

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SPIRIT AEROSYSTEMS, INC. PAC

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		21848.54
(b) Cash on Hand at Beginning of Reporting Period.....	24302.81	
(c) Total Receipts (from Line 19)	6462.00	12924.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	30764.81	34772.54
7. Total Disbursements (from Line 31).....	7.27	4015.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	30757.54	30757.54
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SPIRIT AEROSYSTEMS, INC. PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2731.00	4187.00
(ii) Unitemized	3731.00	8737.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6462.00	12924.00
(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)	6462.00	12924.00
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)).....▶	6462.00	12924.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6462.00	12924.00

DETAILED SUMMARY PAGE

of Disbursements

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	7.27	15.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7.27	15.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	4000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	7.27	4015.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7.27	4015.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	6462.00	12924.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6462.00	12924.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7.27	15.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7.27	15.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
SPIRIT AEROSYSTEMS, INC. PAC

A. BLACK, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) SVP ENGINEERING AND CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000009L11A1
 Amount of Each Receipt this Period 125.00
 Memo Item
PAYROLL DEDUCTION

B. BROWN, WILLIAM, EDWARD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) SVP-QUALITY AND OPS ENGINEERII
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000013L11A1
 Amount of Each Receipt this Period 208.00
 Memo Item
PAYROLL DEDUCTION

C. CADENA, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) VP CORPORATE AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000014L11A1
 Amount of Each Receipt this Period 125.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	458.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SPIRIT AEROSYSTEMS, INC. PAC

A. CANTWELL, WILLIAM, EUGENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) VP BOEING OPERATIONAL PERFORI
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000016L11A1
 Amount of Each Receipt this Period 125.00
 Memo Item
PAYROLL DEDUCTION

B. CROSSMAN, WENDY, MICHELE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) VP SOURCING & SUPPLIER DEVELC
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000021L11A1
 Amount of Each Receipt this Period 125.00
 Memo Item
PAYROLL DEDUCTION

C. DALKE, BRIAN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) VP 787 PROGRAM
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000022L11A1
 Amount of Each Receipt this Period 125.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SPIRIT AEROSYSTEMS, INC. PAC

A. HALL, STACY, MARIE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) VP 737 PROGRAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000035L11A1
 Amount of Each Receipt this Period 125.00
 Memo Item
PAYROLL DEDUCTION

B. HUNT, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) VP-INFORMATION TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000042L11A1
 Amount of Each Receipt this Period 150.00
 Memo Item
PAYROLL DEDUCTION

C. MCPHEETERS, MARY, MELINDA, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 S OLIVER ST
 City WICHITA State KS Zip Code 67210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC Occupation (for Individual) SR VP GENERAL COUNSEL & CORP :
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 02 / 01 / 2024
Transaction ID : B000536S000054L11A1
 Amount of Each Receipt this Period 208.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	483.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
SPIRIT AEROSYSTEMS, INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MEYER, HEATHER, , ,

Mailing Address **3801 S OLIVER ST**

City **WICHITA** State **KS** Zip Code **67210**

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

Name of Employer (for Individual) **SPIRIT AEROSYSTEMS INC** Occupation (for Individual) **VP-QUALITY ASSURANCE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 01 / 2024

Transaction ID : B000536S000055L11A1

Amount of Each Receipt this Period
125.00

Memo Item
PAYROLL DEDUCTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MIKLOS, MARK, , ,

Mailing Address **5 MORIN ST**

City **BIDDEFORD** State **ME** Zip Code **04005**

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

Name of Employer (for Individual) **SPIRIT AEROSYSTEMS INC** Occupation (for Individual) **SR VP DEFENSE & SPACE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt
02 / 01 / 2024

Transaction ID : B000536S000056L11A1

Amount of Each Receipt this Period
208.00

Memo Item
PAYROLL DEDUCTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. POWER, KAMI, LEA, ,

Mailing Address **3801 S OLIVER ST**

City **WICHITA** State **KS** Zip Code **67210**

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

Name of Employer (for Individual) **SPIRIT AEROSYSTEMS INC** Occupation (for Individual) **VP - TWIN AISLE PROGRAMS**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 01 / 2024

Transaction ID : B000536S000062L11A1

Amount of Each Receipt this Period
125.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... **458.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SPIRIT AEROSYSTEMS, INC. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SHANAHAN, PATRICK, M, ,

Mailing Address 3801 S OLIVER ST

City WICHITA	State KS	Zip Code 67210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC	Occupation (for Individual) PRESIDENT & CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
832.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2024
Transaction ID : B000536S000069L11A1

Amount of Each Receipt this Period
416.00

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SUCHINSKI, MARK, J, ,

Mailing Address 3801 S OLIVER ST

City WICHITA	State KS	Zip Code 67210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC	Occupation (for Individual) SVP CHIEF FINANCIAL OFFICER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2024
Transaction ID : B000536S000078L11A1

Amount of Each Receipt this Period
208.00

Memo Item
PAYROLL DEDUCTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WARD, DAMON, C, ,

Mailing Address 3801 S OLIVER ST

City WICHITA	State KS	Zip Code 67210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC	Occupation (for Individual) VP CORPORATE CONTROLLER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2024
Transaction ID : B000536S000079L11A1

Amount of Each Receipt this Period
125.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	749.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 12
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
SPIRIT AEROSYSTEMS, INC. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WELNER, JUSTIN, TODD, ,

Mailing Address 3801 S OLIVER ST

City WICHITA	State KS	Zip Code 67210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPIRIT AEROSYSTEMS INC	Occupation (for Individual) SVP CHIEF ADMIN & COMPLIANCE C
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2024

Transaction ID : **B000536S000081L11A1**

Amount of Each Receipt this Period
208.00

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	208.00
TOTAL This Period (last page this line number only).....	2731.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SPIRIT AEROSYSTEMS, INC. PAC

Full Name (Last, First, Middle Initial)

A. INTRUST BANK

Mailing Address PO BOX 1

City
WICHITA

State
KS

Zip Code
67201-5001

Purpose of Disbursement
BANK ACCOUNT ANALYSIS FEE

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2024

FEC Identification Number

C []

Transaction ID : B000538S000

Amount of Each Disbursement this Period

[] 7.27

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[]		[]		[]

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[]		[]		[]

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

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

[] 7.27

[] 7.27