Filed]				