

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Adrian Smith for Congress

ADDRESS (number and street) 3321 Avenue I

Suite 6

Check if different than previously reported. (ACC)

Scottsbluff NE 69361 4587

2. **FEC IDENTIFICATION NUMBER** C00412890

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NE 03

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 [] [] [] in the State of []

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

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

Election on 11 04 2008 in the State of NE

5. Covering Period 10 16 2008 through 11 24 2008

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

Type or Print Name of Treasurer Lenora Gompert

Signature of Treasurer Electronically Filed by Lenora Gompert Date 01 14 2009

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Adrian Smith for Congress

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	43268.70	793632.63
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	43268.70	791632.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	120140.57	659245.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	235.00	9748.67
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	119905.57	649496.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	204530.72	
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	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

**POST-ELECTION DETAILED
SUMMARY PAGE**
Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Adrian Smith for Congress

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date of general election)	M	M	1	1	D	D	0	4	Y	Y	Y	Y	2	0	0	8	COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date after general election) through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	5	Y	Y	Y	Y	2	0	0	8	M	M	1	1	D	D	2	4	Y	Y	Y	Y	2	0	0	8
M	M																																																	
1	1																																																	
D	D																																																	
0	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	5																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
10950.00	328548.70	1000.00																																																
(ii) Unitemized																																																		
2768.70	61489.42	1351.70																																																
(iii) Total of contributions from individuals																																																		
13718.70	390038.12	2351.70																																																
(b) Political Party Committees																																																		
0.00	2000.00	0.00																																																
(c) Other Political Committees																																																		
29550.00	398394.51	1000.00																																																

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	3200.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
43268.70	793632.63	3351.70
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	101.91	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
235.00	9748.67	100.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
40.99	865.31	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
43544.69	804348.52	3451.70

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Adrian Smith for Congress

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
120140.57	659245.60	20684.39
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	2000.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
-------------------------------	---	--------------------------	--

(c) Other political committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

0.00	2000.00	0.00
------	---------	------

21. OTHER DISBURSEMENTS

14000.00	12474.95	2000.00
----------	----------	---------

22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

134140.57	673720.55	22684.39
-----------	-----------	----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

43268.70	791632.63	3351.70
----------	-----------	---------

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

119905.57	649496.93	20584.39
-----------	-----------	----------

V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	295126.60
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	43544.69
25. SUBTOTAL(add Line 23 and Line 24)	338671.29
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	134140.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	204530.72

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Bob Allen

Mailing Address 44098 Highway 2

City Broken Bow State NE Zip Code 68822-4202

FEC ID number of contributing federal political committee. C

Name of Employer Custer County Implement Occupation Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: A-C13176

Amount of Each Receipt this Period 500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Greg Baxter

Mailing Address 4444 W 13th Street

City Grand Island State NE Zip Code 68803-2815

FEC ID number of contributing federal political committee. C

Name of Employer T&E Cattle Co. Occupation Cattle Feeder

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: A-C13215

Amount of Each Receipt this Period 500.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Bill Boyd

Mailing Address PO Box 250

City Grand Island State NE Zip Code 68802-0250

FEC ID number of contributing federal political committee. C

Name of Employer Nebraskaland Distributors Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: A-C13177

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 53

(check only one)

<input checked="" 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 type="checkbox"/> 14 <input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Sen. Kermit Brashear

Mailing Address 216 N 117th Street

City State Zip Code
Omaha NE 68154-2204

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Brashear & Ginn Lawyer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 24 / 2008

Transaction ID: A-C13320

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Mr. Terry Gautreaux

Mailing Address 703 S Chestnut Street

City State Zip Code
Friend NE 68359-1633

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
none Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2008

Transaction ID: A-C13268

Amount of Each Receipt this Period
50.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. Chuck Haase

Mailing Address 205 N Webb Road

City State Zip Code
Grand Island NE 68803-4038

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Charter Communication Business Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2008

Transaction ID: A-C13201

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 9 / 53
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Deryl F. Hamann		Date of Receipt
	Mailing Address 761 Fairacres Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Omaha	NE	68132-1834
	FEC ID number of contributing federal political committee. C		Transaction ID: A-C13204
Name of Employer Baird Holm LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Mr. Harry Hoch, Jr.		Date of Receipt
	Mailing Address PO Box 1646		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 7 / 2 0 0 8
	City	State	Zip Code
	Grand Island	NE	68802-1646
	FEC ID number of contributing federal political committee. C		Transaction ID: A-C13212
Name of Employer H&H Distributors		Occupation Beer Distributor	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2500.00
		<input type="text"/> 2500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Dr. Casey Iverson		Date of Receipt
	Mailing Address PO Box 2371		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 0 8
	City	State	Zip Code
	Grand Island	NE	68802-2371
	FEC ID number of contributing federal political committee. C		Transaction ID: A-C13183
Name of Employer Self		Occupation Chiropractor	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 600.00
		<input type="text"/> 600.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2100.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Marc Kaschke	Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address PO Box 627	Transaction ID: A-C13200
	City State Zip Code North Platte NE 69103-0627	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Kaschke Investments President	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Gary J Kleinschmit	Date of Receipt MM / DD / YYYY 10 / 18 / 2008
	Mailing Address 88780 Hwy 55	Transaction ID: A-C13191
	City State Zip Code Hartington NE 68739	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Rancher	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Mr. Bill Marshall	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address 2015 N Broadwell Avenue	Transaction ID: A-C13213
	City State Zip Code Grand Island NE 68803-2759	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Five Points Bank Chairman and President	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 53
(check only one)

<input checked="" 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 type="checkbox"/> 14
			<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Tom Middleton

Mailing Address PO Box 447

City State Zip Code
Grand Island NE 68802-0447

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

Name of Employer Occupation
Middleton Electric Inc. Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: A-C13221

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Mr. Dan Neary

Mailing Address 7809 S 45th Avenue

City State Zip Code
Omaha NE 68157-2691

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

Name of Employer Occupation
Mutual of Omaha CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: A-C13206

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Hon. Donald Overman

Mailing Address 2201 7th Avenue

City State Zip Code
Scottsbluff NE 69361-2109

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

Name of Employer Occupation
Overman & Associates Insurance

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 455.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: A-C13174

Amount of Each Receipt this Period
50.00

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

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 53
(check only one)

<input checked="" 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 type="checkbox"/>	14
							15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Ms. Barb Pemberton Riege

Mailing Address 3515 Coal Chute Road

City State Zip Code
Kearney NE 68847-9466

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

Name of Employer Self Occupation Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: A-C13257

Amount of Each Receipt this Period
150.00

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

316.00

B.

Full Name (Last, First, Middle Initial)
Mr. Rick Schnase

Mailing Address 5760 N 1st Avenue

City State Zip Code
Hastings NE 68901-1948

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

Name of Employer Schnase Sales Company Occupation Sales

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: A-C13214

Amount of Each Receipt this Period
500.00

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

1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Wendell D. Spencer

Mailing Address 49130 W Benton Street

City State Zip Code
Oneill NE 68763-4604

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

Name of Employer North Central Anesthesia Services, L.L Occupation Certified Registered Nurse Anesthetist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: A-C13236

Amount of Each Receipt this Period
300.00

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

300.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 53	
	(check only one)			
<input checked="" 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 type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mr. George W. Venteicher		Date of Receipt																					
	Mailing Address 13507 Hamilton Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	7		2	0	0	8														
	City State Zip Code Omaha NE 68154-5152		Transaction ID: A-C13211																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00																						
Name of Employer KVI Associates		Occupation President																						
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00																						
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																						

SUBTOTAL of Receipts This Page (optional)	▶	2300.00
TOTAL This Period (last page this line number only)	▶	10950.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 53
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
ACFAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 4040 W 70th Street

City State Zip Code
Minneapolis MN 55435-4104

FEC ID number of contributing federal political committee. **C** C00034785

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: A-C13219

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
American Enterprise Mutual Holding Company PAC

Mailing Address 601 6th Avenue

City State Zip Code
Des Moines IA 50334-0001

FEC ID number of contributing federal political committee. **C** C00367524

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: A-C13245

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Associated Milk Producers Inc. Political Action Committee

Mailing Address PO Box 455

City State Zip Code
New Ulm MN 56073-0455

FEC ID number of contributing federal political committee. **C** C00330696

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: A-C13262

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 53
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Basin Electric Power Cooperative PAC

Mailing Address 1717 E Interstate Avenue

City Bismarck State ND Zip Code 58503-0542

FEC ID number of contributing federal political committee. **C** C00220269

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 24 / 2008
Transaction ID: A-C13205
Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
Beef PAC (TEXAS CATTLE FEEDERS PAC)

Mailing Address 5501 W Interstate 40

City Amarillo State TX Zip Code 79106-4617

FEC ID number of contributing federal political committee. **C** C00015552

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 27 / 2008
Transaction ID: A-C13217
Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
Build Political Action Committee of the National Association of Home Builders

Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: A-C13258
Amount of Each Receipt this Period: 5000.00

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

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
ComPAC

Mailing Address Mutual of Omaha Plaza

City Omaha State NE Zip Code 68175

FEC ID number of contributing federal political committee. **C** C00103572

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 03 / 2008
Transaction ID: A-C13272
 Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
DEPAC (DAIRY EDUCATION POLITICAL ACTION COMMITTEE)

Mailing Address PO Box 909700

City Kansas City State MO Zip Code 64190-9700

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: 10 / 31 / 2008
Transaction ID: A-C13260
 Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 50 F Street NW Suite 900

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 10 / 27 / 2008
Transaction ID: A-C13218
 Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 53

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
FERT PAC (THE POLITICAL ACTION COMMITTEE OF THE FERTILIZER INSTITUTE)

Mailing Address 820 1st Street NE
Suite 430

City State Zip Code
Washington DC 20002-8037

FEC ID number of contributing federal political committee. **C** C00085910

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: A-C13196

Amount of Each Receipt this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
GMPAC

Mailing Address Number One General Mills Boulevard

City State Zip Code
Minneapolis MN 55426

FEC ID number of contributing federal political committee. **C** C00062646

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: A-C13202

Amount of Each Receipt this Period

2000.00

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

C.

Full Name (Last, First, Middle Initial)
Monsanto Citizenship Fund

Mailing Address 800 N. Lindberg Blvd.

City State Zip Code
St. Louis MO 63167

FEC ID number of contributing federal political committee. **C** C00042069

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: A-C13231

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 53
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
MUTUAL OF OMAHA COMPANIES PAC (IMPAC)

Mailing Address Mutual of Omaha Plaza

City State Zip Code
Omaha NE 68175

FEC ID number of contributing federal political committee. **C** C00094581

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: A-C13273

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
NAT'L TELECOMMUNICATIONS COOPERATIVE ASSN./TELECOMMUNICATIONS EDUCATION COM

Mailing Address 4121 Wilson Boulevard
Floor 10

City State Zip Code
Arlington VA 22203-1839

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: A-C13185

Amount of Each Receipt this Period
2500.00

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

C. Full Name (Last, First, Middle Initial)
NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address 4521 Windsor Arms Court

City State Zip Code
Annandale VA 22003-5751

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: A-C13220

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 53
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030-7400

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3150.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: A-C13225

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
NESTLE PURINA COMPANY COMMITTEE FOR GOOD GOVERNMENT (RP-PAC)

Mailing Address Checkerboard Square

City State Zip Code
St. Louis MO 63164

FEC ID number of contributing federal political committee. **C** C00087882

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: A-C13259

Amount of Each Receipt this Period
750.00

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

C. Full Name (Last, First, Middle Initial)
New York Life Political Action Committee

Mailing Address 51 Madison Avenue
Room 117M

City State Zip Code
New York NY 10010-1603

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: A-C13263

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ► **4250.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Pappas Telecasting Companies PAC
Mailing Address 500 S Chinowth Street
City Visalia State CA Zip Code 93277-1648
FEC ID number of contributing federal political committee. **C** C00383018
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt: 10 / 27 / 2008
Transaction ID: A-C13224
Amount of Each Receipt this Period: 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Principal Life Insurance Company Pac (PrinPAC)
Mailing Address 711 High Street
City Des Moines State IA Zip Code 50392-0001
FEC ID number of contributing federal political committee. **C** C00128918
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 11 / 10 / 2008
Transaction ID: A-C13285
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Time Warner Cable PAC
Mailing Address 800 Connecticut Avenue NW Suite 1200
City Washington State DC Zip Code 20006-2709
FEC ID number of contributing federal political committee. **C** C00431551
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 10 / 31 / 2008
Transaction ID: A-C13261
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 53	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) VFW- PAC, INC.		Date of Receipt																					
	Mailing Address 200 Maryland Avenue NE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	1		2	0	0	8														
	City State Zip Code Washington DC 20002-5724		Transaction ID: A-C13194																					
FEC ID number of contributing federal political committee. C C00113001		Amount of Each Receipt this Period 1300.00																						
Name of Employer Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																						
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1300.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	29550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 53
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Congressma Adrian Smith		Date of Receipt
	Mailing Address 3321 Avenue I		<input type="checkbox"/> 11a / <input type="checkbox"/> 11b / <input type="checkbox"/> 11c / <input checked="" type="checkbox"/> 11d / <input type="checkbox"/> 12 / <input type="checkbox"/> 13a / <input type="checkbox"/> 13b / <input type="checkbox"/> 15
	City	State	Zip Code
	Scottsbluff	NE	69361-4586
	FEC ID number of contributing federal political committee.		Transaction ID: A-O13234
Name of Employer Self Employed		Occupation Congressman	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="checkbox"/> Lost check for Reimbursement of Mileage <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
		3465.86	53.00

B.	Full Name (Last, First, Middle Initial) Congressma Adrian Smith		Date of Receipt
	Mailing Address 3321 Avenue I		<input type="checkbox"/> 11a / <input type="checkbox"/> 11b / <input type="checkbox"/> 11c / <input checked="" type="checkbox"/> 11d / <input type="checkbox"/> 12 / <input type="checkbox"/> 13a / <input type="checkbox"/> 13b / <input type="checkbox"/> 15
	City	State	Zip Code
	Scottsbluff	NE	69361-4586
	FEC ID number of contributing federal political committee.		Transaction ID: A-O13235
Name of Employer Self Employed		Occupation Congressman	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="checkbox"/> Lost check for reimbursement of postage <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
		3465.86	82.00

SUBTOTAL of Receipts This Page (optional)	135.00
TOTAL This Period (last page this line number only)	135.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 53
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Platte Valley National Bank

Mailing Address 1212 Circle Drive

City State Zip Code
Scottsbluff NE 69361-2790

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
865.31

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 8

Transaction ID: A-M13347

Amount of Each Receipt this Period
40.99

Interest
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	40.99
TOTAL This Period (last page this line number only)	▶	40.99

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Best Western The Normandy

Mailing Address 405 S 8th Street

City Minneapolis State MN Zip Code 55404-1026

Purpose of Disbursement
Hotel for the National Convent

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: B-S-11963
Date of Disbursement

09 / 06 / 2008

Amount of Each Disbursement this Period

701.55

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of Citi Cards(10/20/08)

B.

Full Name (Last, First, Middle Initial)
Capital Strategies D. C.

Mailing Address PO Box 1605

City Alexandria State VA Zip Code 22313-1605

Purpose of Disbursement
Fundraising: Fundraising Services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: B-E-13256
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1475.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Citi Cards

Mailing Address PO Box 688903

City Des Moines State IA Zip Code 50368-8903

Purpose of Disbursement
Other: Credit Card Payment

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: B-E-13186
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

1199.92

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional) ▶

2674.92

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) Citi Cards Mailing Address PO Box 688903 City Des Moines State IA Zip Code 50368-8903 Purpose of Disbursement Other: Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13288 Date of Disbursement 11 / 24 / 2008 Amount of Each Disbursement this Period 3797.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Original vendors exceeding reporting threshold itemized as memo transactions.
	Category/Type

B. Full Name (Last, First, Middle Initial) Complete Campaigns Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Other: Charge for Blast Email Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13173 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 59.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type

C. Full Name (Last, First, Middle Initial) Complete Campaigns Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Other: Electronic Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13193 Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 33.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3890.87
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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

<p>A. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: Electronic Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-13210</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 5.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: Electronic Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-13238</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: Campaign Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-13291</p> <p>Date of Disbursement 11 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

525.00

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Fedex Corporation <hr/> Mailing Address 942 S Shady Grove Road <hr/> City Memphis State TN Zip Code 38120-4117 <hr/> Purpose of Disbursement Overnight Shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13255 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 347.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Greener and Hook <hr/> Mailing Address 3101 Wilson Boulevard Suite 810 <hr/> City Arlington State VA Zip Code 22201-4445 <hr/> Purpose of Disbursement Advertising: Media Buy Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13187 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 92865.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Heartland Campaign Management <hr/> Mailing Address PO Box 241142 <hr/> City Omaha State NE Zip Code 68124-5142 <hr/> Purpose of Disbursement Fundraising: Fundraising Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13276 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 11385.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	104598.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Heartland Campaign Management Mailing Address PO Box 241142 City Omaha State NE Zip Code 68124-5142 Purpose of Disbursement Reimburse Postage for Direct M Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-13280 Date of Disbursement 11 / 13 / 2008 Amount of Each Disbursement this Period 836.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Heartland Public Shooting Park Mailing Address PO Box 1968 City Grand Island State NE Zip Code 68802-1968 Purpose of Disbursement Facility and Equipment for Fun Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-13198 Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 456.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Print Express Mailing Address PO Box 770 City Scottsbluff State NE Zip Code 69363-0770 Purpose of Disbursement Other: Invitations and Card Stock Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-13203 Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 1082.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2375.65

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Securenet

Transaction ID: B-E-13318
Date of Disbursement

Mailing Address 6011 Executive Boulevard
Suite 201

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

City State Zip Code
Rockville MD 20852-3805

Amount of Each Disbursement this Period

29.95

Purpose of Disbursement
Other: Electronic Processing Fee

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Securenet

Transaction ID: B-E-13349
Date of Disbursement

Mailing Address 6011 Executive Boulevard
Suite 201

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	0	8

City State Zip Code
Rockville MD 20852-3805

Amount of Each Disbursement this Period

29.95

Purpose of Disbursement
Other: Electronic Processing Fees

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Staples

Transaction ID: B-S-11973
Date of Disbursement

Mailing Address 1711 Frontage Road

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	8

City State Zip Code
Scottsbluff NE 69361-2780

Amount of Each Disbursement this Period

67.39

Purpose of Disbursement
Office Supplies

001 Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]
Subitemization of Citi Ca-
rds(10/20/08)

SUBTOTAL of Disbursements This Page (optional) ►

59.90

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 53

<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

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)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1711 Frontage Road</p> <p>City State Zip Code Scottsbluff NE 69361-2780</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11991 Date of Disbursement 10 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 40.44</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(11/24/08)</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1711 Frontage Road</p> <p>City State Zip Code Scottsbluff NE 69361-2780</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11998 Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 12.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(11/24/08)</p>
<p>C. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1711 Frontage Road</p> <p>City State Zip Code Scottsbluff NE 69361-2780</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11999 Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 21.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(11/24/08)</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11964</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 11.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11965</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 66.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11966</p> <p>Date of Disbursement 09 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 7.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11967 Date of Disbursement 09 / 12 / 2008 Amount of Each Disbursement this Period 9.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Category/Type	Category/Type

B. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11968 Date of Disbursement 09 / 12 / 2008 Amount of Each Disbursement this Period 14.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Category/Type	Category/Type

C. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11969 Date of Disbursement 09 / 20 / 2008 Amount of Each Disbursement this Period 12.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Category/Type	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11970</p> <p>Date of Disbursement 09 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 13.24</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11971</p> <p>Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 21.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11974</p> <p>Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 15.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11975</p> <p>Date of Disbursement 09 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 13.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11976</p> <p>Date of Disbursement 09 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 12.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11977</p> <p>Date of Disbursement 09 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 12.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(10/20/08)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11978
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

12.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of Citi Cards(10/20/08)

B.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11979
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

15.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of Citi Cards(10/20/08)

C.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11980
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

15.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of Citi Cards(10/20/08)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11981
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

15.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of Citi Cards(10/20/08)

B.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11982
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

15.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of Citi Cards(10/20/08)

C.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11983
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

15.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of Citi Cards(10/20/08)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER:
(check only one)

<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

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)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11984 Date of Disbursement 09 / 28 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 16.34
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11985 Date of Disbursement 09 / 28 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 16.34
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11987 Date of Disbursement 10 / 04 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 8.60
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11988 Date of Disbursement 10 / 04 / 2008 Amount of Each Disbursement this Period 8.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Category/Type	Category/Type

B. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11989 Date of Disbursement 10 / 04 / 2008 Amount of Each Disbursement this Period 8.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Category/Type	Category/Type

C. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11990 Date of Disbursement 10 / 04 / 2008 Amount of Each Disbursement this Period 11.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(10/20/08)
	Category/Type	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11992 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="11.58"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11995 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="11.95"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-12000 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="8.58"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

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 Page

FOR LINE NUMBER:
(check only one)

<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

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)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-12001 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="8.75"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-12002 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="9.24"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-12003 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="9.36"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-12004 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="11.39"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-12005 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="83.44"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-12006 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="10"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="9.92"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(11/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-12007</p> <p>Date of Disbursement 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 12.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(11/24/08)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-12008</p> <p>Date of Disbursement 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 13.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(11/24/08)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-12010</p> <p>Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 25.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(11/24/08)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 43 / 53

<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

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)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-12011 Date of Disbursement 10 / 29 / 2008 Amount of Each Disbursement this Period 47.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(11/24/08)
B.	Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address 201 2nd St City Melbeta State NE Zip Code 69355 Purpose of Disbursement Postage Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13226 Date of Disbursement 10 / 24 / 2008 Amount of Each Disbursement this Period 131.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address 201 2nd St City Melbeta State NE Zip Code 69355 Purpose of Disbursement BRE for Direct Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-13227 Date of Disbursement 10 / 24 / 2008 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

381.95

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 201 2nd St</p> <p>City Melbeta State NE Zip Code 69355</p> <p>Purpose of Disbursement Postage for Election Night Inv</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: B-E-13228</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="189.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Category/Type: <input type="text" value="001"/></p> <p>Disbursement For: 2008</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wal-Mart</p> <p>Mailing Address 3322 Avenue I</p> <p>City Scottsbluff State NE Zip Code 69361-4589</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: B-S-12013</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8.66"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Category/Type: <input type="text" value="001"/></p> <p>Disbursement For: 2008</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Whitefoot Market, Inc. Catering</p> <p>Mailing Address PO Box 207</p> <p>City Boelus State NE Zip Code 68820-0207</p> <p>Purpose of Disbursement Fundraising: Food for Fundraising Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: B-E-13230</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="203.09"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Category/Type: <input type="text" value="003"/></p> <p>Disbursement For: 2008</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional)

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 Page

FOR LINE NUMBER:
(check only one)

<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

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)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Erica G Croft	Transaction ID: B-E-13264 Date of Disbursement 10 / 31 / 2008
	Mailing Address 650 County Road 75	Amount of Each Disbursement this Period 132.76
	City Hemingford State NE Zip Code 69348-3032	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Staff Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Mrs. Lenora S Gompert	Transaction ID: B-E-13265 Date of Disbursement 10 / 31 / 2008
	Mailing Address 220 Madison Avenue	Amount of Each Disbursement this Period 210.87
	City Morrill State NE Zip Code 69358-5021	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Report Preparation Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 001
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Mrs. Lenora S Gompert	Transaction ID: B-E-13279 Date of Disbursement 11 / 10 / 2008
	Mailing Address 220 Madison Avenue	Amount of Each Disbursement this Period 144.50
	City Morrill State NE Zip Code 69358-5021	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: Mileage Reimbursement Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	488.13
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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Lenora S Gompert

Mailing Address 220 Madison Avenue

City Morrill State NE Zip Code 69358-5021

Purpose of Disbursement
Report Preparation
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: B-E-13282
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

210.87

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Mrs. Lenora S Gompert

Mailing Address 220 Madison Avenue

City Morrill State NE Zip Code 69358-5021

Purpose of Disbursement
Other: General Election Bonus
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: B-E-13287
Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

1483.71

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Mr. John R Hoehne

Mailing Address 3221 Sunset Drive

City North Platte State NE Zip Code 69101-6330

Purpose of Disbursement
Administrative/Salary/Overhead: Salary
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: B-E-13275
Date of Disbursement

11 / 05 / 2008

Amount of Each Disbursement this Period

1026.74

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2721.32

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) Mr. John R Hoehne Mailing Address 3221 Sunset Drive City North Platte State NE Zip Code 69101-6330 Purpose of Disbursement Other: General Election Bonus Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-13286 Date of Disbursement 11 / 19 / 2008
	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) Congressma Adrian Smith Mailing Address 3321 Avenue I City Scottsbluff State NE Zip Code 69361-4586 Purpose of Disbursement Other: Reimburse Lost Mileage Check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-13252 Date of Disbursement 10 / 29 / 2008
	Amount of Each Disbursement this Period 53.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) Congressma Adrian Smith Mailing Address 3321 Avenue I City Scottsbluff State NE Zip Code 69361-4586 Purpose of Disbursement Reimburse Lost Postage Check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-13253 Date of Disbursement 10 / 29 / 2008
	Amount of Each Disbursement this Period 82.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1135.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Congressma Adrian Smith

Transaction ID: B-E-13299
Date of Disbursement

Mailing Address 3321 Avenue I

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	8

City State Zip Code
Scottsbluff NE 69361-4586

Amount of Each Disbursement this Period

219.96

Purpose of Disbursement
Travel: Reimburse for Mileage for Camp
Candidate Name

002

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Congressma Adrian Smith

Transaction ID: B-E-13301
Date of Disbursement

Mailing Address 3321 Avenue I

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	8

City State Zip Code
Scottsbluff NE 69361-4586

Amount of Each Disbursement this Period

26.61

Purpose of Disbursement
Travel: Reimbursement For Food on Camp
Candidate Name

002

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ►

246.57

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

119490.06

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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

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)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Bill Sali For Congress</p> <p>Mailing Address 802 W Bannock Street Suite 208</p> <p>City Boise State ID Zip Code 83702-5839</p> <p>Purpose of Disbursement Political Contribution: Contribution</p> <p>Candidate Name Hon. William T Sali</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-13251</p> <p>Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Darren White for Congress</p> <p>Mailing Address 7208 Jefferson Street NE Suite B</p> <p>City Albuquerque State NM Zip Code 87109-4581</p> <p>Purpose of Disbursement Political Contribution: Contribution</p> <p>Candidate Name Mr. Darren White</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-13241</p> <p>Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Dave Reichert Committee</p> <p>Mailing Address PO Box 53322</p> <p>City Bellevue State WA Zip Code 98015-3322</p> <p>Purpose of Disbursement Political Contribution: Contribution</p> <p>Candidate Name Hon. Dave Reichert</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-13229</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 50 / 53

<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

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)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Guthrie for Congress</p> <p>Mailing Address PO Box 9639</p> <p>City Bowling Green State KY Zip Code 42102-9639</p> <p>Purpose of Disbursement Political Contribution: Contribution</p> <p>Candidate Name Hon Steve B Guthrie</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-13242</p> <p>Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Jeb Bradley for Congress</p> <p>Mailing Address 645 S Main Street</p> <p>City Wolfeboro State NH Zip Code 03894-4419</p> <p>Purpose of Disbursement Political Contribution: Contribution</p> <p>Candidate Name Hon. Joseph Bradley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-13240</p> <p>Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Lou Barletta for Congress</p> <p>Mailing Address 8 W Broad Street</p> <p>City Hazleton State PA Zip Code 18201-6424</p> <p>Purpose of Disbursement Political Contribution: Contribution</p> <p>Candidate Name Hon. Lou Barletta</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-13239</p> <p>Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Lummis For Congress	Transaction ID: B-E-13248 Date of Disbursement 10 / 29 / 2008
	Mailing Address 2015 Central Avenue Suite 200	Amount of Each Disbursement this Period 1000.00
	City Cheyenne State WY Zip Code 82001-3754	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Political Contribution: Contribution Candidate Name Ms. Cynthia Lummis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		011 Category/Type

B.	Full Name (Last, First, Middle Initial) Mario Diaz-Balart for Congress	Transaction ID: B-E-13243 Date of Disbursement 10 / 29 / 2008
	Mailing Address 95 Merrick Way Suite 250	Amount of Each Disbursement this Period 1000.00
	City Coral Gables State FL Zip Code 33134-5314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Political Contribution: Contribution Candidate Name Hon. Mario Diaz-Balart Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 25 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		011 Category/Type

C.	Full Name (Last, First, Middle Initial) Steve Chabot for Congress	Transaction ID: B-E-13246 Date of Disbursement 10 / 29 / 2008
	Mailing Address 3339 Harrison Avenue	Amount of Each Disbursement this Period 1000.00
	City Cincinnati State OH Zip Code 45211-5500	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Political Contribution: Contribution Candidate Name Mr. Steve Chabot Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		011 Category/Type

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Stivers For Congress

Mailing Address 81 S 5th Street

City Columbus State OH Zip Code 43215-4323

Purpose of Disbursement
Political Contribution: Contribution

Candidate Name
Mr. Steve Stivers

Office Sought: House
 Senate
 President

State: OH District: 15

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B-E-13274
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Thelma Drake for Congress

Mailing Address PO Box 61480

City Virginia Beach State VA Zip Code 23466-1480

Purpose of Disbursement
Political Contribution: Contribution

Candidate Name
Ms. Thelma Drake

Office Sought: House
 Senate
 President

State: VA District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B-E-13247
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Virgil Goode For Congress

Mailing Address 235 S Main Street

City Rocky Mount State VA Zip Code 24151-1708

Purpose of Disbursement
Political Contribution: Contribution

Candidate Name
Hon. Virgil Goode

Office Sought: House
 Senate
 President

State: VA District: 05

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B-E-13250
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 Page

FOR LINE NUMBER: (check only one)

<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

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)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Walberg For Congress	Transaction ID: B-E-13233 Date of Disbursement
	Mailing Address 6769 Teachout Road	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Tipton State MI Zip Code 49287-9807	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution: Lost Check	<input type="text" value="-1000.00"/>
	Candidate Name Walberg For Congress	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="011"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Walberg For Congress	Transaction ID: B-E-13254 Date of Disbursement
	Mailing Address 6769 Teachout Road	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Tipton State MI Zip Code 49287-9807	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution: Contribution	<input type="text" value="1000.00"/>
	Candidate Name Hon. Timothy Walberg	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Category/Type <input type="text" value="011"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) William Russell For Congress	Transaction ID: B-E-13249 Date of Disbursement
	Mailing Address PO Box 630	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Johnstown State PA Zip Code 15907-0630	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution: Contribution	<input type="text" value="1000.00"/>
	Candidate Name Mr. William Russell	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Category/Type <input type="text" value="011"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="14000.00"/>