

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Bollier for Kansas

ADDRESS (number and street)

PO Box 1647

Check if different  
than previously  
reported. (ACC)

Mission

KS

66222

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00723122

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

KS

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

01

Y Y Y Y / Y Y Y Y

2021

through

M M / D D / Y Y Y Y

09

D D / Y Y Y Y

30

Y Y Y Y / Y Y Y Y

2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Mele, Steven, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Mele, Steven, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

07

Y Y Y Y / Y Y Y Y

2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 21

Write or Type Committee Name  
**Bollier for Kansas**

Report Covering the Period:

From:

MM / DD / YYYY  
 07 / 01 / 2021

To:

MM / DD / YYYY  
 09 / 30 / 2021

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 0.00                    | 176343.18                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 81329.93                           |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 0.00                    | 95013.25                           |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 33206.38                | 658409.84                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                               | 136399.26               | 153984.62                          |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | - 103192.88             | 504425.22                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                              | 102323.28               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 21

Write or Type Committee Name

Bollier for Kansas

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 2 | 1 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 1 |

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

## (a) Individuals/Persons Other Than Political Committees

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

0.00

44243.99

(ii) Unitemized.....

0.00

132099.19

(iii) TOTAL of contributions from individuals ▶

0.00

176343.18

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

0.00

176343.18

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

2227.50

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

136399.26

153984.62

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

1900.04

468770.90

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

138299.30

801326.20

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 21

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 33206.38                      | 658409.84                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 3577.10                            |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 50000.00                           |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 50000.00                           |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 81329.93                           |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 81329.93                           |
| 21. OTHER DISBURSEMENTS .....                                                | 72500.00                      | 183500.00                          |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 105706.38                     | 976816.87                          |

**III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 69730.36  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 138299.30 |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 208029.66 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 105706.38 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 102323.28 |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 21

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

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

Mailing Address 1150 18th St NW  
Ste 800

City Washington State DC Zip Code 20036-3845

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

Name of Employer Occupation

Receipt For: 2020  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
135289.26

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08  | 13  | 2021    |

Transaction ID : 11369745

Amount of Each Receipt this Period

135289.26

☐ Memo Item

Refund from Vendor

**B.** Full Name (Last, First, Middle Initial)  
**Travelers - RMD**

Mailing Address PO Box 660333

City Dallas State TX Zip Code 75266-0333

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

Name of Employer Occupation

Receipt For: 2020  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1110.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08  | 23  | 2021    |

Transaction ID : 11369747

Amount of Each Receipt this Period

1110.00

☐ Memo Item

Refund from Vendor

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

Election Cycle-to-Date ▼

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
|     |     |         |

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

|           |
|-----------|
| 136399.26 |
| 136399.26 |

# **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 21

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

**A.** Full Name (Last, First, Middle Initial)  
**Groundswell Public Strategies LLC**

Mailing Address 770 Ponce De Leon Blvd  
 Ste 302B

City  
 Coral Gables

State  
 FL

Zip Code  
 33134-2068

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1900.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 02 2021

Transaction ID : 11369739

Amount of Each Receipt this Period

1900.04

☐ Memo Item

List Rental Income

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

1900.04

1900.04

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

PAGE 7 OF 21

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. NGP VAN**Mailing Address 1445 New York Ave NW  
Ste 200City  
WashingtonState  
DCZip Code  
20005-2158Purpose of Disbursement  
Software Subscription

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 09  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : 500764170

☐ Memo Item**B. NGP VAN**Mailing Address 1445 New York Ave NW  
Ste 200City  
WashingtonState  
DCZip Code  
20005-2158Purpose of Disbursement  
Software Subscription

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 10  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : 500764171

☐ Memo Item**c. MBA Consulting Group**Mailing Address 611 Pennsylvania Ave SE  
Ste 143City  
WashingtonState  
DCZip Code  
20003-4303Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 22  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.48

Transaction ID : 500764181

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

935.48

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

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

PAGE 8 OF 21

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Internal Revenue Services**

Mailing Address US Treasury IRS Service Ctr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 27  |   | 2021    |

City  
OgdenState  
UTZip Code  
84201-0001

FEC Identification Number

C

Purpose of Disbursement  
Federal Tax

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

22574.00

Transaction ID : 500765644

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Kansas Department of Revenue**

Mailing Address PO Box 3506

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 27  |   | 2021    |

City  
TopekaState  
KSZip Code  
66601-3506

FEC Identification Number

C

Purpose of Disbursement  
State Tax

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

7069.00

Transaction ID : 500765645

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 1825 K St NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 28  |   | 2021    |

City  
WashingtonState  
DCZip Code  
20006-1202

FEC Identification Number

C

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.00

Transaction ID : 500764166

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

29653.00

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

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

PAGE 9 OF 21

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank**

Mailing Address 1825 K St NW

City  
WashingtonState  
DCZip Code  
20006-1202Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 27  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : 500764167

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Mailing Address 1825 K St NW

City  
WashingtonState  
DCZip Code  
20006-1202Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.25

Transaction ID : 500765648

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Perkins Coie**Mailing Address 1201 3rd Ave  
Ste 4900City  
SeattleState  
WAZip Code  
98101-3095Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 23  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1031.05

Transaction ID : 500764168

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1091.30

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

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

PAGE 10 OF 21

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**Mailing Address 1201 3rd Ave  
Ste 4900City  
SeattleState  
WAZip Code  
98101-3095Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 08  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1526.60

Transaction ID : 500764169

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | 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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1526.60

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

33206.38

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

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

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NAME OF COMMITTEE (In Full)

Bollier for Kansas

Full Name (Last, First, Middle Initial)

**A. Tammy Baldwin for Senate**

Mailing Address PO Box 696

City  
MadisonState  
WIZip Code  
53701-0696Purpose of Disbursement  
Federal Contribution

Candidate Name

Baldwin, Tammy, , ,

Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI

District: 00

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

FEC Identification Number

C C00326801

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765760

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chris Coons for Delaware**

Mailing Address PO Box 9900

City  
NewarkState  
DEZip Code  
19714-5000Purpose of Disbursement  
Federal Contribution

Candidate Name

COONS, CHRISTOPHER, A., ,

Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: DE

District: 00

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

FEC Identification Number

C C00475392

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765770

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Loud Light**

Mailing Address PO Box 4045

City  
TopekaState  
KSZip Code  
66604-0045Purpose of Disbursement  
Charitable Donation

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 28  |   | 2021    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : 500764180

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6500.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Warren Democrats, Inc.**Mailing Address 124 Washington St  
Ste 101City  
FoxboroState  
MAZip Code  
02035-1368Purpose of Disbursement  
Federal Contribution

Candidate Name

**Warren, Elizabeth, , ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 00

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

FEC Identification Number

**C** C00500843

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765761

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. People for Patty Murray**

Mailing Address PO Box 3662

City  
SeattleState  
WAZip Code  
98124-3662Purpose of Disbursement  
Federal Contribution

Candidate Name

**Murray, Patty, , ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 00

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

FEC Identification Number

**C** C00257642

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765771

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Stabenow for US Senate**

Mailing Address PO Box 4945

City  
East LansingState  
MIZip Code  
48826-4945Purpose of Disbursement  
Federal Contribution

Candidate Name

**STABENOW, DEBBIE, , ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 00

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

FEC Identification Number

**C** C00344473

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765752

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

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

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

PAGE 13 OF 21

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |                                                                                                                                                                                                                                      |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>A. Cory Booker for Senate</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 8 Lombardy St<br># 346<br>City Newark State NJ Zip Code 07102-3210<br>Purpose of Disbursement Federal Contribution<br>Candidate Name Booker, Cory, A., ,<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: NJ District: 00 |  |  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2021<br>FEC Identification Number<br>C C00540500<br>Amount of Each Disbursement this Period<br>2000.00<br>Transaction ID : 500765762<br><input type="checkbox"/> Memo Item  |  |
| <b>B. Kansas Democratic Party</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 1914<br>City Topeka State KS Zip Code 66601-1914<br>Purpose of Disbursement Federal Contribution<br>Candidate Name Kansas Democratic Party<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District:                        |  |  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 28 / 2021<br>FEC Identification Number<br>C C00019380<br>Amount of Each Disbursement this Period<br>10000.00<br>Transaction ID : 500764172<br><input type="checkbox"/> Memo Item |  |
| <b>c. Tammy Baldwin for Senate</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 696<br>City Madison State WI Zip Code 53701-0696<br>Purpose of Disbursement Federal Contribution<br>Candidate Name Baldwin, Tammy, , ,<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: WI District: 00          |  |  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2021<br>FEC Identification Number<br>C C00326801<br>Amount of Each Disbursement this Period<br>2000.00<br>Transaction ID : 500765772<br><input type="checkbox"/> Memo Item  |  |
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  | 14000.00                                                                                                                                                                                                                             |  |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |                                                                                                                                                                                                                                      |  |

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

PAGE 14 OF 21

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

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NAME OF COMMITTEE (In Full)

Bollier for Kansas

Full Name (Last, First, Middle Initial)

**A. Friends of Mazie Hirono**

Mailing Address PO Box 677

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
HonoluluState  
HIZip Code  
96809-0677

FEC Identification Number

C C00420760

Purpose of Disbursement  
Federal Contribution

Candidate Name

Hirono, Mazie, K., ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765753

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: HI District: 00

Full Name (Last, First, Middle Initial)

**B. Sharice for Congress**Mailing Address 13851 W 63rd St  
# 303

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
ShawneeState  
KSZip Code  
66216-3800

FEC Identification Number

C C00670034

Purpose of Disbursement  
Federal Contribution

Candidate Name

DAVIDS, SHARICE, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765763

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KS District: 03

Full Name (Last, First, Middle Initial)

**c. Maggie for NH**

Mailing Address PO Box 298

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 28  | 2021    |

City  
ConcordState  
NHZip Code  
03302-0298

FEC Identification Number

C C00588772

Purpose of Disbursement  
Federal Contribution

Candidate Name

Hassan, Margaret, Wood, ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500764173

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District: 00

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

6000.00

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

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

PAGE 15 OF 21

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Warren Democrats, Inc.**Mailing Address 124 Washington St  
Ste 101City  
FoxboroState  
MAZip Code  
02035-1368Purpose of Disbursement  
Federal Contribution

Candidate Name

**Warren, Elizabeth, , ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA

District: 00

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

FEC Identification Number

**C** C00500843

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765773

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Chris Murphy**

Mailing Address PO Box 127

City  
CheshireState  
CTZip Code  
06410-0127Purpose of Disbursement  
Federal Contribution

Candidate Name

**Murphy, Christopher, S, ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT

District: 00

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

FEC Identification Number

**C** C00492645

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765754

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Stabenow for US Senate**

Mailing Address PO Box 4945

City  
East LansingState  
MIZip Code  
48826-4945Purpose of Disbursement  
Federal Contribution

Candidate Name

**STABENOW, DEBBIE, , ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District: 00

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

FEC Identification Number

**C** C00344473

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765764

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Maggie for NH**

Mailing Address PO Box 298

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 28  | 2021    |

City  
ConcordState  
NHZip Code  
03302-0298

FEC Identification Number

C C00588772

Purpose of Disbursement  
Federal Contribution

Candidate Name

**Hassan, Margaret, Wood, ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500764174

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NH

District: 00

Full Name (Last, First, Middle Initial)

**B. Cory Booker for Senate**Mailing Address 8 Lombardy St  
# 346

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
NewarkState  
NJZip Code  
07102-3210

FEC Identification Number

C C00540500

Purpose of Disbursement  
Federal Contribution

Candidate Name

**Booker, Cory, A., ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765774

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 00

Full Name (Last, First, Middle Initial)

**C. Kaine for Virginia**

Mailing Address 1751 Potomac Greens Dr

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
AlexandriaState  
VAZip Code  
22314-6233

FEC Identification Number

C C00495358

Purpose of Disbursement  
Federal Contribution

Candidate Name

**Kaine, Timothy, Michael, ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765755

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 00

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

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Friends of Mazie Hirono**

Mailing Address PO Box 677

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
HonoluluState  
HIZip Code  
96809-0677

FEC Identification Number

**C** C00420760Purpose of Disbursement  
Federal Contribution

Candidate Name

**Hirono, Mazie, K., ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765765

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: HI

District: 00

Full Name (Last, First, Middle Initial)

**B. Catherine Cortez-Masto for Senate**Mailing Address 8020 S Rainbow Blvd  
Ste Pm 100

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 28  | 2021    |

City  
Las VegasState  
NVZip Code  
89139-6494

FEC Identification Number

**C** C00575548Purpose of Disbursement  
Federal Contribution

Candidate Name

**Cortez-Masto, Catherine, , ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500764175

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 00

Full Name (Last, First, Middle Initial)

**c. Sharice for Congress**Mailing Address 13851 W 63rd St  
# 303

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
ShawneeState  
KSZip Code  
66216-3800

FEC Identification Number

**C** C00670034Purpose of Disbursement  
Federal Contribution

Candidate Name

**DAVIDS, SHARICE, , ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765775

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: KS

District: 03

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

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. Friends of Dick Durbin Committee**

Mailing Address PO Box 1949

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
SpringfieldState  
ILZip Code  
62705-1949

FEC Identification Number

**C** C00148999Purpose of Disbursement  
Federal Contribution

Candidate Name

**Durbin, Richard, J., ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765756

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 00

Full Name (Last, First, Middle Initial)

**B. Friends of Chris Murphy**

Mailing Address PO Box 127

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 28  | 2021    |

City  
CheshireState  
CTZip Code  
06410-0127

FEC Identification Number

**C** C00492645Purpose of Disbursement  
Federal Contribution

Candidate Name

**Murphy, Christopher, S, ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765766

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District: 00

Full Name (Last, First, Middle Initial)

**c. Catherine Cortez-Masto for Senate**Mailing Address 8020 S Rainbow Blvd  
Ste Pm 100

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 28  | 2021    |

City  
Las VegasState  
NVZip Code  
89139-6494

FEC Identification Number

**C** C00575548Purpose of Disbursement  
Federal Contribution

Candidate Name

**Cortez-Masto, Catherine, , ,**Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500764176

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 00

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

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)

Bollier for Kansas

Full Name (Last, First, Middle Initial)

**A. Klobuchar for Minnesota**

Mailing Address PO Box 4146

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

City  
Saint PaulState  
MNZip Code  
55104-0146

FEC Identification Number

C C00431353

Purpose of Disbursement  
Federal Contribution

Candidate Name

Klobuchar, Amy, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765757

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN

District: 00

Full Name (Last, First, Middle Initial)

**B. Kaine for Virginia**

Mailing Address 1751 Potomac Greens Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

City  
AlexandriaState  
VAZip Code  
22314-6233

FEC Identification Number

C C00495358

Purpose of Disbursement  
Federal Contribution

Candidate Name

Kaine, Timothy, Michael, ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765767

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA

District: 00

Full Name (Last, First, Middle Initial)

**C. Patrick Schmidt for Kansas**

Mailing Address PO Box 750783

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 28  |   | 2021    |

City  
TopekaState  
KSZip Code  
66675-0783

FEC Identification Number

C C00783712

Purpose of Disbursement  
Federal Contribution

Candidate Name

Schmidt, Patrick, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500764177

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KS

District: 02

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

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

|                                                                                       |                                                                                                                    |                                                                                                                                                      |                          |                                                                                                                        |  |
|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Chris Coons for Delaware</b>         |                                                                                                                    |                                                                                                                                                      |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2021                                                          |  |
| Mailing Address PO Box 9900                                                           |                                                                                                                    |                                                                                                                                                      |                          |                                                                                                                        |  |
| City<br>Newark                                                                        |                                                                                                                    | State<br>DE                                                                                                                                          | Zip Code<br>19714-5000   |                                                                                                                        |  |
| Purpose of Disbursement<br>Federal Contribution                                       |                                                                                                                    |                                                                                                                                                      | <input type="checkbox"/> |                                                                                                                        |  |
| Candidate Name<br><b>COONS, CHRISTOPHER, A., ,</b>                                    |                                                                                                                    |                                                                                                                                                      | Category/<br>Type        |                                                                                                                        |  |
| Office Sought:                                                                        | <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2026<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |                                                                                                                        |  |
| State: DE                                                                             |                                                                                                                    | District: 00                                                                                                                                         |                          | Amount of Each Disbursement this Period<br>2000.00<br>Transaction ID : 500765758<br><input type="checkbox"/> Memo Item |  |
| Full Name (Last, First, Middle Initial)<br><b>B. Friends of Dick Durbin Committee</b> |                                                                                                                    |                                                                                                                                                      |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 28 / 2021                                                          |  |
| Mailing Address PO Box 1949                                                           |                                                                                                                    |                                                                                                                                                      |                          |                                                                                                                        |  |
| City<br>Springfield                                                                   |                                                                                                                    | State<br>IL                                                                                                                                          | Zip Code<br>62705-1949   |                                                                                                                        |  |
| Purpose of Disbursement<br>Federal Contribution                                       |                                                                                                                    |                                                                                                                                                      | <input type="checkbox"/> |                                                                                                                        |  |
| Candidate Name<br><b>Durbin, Richard, J., ,</b>                                       |                                                                                                                    |                                                                                                                                                      | Category/<br>Type        |                                                                                                                        |  |
| Office Sought:                                                                        | <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2026<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |                                                                                                                        |  |
| State: IL                                                                             |                                                                                                                    | District: 00                                                                                                                                         |                          | Amount of Each Disbursement this Period<br>2000.00<br>Transaction ID : 500765768<br><input type="checkbox"/> Memo Item |  |
| Full Name (Last, First, Middle Initial)<br><b>c. Patrick Schmidt for Kansas</b>       |                                                                                                                    |                                                                                                                                                      |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 28 / 2021                                                          |  |
| Mailing Address PO Box 750783                                                         |                                                                                                                    |                                                                                                                                                      |                          |                                                                                                                        |  |
| City<br>Topeka                                                                        |                                                                                                                    | State<br>KS                                                                                                                                          | Zip Code<br>66675-0783   |                                                                                                                        |  |
| Purpose of Disbursement<br>Federal Contribution                                       |                                                                                                                    |                                                                                                                                                      | <input type="checkbox"/> |                                                                                                                        |  |
| Candidate Name<br><b>Schmidt, Patrick, , ,</b>                                        |                                                                                                                    |                                                                                                                                                      | Category/<br>Type        |                                                                                                                        |  |
| Office Sought:                                                                        | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2022<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |                                                                                                                        |  |
| State: KS                                                                             |                                                                                                                    | District: 02                                                                                                                                         |                          | Amount of Each Disbursement this Period<br>2000.00<br>Transaction ID : 500764178<br><input type="checkbox"/> Memo Item |  |
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶                           |                                                                                                                    |                                                                                                                                                      |                          | 6000.00                                                                                                                |  |
| <b>TOTAL</b> This Period (last page this line number only).....▶                      |                                                                                                                    |                                                                                                                                                      |                          |                                                                                                                        |  |

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

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

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NAME OF COMMITTEE (In Full)  
**Bollier for Kansas**

Full Name (Last, First, Middle Initial)

**A. People for Patty Murray**

Mailing Address PO Box 3662

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

City  
SeattleState  
WAZip Code  
98124-3662

FEC Identification Number

C C00257642

Purpose of Disbursement  
Federal Contribution

Candidate Name

Murray, Patty, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765759

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA

District: 00

Full Name (Last, First, Middle Initial)

**B. Klobuchar for Minnesota**

Mailing Address PO Box 4146

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2021    |

City  
Saint PaulState  
MNZip Code  
55104-0146

FEC Identification Number

C C00431353

Purpose of Disbursement  
Federal Contribution

Candidate Name

Klobuchar, Amy, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500765769

☐ Memo Item

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN

District: 00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

4000.00

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

72500.00