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### REPORT OF RECEIPTS **AND DISBURSEMENTS**

PONIVI 3	For An Aut	horized Com	mittee		Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT		cample: If typing, er the lines.	type 12FE4M5	
MANN FOR CONGRE	SS				ı
ADDRESS (number and street)	PO BOX 1084				
<b>V</b>					
Check if different than previously reported. (ACC)	SALINA			KS KS	67402-1084
O FEO IDENTIFICATION N	IIMPED W	CITY ▲		STATE ▲	ZIP CODE ▲
2. FEC IDENTIFICATION N  C C00460659		3. IS THIS REPORT	x NEW (N)	OR AMEND (A)	STATE ▼ DISTRICT  KS 01
4. TYPE OF REPORT (Cr	noose One) (b	o) 12-Day <b>PRE</b>	-Election Report	for the:	
(a) Quarterly Reports:		П	Primary (12P)	General (1	2G) Runoff (12R)
April 15 Quarterly	Report (Q1)	H		and the second	
July 15 Quarterly F	Report (Q2)	ш	Convention (120	C) Special (1	2S)
Cotober 15 Quarte		Election on	M M /	D D / Y Y Y	in the State of
January 31 Year-E	nd Report (YE)	30-Day <b>POS</b>	<b>ST</b> -Election Repor	t for the:	
			General (30G)	Runoff (30	OR) Special (30S)
Termination Report	t (TER)	Election on		D D / Y Y Y Y	in the State of
5. Covering Period	M / D D / V	2019	through	M M / D D /	Y Y Y Y Y 2019
I certify that I have examined the Type or Print Name of Treasure	KNOPF, JUSTIN		nowledge and bel	ief it is true, correct and	d complete.
KNO Signature of Treasurer	OPF, JUSTIN, J., ,		[Electronically File	d] Date	/ D D / Y Y Y Y Y Y 15 2019
NOTE: Submission of false, erron	eous, or incomplete i	nformation may	subject the person	signing this Report to th	ne penalties of 52 U.S.C. §30109
Office					· · · · · · · · · · · · · · · · · · ·
Use Only					FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name MANN FOR CONGRESS

2019 2019 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 256272.00 256272.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 256272.00 256272.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 2968.15 2968.15 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 2968.15 2968.15 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 253503.85 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 148609.10 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

(Carry Total to Line 24, page 4).....

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256472.00

Write or Type Committee Name

#### MANN FOR CONGRESS

07 09 01 2019 30 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 249600.00 249600.00 (i) Itemized (use Schedule A)..... 5672.00 5672.00 (ii) Unitemized ..... (iii) TOTAL of contributions 255272.00 255272.00 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 1000.00 1000.00 (such as PACs) ..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 256272.00 256272.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 200.00 200.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 200.00 200.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

256472.00

#### **DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

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**COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 2968.15 2968.15 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 0.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) ..... TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS ...... 22. TOTAL DISBURSEMENTS 2968.15 2968.15 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 0.00 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 256472.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 256472.00 25. SUBTOTAL (add Line 23 and Line 24)..... 2968.15 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 253503.85 (subtract Line 26 from Line 25).....

Use separate schedule(s) for each category of the

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Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) KENSINGER, ELISABETH, A.,, Date of Receipt Mailing Address 3205 SW 33RD CT. 30 City State Zip Code Transaction ID: A929D982C929A46D1966 KS 66614-2605 **TOPEKA** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Name of Employer Occupation **HOMEMAKER HOMEMAKER** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) WEIGAND JR., NESTOR, , , Date of Receipt Mailing Address 150 N MARKET ST 2019 09 20 City State Zip Code Transaction ID: ACE96157A3A14468180F **WICHITA** KS 67202 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1500.00 Name of Employer Occupation J.P. WEIGAND AND SONS, INC. CHAIRMAN AND CEO Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 1500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MICHAELIS, MIKE, , , Date of Receipt Mailing Address 1531 FOLIAGE CT. 26 City State Zip Code Transaction ID: A77D7897F217E47DAB47 KS **WICHITA** 67206 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation PRESIDENT AND CEO **EMPRISE BANK** Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General 2000.00 Other (specify) 4500.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) BERKLEY, KENT, , , Date of Receipt Mailing Address 837 A FAIRDALE RD. 27 City State Zip Code Transaction ID: A974B2F4DAA5446128B7 KS 67401-8423 **SALINA** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation THE BENNINGTON STATE BANK **CHAIRMAN** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) BUCKMAN, BERNIE, , , Date of Receipt Mailing Address 1604 LAKE KNOLL DR. 2019 09 20 City State Zip Code Transaction ID: A838D86D369FC4605B22 LAKE ST. LOUIS MO 63367 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **BUCKMAN WIRE AND CABLE OWNER** Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) FLOYD, CLINT, , , Date of Receipt Mailing Address P.O. BOX 540 28 City State Zip Code Transaction ID: A066F83E1D49245808C4 **JOHNSON** KS 67855 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **ATTORNEY** FLOYD LAW OFFICE LLC Memo Item Receipt For: 2020 Election Cycle-to-Date General Primary Other (specify) -250.00 1000.00 SUBTOTAL of Receipts This Page (optional).....

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

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NAME OF COMMITTEE (In Full)

MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial) AWERKAMP, LOUISE, A.,			Date of Receipt
Mailing Address PO BOX 62			09 30 2019
City SAINT MARYS	State KS	Zip Code 66536-0062	Transaction ID : AE44D97F317DC4E9D8FA
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 2800.00
Name of Employer THE ONYX COLLECTION Receipt For: 2020	Occupation OWNER	e to D-t-	Memo Item
Primary General Other (specify) ▼	Election Cycl	e-to-Date <b>▼</b> 2800.00	
Full Name (Last, First, Middle Initial)  AWERKAMP, INGER, , ,			Date of Receipt
Mailing Address 812 LOCUST ST	100	7.0	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SAINT MARYS	State KS	Zip Code 66536-1835	Transaction ID : A0C62850474E74E408D9
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 2800.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER		Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycl	e-to-Date <b>2800.00</b>	
Full Name (Last, First, Middle Initial) BEATTY, MIKE, , ,			Date of Receipt
Mailing Address 121 OVERHILL RD.	01-1	7:p Code	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SALINA	State KS	Zip Code 67401	Transaction ID : A1270F68343C0413B901
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED		500.00
Receipt For: 2020	Election Cycl	e-to-Date ▼ 500.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			6100.00
TOTAL This Period (last page this line numb	ner only)		

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) AWERKAMP, ROBERT, J.,, Date of Receipt Mailing Address 807 W CLAY ST 30 City State Zip Code Transaction ID: A1C73FF884DAA4A8284E KS 66536-1842 SAINT MARYS FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2800.00 Name of Employer Occupation THE ONYX COLLECTION MANUFACTURING Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 2800.00 Other (specify) Full Name (Last, First, Middle Initial) AWERKAMP, FRANCIS, , , Date of Receipt Mailing Address 807 LINN ST 2019 09 30 City State Zip Code Transaction ID: A37B5B725D42A4914AFA SAINT MARYS KS 66536-1830 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation THE ONYX COLLECTION **OWNER** Memo Item Receipt For: 2020 Election Cycle-to-Date **✗** Primary General 2800.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) POLIFKA, DAVE, , , Date of Receipt Mailing Address 7024 CO RD P City State Zip Code Transaction ID: A54A9E8252C0042E0852 KS QUINTER 67752 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **FARMER SELF** Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General Other (specify) 250.00 5850.00

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

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**Detailed Summary Page** 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) NELSON, RON, , , Date of Receipt Mailing Address 111 W 10TH, PO BOX 1019 13 City State Zip Code Transaction ID: A8CD0E571B4344394BB7 KS 67601 HAYS FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Name of Employer Occupation DOWNING-NELSON OIL CO., INC. **PRESIDENT** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) STEWART, JUSTIN, , , Date of Receipt Mailing Address <sub>1345</sub> CO. RD 82 2019 09 26 City State Zip Code Transaction ID: AE317B43720A24AD7801 QUINTER KS 67752 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **RETIRED** RETIRED Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 250.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) ARMSTRONG, JAY, , , Date of Receipt

4528 BOURBON RD			09	12	2019
City MUSCOTAH	State KS	Zip Code 66058	Transaction	ID : A296B	2E60FCFC471DACF
FEC ID number of contributing federal political committee.	С		Amount of	f Each Rece	eipt this Period
Name of Employer	Occupation				500.00
ARMSTRONG FARMS	FARMER			,	,
Receipt For: 2020  Primary General  Other (specify)	Election Cycl	e-to-Date   500.00	Memo	o Item	
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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) AWERKAMP, ROBERT, , , Date of Receipt Mailing Address 812 LOCUST ST 30 City State Zip Code Transaction ID: A592B336869CD4C5BB9C KS 66536-1835 SAINT MARYS FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2800.00 Name of Employer Occupation THE ONYX COLLECTION **OWNER** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 2800.00 Other (specify) Full Name (Last, First, Middle Initial) HILL, JUSTIN, , , Date of Receipt Mailing Address 735 BROADVIEW DR 2019 09 30 City State Zip Code Transaction ID: A48613120AD0E471296D **LAWRENCE** KS 66044 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation LAWRENCE PAPER COMPANY **PRESIDENT** Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) ZIMMER, DAVID, , , Date of Receipt Mailing Address P.O. BOX 411299 City State Zip Code Transaction ID: A9509CA3DFBA14B51939 KANSAS CITY MO 64141 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation ZIMMER REAL ESTATE SERVICES COMMERCIAL REAL ESTATE Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General 1000.00 Other (specify) -4800.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) NORWOOD, JIM, , , Date of Receipt Mailing Address 21950 COUNTY ROAD P 27 City State Zip Code Transaction ID: A0506CC05537B466C81B MO 64098 WESTON FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation **RETIRED RETIRED** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) SANDLIAN, COLBY, , , Date of Receipt Mailing Address 435 N BROADWAY, STE 201 2019 09 26 City State Zip Code Transaction ID: AD4A8220EFE4F4375B71 **WICHITA** KS 67202 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation SANDLIAN REALTY REAL ESTATE INVESTOR Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 2800.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MANN, TARA JO, , , Date of Receipt Mailing Address 2829 CRESTHAVEN DR 09 City State Zip Code Transaction ID: A4417A554098B42E7846 **GRAPEVINE** TX 76051 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation ADMINISTRATIVE ASSISTANT CORE FELLOWSHIP Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General 2800.00 Other (specify) 5850.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) WEBB, DAVID, , , Date of Receipt Mailing Address 5201 BUENA VISTA ST. 26 City State Zip Code Transaction ID: ABA1A519F6FE14B94889 KS 66205-2323 **ROELAND PARK** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Name of Employer Occupation CANDLESTICK MANAGEMENT REAL ESTATE BROKER Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) BRYAN, TIMOTHY, J.,, Date of Receipt Mailing Address 310 W. PALMER STREET 2019 09 30 City State Zip Code Transaction ID: A2FB52CC368C648F2A0C SAINT MARYS KS 66536-1624 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation **STUDENT** STUDENT Memo Item Receipt For: 2020 Election Cycle-to-Date **✗** Primary General 2500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MICHAELIS, MATTHEW, A.,, Date of Receipt Mailing Address 1002 N LINDEN CIR 30 City State Zip Code Transaction ID: A3E245EAF01684639BAC KS **WICHITA** 67206-4001 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **EMPRISE BANK** CHAIRMAN AND CEO Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General Other (specify) 500.00 4000.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) HOLTHUS, JOHN, , , Date of Receipt Mailing Address 1020 N. MAIN 26 City State Zip Code Transaction ID: ADF0B0B2DC7E641C5B54 KS 67460 **MCPHERSON** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation FOUR SEASONS REALTORS OWNER/BROKER Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) BAUER, KYLE, , , Date of Receipt Mailing Address 2211 STARDUST DRIVE 2019 09 26 City State Zip Code Transaction ID: A01BC5A87B5324AE08E7 **CLAY CENTER** KS 67432 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation TAYLOR COMMUNICATIONS INC. **PRESIDENT** Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MURFIN, DAVID, L., , Date of Receipt Mailing Address 900 N LINDEN STREET 30 City State Zip Code Transaction ID: AFADC398388D34745BC7 KS **WICHITA** 67206 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation CEO MURFIN DRILLING COMPANY, INC. Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General 1000.00 Other (specify)

FEC ID number of contributing

General

federal political committee.

Name of Employer

SELF-EMPLOYED

Receipt For: 2020

Primary

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

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Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) MCKNIGHT, TRENTON, R.,, Date of Receipt Mailing Address PO BOX 123 30 City State Zip Code Transaction ID: A4DF1A34316E44C0E8D9 TX **THROCKMORTON** 76483-0123 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2800.00 Name of Employer Occupation **SELF AGRICULTURE** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 2800.00 Other (specify) Full Name (Last, First, Middle Initial) BICKLE, DON, , , Date of Receipt Mailing Address 3511 FAIRWAY DR 2019 09 30 # B City State Zip Code Transaction ID: A58859306F5874815A42 **HAYS** KS 67601-1546 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation FEDERATED AUTO PARTS WAREHOUSE **CHAIRMAN** Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) BRIGGS, WILLIAM, , , Date of Receipt Mailing Address 810 COUNTY ROAD 50 City State Zip Code Transaction ID: AF45D679AD7BC424F9C7 KS **GOVE** 67736

C

Occupation FARMER

Election Cycle-to-Date

250.00

Amount of Each Receipt this Period

Memo Item

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Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) OSTERINK, BRUCE, , , Date of Receipt Mailing Address 226 BENJAMIN AVE SE 27 City State Zip Code Transaction ID: A776A1EFD4E234C4CB1B MI **GRAND RAPIDS** 49506 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation **RETIRED RETIRED** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) AWERKAMP, SHANNON, , , Date of Receipt Mailing Address 807 LINN ST 2019 09 30 City State Zip Code Transaction ID: A0151F99E390E4F5D864 SAINT MARYS KS 66536-1830 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation **HOMEMAKER HOMEMAKER** Memo Item Receipt For: 2020 Election Cycle-to-Date **✗** Primary General 2800.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MCVICKER, EARL, , , Date of Receipt Mailing Address 2900 LUCILLE City State Zip Code Transaction ID: A2FBC254F88DE4A3AADC **HUTCHINSON** KS 67502 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **CENTRAL BANK & TRUST BANKER** Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General Other (specify) 250.00 3550.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS		
Full Name (Last, First, Middle Initial) LACKAMP, DON, , ,  Mailing Address 103 E PINE MEADOW COURT  City ANDOVER  FEC ID number of contributing federal political committee.  Name of Employer RETIRED  Receipt For: 2020  Primary General Other (specify)  Other (specify)	State Zip Code KS 67002  C  Occupation RETIRED  Election Cycle-to-Date   500.00	Date of Receipt  09 26 2019  Transaction ID : AC86211FD75BD4F59A72  Amount of Each Receipt this Period  500.00  Memo Item
Full Name (Last, First, Middle Initial)  CLOUD, STEPHEN, R., MR.,  Mailing Address 8820 VISTA DR  City  LENEXA  FEC ID number of contributing federal political committee.  Name of Employer  IBT, INC.  Receipt For: 2020  X Primary General  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code KS 66220  C  Occupation COB  Election Cycle-to-Date   2800.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
HOWARD, KENNETH, , ,  Mailing Address 5129 BUENA VISTA STREET  City ROELAND PARK  FEC ID number of contributing federal political committee.  Name of Employer SELF  Receipt For: 2020  Primary Other (specify)	State KS Code 66205  C Occupation COUNSELOR Election Cycle-to-Date	Date of Receipt  M M M / D D / 2019  Transaction ID : A9EEE481B679F417FA10  Amount of Each Receipt this Period  500.00  Memo Item
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of	<u> </u>	3800.00

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	NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) OLSEN, LINDSAY, , , Mailing Address 5200 WEST 94TH TERRACE			Date of Receipt  09 24 2019
	City	State	Zip Code	Transaction ID : A7F491F974DD54F289B3
	PRAIRIE VILLAGE	KS	66207	_
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer MORTGAGE INVESTMENT TRUST CORPOR!	Occupation PRESIDENT		1000.00
	Receipt For: 2020  x Primary General  Other (specify) ▼	Election Cycle	e-to-Date ▼ 1000.00	Memo Item  EARMARKED (NON-DIRECTED) THROUGH WIN RED
В.	Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
υ.	Mailing Address PO BOX 9891			09 / 24 / 2019
	City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID: A63D0C309073C446DA8D
	FEC ID number of contributing federal political committee.	C C0069	4323	Amount of Each Receipt this Period
	Name of Employer	Occupation		1000.00
	Receipt For: 2020  x Primary General Other (specify) ▼	Election Cycle	e-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
<u> </u>	Full Name (Last, First, Middle Initial) DINGS, MARK, , ,			Date of Receipt
U.	Mailing Address PO BOX 3849			09 26 2019
	City APACHE JUNCTION	State AZ	Zip Code 85117	Transaction ID : A59B3F40C0B58491BB8A
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer RETIRED	Occupation RETIRED		2800.00
	Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle	e-to-Date ▼ 2800.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN RED
S	SUBTOTAL of Receipts This Page (optional)			3800.00

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 26 City State Zip Code Transaction ID: A408028684B6B450291B VA **ARLINGTON** 22219-1891 FEC ID number of contributing Amount of Each Receipt this Period C00694323 federal political committee. 2800.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY Primary General 47697.00 Other (specify) TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) WINGER, MELVIN, , , Date of Receipt Mailing Address 5250 N ROAD H 2019 09 26 City State Zip Code Transaction ID: AE927FFB797A741188C7 **JOHNSON** KS 67855 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 11200.00 Name of Employer Occupation SELF-EMPLOYED **FARMER** Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 5600.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) WINGER, MELVIN, , , Date of Receipt Mailing Address 5250 N ROAD H 26 City State Zip Code Transaction ID: A34166D37EA5D4AB5885 **JOHNSON** KS 67855 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **FARMER** SELF-EMPLOYED x Memo Item Receipt For: 2020 Election Cycle-to-Date REDESIGNATION FROM Primary General 5600.00 Other (specify) 11200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pone name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS		
Full Name (Last, First, Middle Initial) WINGER, MELVIN, , , Mailing Address 5250 N ROAD H		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : A9C0A384FB728499AB1C
JOHNSON	KS 67855	Transaction is . ASOUASOTI BI 20433ABTO
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 2800.00
Name of Employer	Occupation	2000.00
SELF-EMPLOYED	FARMER	Memo Item
Receipt For: 2020  Primary   General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	REDESIGNATION TO
Full Name (Last, First, Middle Initial) WINGER, MELVIN, , ,  Mailing Address 5250 N ROAD H		Date of Receipt
Walling Address 5250 N ROAD H		09 26 2019
City	State Zip Code	Transaction ID : ADA68304EE4834F9E889
JOHNSON	KS 67855	Transaction ib . ADA00304EE4034F9E009
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	- 2800.00
SELF-EMPLOYED	FARMER	Mana Ham
Receipt For: 2020	Election Cycle-to-Date ▼ 5600.00	REATTRIBUTION FROM
Full Name (Last, First, Middle Initial) WINGER, MELVIN, , ,		Date of Receipt
Mailing Address 5250 N ROAD H		09 26 2019
City JOHNSON	State Zip Code KS 67855	Transaction ID : A2CE8E3928DEA4DF6992
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	- 2800.00
SELF-EMPLOYED	FARMER	
Receipt For: 2020  X Primary General	Election Cycle-to-Date	Memo Item     REATTRIBUTION FROM
Other (specify) ▼	5600.00	
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or for commercial purposes, other than using	g the name and a	ddress of any political commit	tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial) WINGER, MONA, , ,  Mailing Address 5250 N ROAD H  City JOHNSON  FEC ID number of contributing federal political committee.  Name of Employer NONE	State KS  C  Occupation HOUSEWIF		Date of Receipt  09 26 2019  Transaction ID : AEA402020B6304E3FADF  Amount of Each Receipt this Period  2800.00
Receipt For: 2020  Primary   General  Other (specify) ▼	Election Cy	cle-to-Date ▼ 5600.00	REATTRIBUTION TO
B. Full Name (Last, First, Middle Initial) WINGER, MONA, , , Mailing Address 5250 N ROAD H			Date of Receipt  09 26 2019
City JOHNSON FEC ID number of contributing	State KS	Zip Code 67855	Transaction ID : A7448F9BA96964FB6BC4  Amount of Each Receipt this Period
Receipt For: 2020  X Primary General Other (specify) ▼	Occupation HOUSEWIF	E cle-to-Date   5600.00	Z Memo Item REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  MENDON, TODD, , ,  Mailing Address 7505 NALL AVE  City  PRAIRIE VILLAGE	State KS	Zip Code 66208-4762	Date of Receipt    M
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer  MENDON CONSULTING, LLC  Receipt For: 2020	Occupation COMMERCI Election Cy	AL REAL ESTATE BROKER cle-to-Date  500.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN REI
SUBTOTAL of Receipts This Page (optional	)		500.00
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A. VAN COURT, PHILLIP, , ,  Mailing Address 2524 STONEPOST LANE  City SALINA  FEC ID number of contributing federal political committee.  Name of Employer SCOULAR  Receipt For: 2020  ▼ Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) WIN RED  WIN RED	Zip Code 67401	Date of Receipt  09 17 2019  Transaction ID : ADD115068B7B94760957  Amount of Each Receipt this Period  1000.00  Memo Item  EARMARKED (NON-DIRECTED) THROUGH WIN
SALINA  FEC ID number of contributing federal political committee.  Name of Employer SCOULAR  Receipt For: 2020  ▼ Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) WIN RED	67401	Amount of Each Receipt this Period  1000.00  Memo Item
FEC ID number of contributing federal political committee.  Name of Employer SCOULAR  Receipt For: 2020  Primary Other (specify)   Full Name (Last, First, Middle Initial) WIN RED	le-to-Date ▼	Amount of Each Receipt this Period  1000.00  Memo Item
rederal political committee.  Name of Employer SCOULAR Receipt For: 2020		1000.00 Memo Item
SCOULAR  Receipt For: 2020		Memo Item
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) WIN RED		
WIN RED		•
		Date of Receipt
Mailing Address PO BOX 9891		09 17 2019
City State ARLINGTON VA	Zip Code 22219-1891	Transaction ID : A653A3B0D22604E9F811
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period	
Name of Employer  Receipt For: 2020	le-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Full Name (Last, First, Middle Initial) HARTMAN, WINK, , ,		Date of Receipt
Mailing Address 10500 E BERKELEY SQUARE PKWY		09 20 2019
City State WICHITA KS	Zip Code 67206-6815	Transaction ID : A9404BC49E49D4622A80
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Occupation HARTMAN OIL OWNER		5600.00
Receipt For: 2020	le-to-Date ▼ 5600.00	Memo Item

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federal political committee.	C		Amount of Each Receipt this Period					
Name of Employer  HARTMAN OIL  Receipt For: 2020  Primary  General  Other (specify)	Occupation OWNER Election Cycl	e-to-Date <b>V</b>	Memo Item REDESIGNATION TO					
Full Name (Last, First, Middle Initial) FOOTE, MICHELLE, , ,  Mailing Address PO BOX 416  City HOXIE	State KS	Zip Code 67740-0416	Date of Receipt  M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D					
FEC ID number of contributing federal political committee.  Name of Employer SELF Receipt For: 2020     Primary  General  Other (specify)	Occupation FARMING Election Cycl	e-to-Date	Amount of Each Receipt this Period  2800.00  Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN RED					

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۹.	Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
٠.	Mailing Address PO BOX 9891			09 29 2019
	City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A2AC1F27C0B5745FFAE0
	FEC ID number of contributing federal political committee.	C C006	594323	Amount of Each Receipt this Period
	Name of Employer	Occupation		2800.00
	Receipt For: 2020  x Primary General	Election Cyc	le-to-Date ▼	Memo Item     INTERMEDIARY
	Other (specify) ▼	L.,	47697.00	TOTAL EARMARKED THROUGH CONDUIT. PALIMIT NOT AFFECTED.
3.	Full Name (Last, First, Middle Initial) NAIRN, WARD, , ,			Date of Receipt
_	Mailing Address PO BOX 101			09 26 2019
	City JOHNSON	State KS	Zip Code 67855	Transaction ID : A30B85CA1DF9544B8B09
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation OWNER		11200.00
	GOLDEN RULE, INC.  Receipt For: 2020   Primary  General  Other (specify)	_	ele-to-Date  5600.00	Memo Item
_	Full Name (Last, First, Middle Initial) NAIRN, WARD, , ,			Date of Receipt
j.	Mailing Address PO BOX 101			09 26 2019
	City JOHNSON	State KS	Zip Code 67855	Transaction ID : AAB7793BCA7F740FE826
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer GOLDEN RULE, INC.	Occupation OWNER		- 2800.00
	Receipt For: 2020  X Primary General Other (specify)	Election Cyc	ele-to-Date   5600.00	X Memo Item REDESIGNATION FROM

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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS		
Full Name (Last, First, Middle Initial)  NAIRN, WARD, , ,  Mailing Address PO BOX 101		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	
JOHNSON	KS 67855	Transaction ID : A86A82051B1A845B686D
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	2800.00
GOLDEN RULE, INC.	OWNER	Memo Item
Receipt For: 2020  Primary   General  Other (specify) ▼	Election Cycle-to-Date   5600.00	REDESIGNATION TO
Full Name (Last, First, Middle Initial)  NAIRN, WARD, , ,  Mailing Address PO BOX 101		Date of Receipt
maming / radioses PO BOX 101		09 26 2019
City	State Zip Code	Transaction ID : A6F2F86CF319C48F0B20
JOHNSON	KS 67855	Transaction is . Act 21 coci of 50-701 cb2c
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	- 2800.00
GOLDEN RULE, INC.	OWNER	
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	REATTRIBUTION FROM
Full Name (Last, First, Middle Initial) NAIRN, WARD, , ,		Date of Receipt
Mailing Address PO BOX 101		09 26 2019
City JOHNSON	State Zip Code KS 67855	Transaction ID : ACB065D6CAFE445F8849
FEC ID number of contributing federal political committee.	C 67633	Amount of Each Receipt this Period
Name of Employer GOLDEN RULE, INC.	Occupation OWNER	- 2800.00
Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date   5600.00	▼ Memo Item  REATTRIBUTION FROM
SUBTOTAL of Receipts This Page (option	onal)	0.00
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x Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION TO** Primary ✗ General 5600.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) BEACHNER, GARY, , , Date of Receipt Mailing Address 901 WILLOWBROOK ROAD 24 City State Zip Code Transaction ID: A91CC89B594D34E3F8FA **PARSONS** KS 67357-3406 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **BUSINESSMAN BEACHNER COMPANIES** Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED Primary General 500.00 Other (specify)

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

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

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

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) **WIN RED** Date of Receipt Mailing Address PO BOX 9891 23 City State Zip Code Transaction ID: A2AFF16DFF60D48D88D2 VA 22219-1891 ARLINGTON FEC ID number of contributing Amount of Each Receipt this Period C00694323 federal political committee. 500.00 Occupation Name of Employer

	Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cycle	e-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
В.	Full Name (Last, First, Middle Initial) BORCK, LEE, , , Mailing Address 1412 PENROSE PL			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MANHATTAN	State KS	Zip Code 66503-9813	Transaction ID: A832F3B59BFC9450F9B4
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer AMERICAN STATE BANK	Occupation CHAIRMAN		5600.00 Memo Item
	Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle	5600.00	
<u> </u>	Full Name (Last, First, Middle Initial) BORCK, LEE, , ,			Date of Receipt
	Mailing Address 1412 PENROSE PL  City	State	Zip Code	09
	MANHATTAN	KS	66503-9813	Transaction ID: A0F2D4A2011E64F78BB2
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer AMERICAN STATE BANK	Occupation CHAIRMAN		- 2800.00
	Receipt For: 2020    X   Primary   General     Other (specify)   \( \psi \)	Election Cycle	9-to-Date ▼ 5600.00	REDESIGNATION FROM
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$\overline{\ \ }$	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MANN FOR CONGRESS	Traine and add	areas or any pointed communic	SO TO SOME SOME BUILDING HOME SUCH COMMITTEES.
١.	Full Name (Last, First, Middle Initial) BORCK, LEE, , , Mailing Address 1412 PENROSE PL			Date of Receipt  09 28 2019
	City	State	Zip Code	09 28 2019 Transaction ID : A2DFBA8E8A15649E88D0
	MANHATTAN	KS	66503-9813	Transaction iD : AZDFBA6E6A13649E66D0
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer AMERICAN STATE BANK	Occupation CHAIRMAN		2800.00
	Receipt For: 2020  Primary   General  Other (specify) ▼	Election Cycl	e-to-Date \$\infty\$ 5600.00	Memo Item REDESIGNATION TO
_	Full Name (Last, First, Middle Initial) HILL, BRUCE, , ,			Date of Receipt
-	Mailing Address 5111 BROADWAY			09 10 2019
	City SAN ANTONIO	State TX	Zip Code 78209	Transaction ID : A1664C0A84CF64D9B867
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		500.00
	SELF	INVESTOR		
	Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycl	e-to-Date   500.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN R
_	Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
	Mailing Address PO BOX 9891			09 10 2019
	City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A4B520B266EAB48EFB11
	FEC ID number of contributing federal political committee.	C C0069	94323	Amount of Each Receipt this Period
	Name of Employer	Occupation		500.00
	Receipt For: 2020  X Primary General	Election Cycl	e-to-Date	Memo Item INTERMEDIARY
	Other (specify) ▼		47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
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ITEMIZED RECEIPTS **Detailed Summary Page** 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) DALKE, DELORES, , , Date of Receipt Mailing Address 112 N WILSON ST 18 City State Zip Code Transaction ID: A29FDB33A6486414CAF4 KS **HILLSBORO** 67063-1651 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Occupation Name of Employer REAL ESTATE CENTER INC. **BROKER** Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED **x** Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 2019 09 18 City State Zip Code Transaction ID: A80235A5D35524008A1C **ARLINGTON** VA 22219-1891 FEC ID number of contributing C C00694323 Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation x Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY **★** Primary General 47697.00 Other (specify) ▼ TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) STOVER, TODD, , , Date of Receipt Mailing Address 2905 W. 71ST ST. 24 City State Zip Code Transaction ID: A2A6D0D65BF2648C3B62 PRAIRIE VILLAGE KS 66208 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **INSURANCE BROKER** LOCKTON Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED Primary General 500.00 Other (specify) SUBTOTAL of Receipts This Page (optional).....

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) **WIN RED** Date of Receipt Mailing Address PO BOX 9891 25 City State Zip Code Transaction ID: A46313219F23D42F4822 VA **ARLINGTON** 22219-1891 FEC ID number of contributing Amount of Each Receipt this Period C00694323 federal political committee. 500.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY Primary General 47697.00 Other (specify) TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) VANIER, JOHN, , , Date of Receipt Mailing Address 900 BARLOW DRIVE 2019 09 20 City State Zip Code Transaction ID: A0666443CA33E4AD9A99 **SALINA** KS 67401 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation INVESTMENTS/AGRICULTURE WESTERN STAR AG RESOURCES Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED x Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 20 City State Zip Code Transaction ID: A6B5605D50EC64B75963 ARLINGTON VA 22219-1891 FEC ID number of contributing C C00694323 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY Primary General Other (specify) 47697.00 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) MORRISON, EDGAR, , ,			Date of Receipt
<i>,</i>	Mailing Address 409 CANTERBURY HILL			09 09 2019
	City SAN ANTONIO	State TX	Zip Code 78209	Transaction ID: A9B9DDB6AE35741B4924
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer JACKSON WALKER LLP	Occupation ATTORNEY		250.00
	Receipt For: 2020  x Primary General Other (specify) ▼	Election Cyc	cle-to-Date ▼ 250.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN RED
В.	Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
D.	Mailing Address PO BOX 9891			09 09 2019
	City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A128C4C077831495FA0F
	FEC ID number of contributing federal political committee.	C C006	694323	Amount of Each Receipt this Period
	Name of Employer	Occupation		250.00
	Receipt For: 2020  x Primary General  Other (specify) ▼	· · ·	cle-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
<u> </u>	Full Name (Last, First, Middle Initial) SIMMONS, MCKITTRICK, , ,			Date of Receipt
٠.	Mailing Address 2879 RIVERMEADE DRIVE			09 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ATLANTA	State GA	Zip Code 30327	Transaction ID : A2E27854674D24D7386E
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 13 City State Zip Code Transaction ID: AFAC88E0D146040E2B96 VA ARLINGTON 22219-1891 FEC ID number of contributing Amount of Each Receipt this Period C00694323 federal political committee. 250.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY Primary General 47697.00 Other (specify) TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) MORRISON, ROGER, , , Date of Receipt Mailing Address 210 GREENWAY ROAD 24 2019 09 City State Zip Code Transaction ID: A61530BFD19EE4588BB8 67401-3534 **SALINA** KS FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 5600.00 Name of Employer Occupation MORRISON VENTURES **BUSINESS MANAGER** Memo Item Receipt For: 2020 Election Cycle-to-Date x Primary General 2800.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MORRISON, ROGER, , , Date of Receipt Mailing Address 210 GREENWAY ROAD 24 City State Zip Code Transaction ID: ADE1C1E86A97C4A5E879 KS **SALINA** 67401-3534 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **BUSINESS MANAGER** MORRISON VENTURES ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date REATTRIBUTION FROM Primary General 2800.00 Other (specify) 5600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS		
Full Name (Last, First, Middle Initial) MORRISON, SISSY, , ,		Date of Receipt
Mailing Address 210 GREENWAY ROAD		09 24 2019
City SALINA	State         Zip Code           KS         67401-3534	Transaction ID : ACB42E8DCDBE945CFB90
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer HOMEMAKER	Occupation HOMEMAKER	2800.00 X Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date   2800.00	REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  CROSSLAND, IVAN, , ,  Mailing Address 19 NE 60TH ST		Date of Receipt
City	State Zip Code	09 26 2019  Transaction ID : AE4283CF2207444298B5
COLUMBUS  EEC ID number of contributing	KS 66725	-
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer CROSSLAND CONSTRUCTION COMPANY	Occupation CEO	5600.00 Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	wemo nem
Full Name (Last, First, Middle Initial) CROSSLAND, IVAN, , ,		Date of Receipt
Mailing Address 19 NE 60TH ST		09 26 2019
City COLUMBUS	State Zip Code KS 66725	Transaction ID : AB5C6649F0DAD4954ACC
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer  CROSSLAND CONSTRUCTION COMPANY  Receipt For: 2020	Occupation CEO  Election Cycle-to-Date  5600.00	— 2800.00  Memo Item  REDESIGNATION FROM
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ITEMIZED RECEIPTS 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) NELSON, JULIA, J., , Date of Receipt Mailing Address 1304 W FOX RD 30 City State Zip Code Transaction ID: AFA24CE82D22E444C8DF KS LONG ISLAND 67647 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2800.00 Name of Employer Occupation **VALLEY FEED FARMER** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION TO** Primary 🗶 General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) NELSON, JULIA, J.,, Date of Receipt Mailing Address 1304 W FOX RD 2019 09 30 City State Zip Code Transaction ID: A26ADE96F09E14894A35 LONG ISLAND KS 67647 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **VALLEY FEED FARMER** x Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION FROM** x Primary General 5600.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) NELSON, JULIA, J.,, Date of Receipt Mailing Address 1304 W FOX RD 30 City State Zip Code Transaction ID: A04094122E70F473D942 LONG ISLAND KS 67647 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **FARMER VALLEY FEED** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION FROM** Primary General 5600.00 Other (specify)

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		person for the purpose of soliciting contributions are to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS		
Full Name (Last, First, Middle Initial) NELSON, CLARKE, S., ,  Mailing Address 1304 W. FOX RD.  City LONG ISLAND  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Receipt For: 2020  Primary General Other (specify)  Other (specify)	State Zip Code KS 67647  C  Occupation FARMER  Election Cycle-to-Date   5600.00	Date of Receipt  M M M / D D / Y Y Y Y  O9 30 2019  Transaction ID : AF702C2EE7CC14B37978  Amount of Each Receipt this Period  2800.00  X Memo Item REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  NELSON, CLARKE, S., ,  Mailing Address 1304 W. FOX RD.  City  LONG ISLAND  FEC ID number of contributing federal political committee.  Name of Employer  SELF-EMPLOYED  Receipt For: 2020  Primary	State Zip Code KS 67647  C  Occupation FARMER  Election Cycle-to-Date   5600.00	Date of Receipt  09 30 2019  Transaction ID: AF89B4DF0F8EC47BB89C  Amount of Each Receipt this Period  2800.00  x Memo Item REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  NELSON, TERRY, , ,  Mailing Address 1304 W FOX RD  City LONG ISLAND  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Receipt For: 2020  X Primary General Other (specify) V	State Zip Code KS 67647  C  Occupation FARMER  Election Cycle-to-Date   5600.00	Date of Receipt  M M M / 30 / 2019  Transaction ID : AC1BD80847B124148B22  Amount of Each Receipt this Period  11200.00  Memo Item  RE-ATTRIBUTION REQUESTED
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NAME OF COMMITTEE (In Full)

MANN FOR CONGRESS

MANN FOR CONGRÉSS		
Full Name (Last, First, Middle Initial)  NELSON, TERRY, , ,  Mailing Address 1304 W FOX RD		Date of Receipt
City LONG ISLAND	State Zip Code KS 67647	09 30 2019  Transaction ID : AEF558E1C69BB46C28B1
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer SELF-EMPLOYED  Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Occupation FARMER  Election Cycle-to-Date   5600.00	— 2800.00  Memo Item  REDESIGNATION FROM
Full Name (Last, First, Middle Initial)  NELSON, TERRY, , ,  Mailing Address 1304 W FOX RD  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
LONG ISLAND	KS 67647	Transaction ID : A1C203144DB3F48D5B17
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer SELF-EMPLOYED	Occupation FARMER	2800.00 x Memo Item
Receipt For: 2020  Primary   General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	REDESIGNATION TO
Full Name (Last, First, Middle Initial)  NELSON, TERRY, , ,  Mailing Address 1304 W FOX RD		Date of Receipt
		09 30 2019
City LONG ISLAND	State Zip Code KS 67647	Transaction ID : A8A197AE920234618A70
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer SELF-EMPLOYED	Occupation FARMER	- 2800.00
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date  5600.00	Memo Item  REATTRIBUTION FROM
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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) NELSON, TERRY, , , Date of Receipt Mailing Address 1304 W FOX RD 30 City State Zip Code Transaction ID: A942E88C4CB304644B3F KS LONG ISLAND 67647 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. -2800.00Name of Employer Occupation SELF-EMPLOYED **FARMER** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date REATTRIBUTION FROM **x** Primary General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) NELSON, MARCIA, , , Date of Receipt Mailing Address 1304 W FOX RD 2019 09 30 City State Zip Code Transaction ID: AA5E90195B88F4A96A25 LONG ISLAND KS 67647 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation **HOMEMAKER HOMEMAKER** x Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION TO** Primary ✗ General 5600.00 Other (specify) ▼

Full Name (Last, First, Middle Initial) NELSON, MARCIA, , , Date of Receipt Mailing Address 1304 W FOX RD 30 City State Zip Code Transaction ID: A5C62720E48F1477A993 LONG ISLAND KS 67647 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation **HOMEMAKER HOMEMAKER** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION TO** Primary General 5600.00 Other (specify)

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) BACCUS, STEVE, , , Date of Receipt Mailing Address 707 N 3RD AVE 25 City State Zip Code Transaction ID: A3844C478B00C49F89E0 KS 67467 **MINNEAPOLIS** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation NOT EMPLOYED NOT EMPLOYED Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED **x** Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 25 2019 09 City State Zip Code Transaction ID: ACD96EB767467440E9EA **ARLINGTON** VA 22219-1891 FEC ID number of contributing C C00694323 Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation x Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY **✗** Primary General 47697.00 Other (specify) ▼ TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) WRIGHT, MICHAEL, , DR., Date of Receipt Mailing Address 2752 THUNDERBIRD CIR 30 City State Zip Code Transaction ID: A1918E15102CC4D938CF KS HAYS 67601 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **PHYSICIAN RAH** Memo Item Receipt For: 2020 Election Cycle-to-Date

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 30 City State Zip Code Transaction ID: A95D800E5C0AF49A7A83 VA 22219-1891 **ARLINGTON** FEC ID number of contributing Amount of Each Receipt this Period C00694323 federal political committee. 250.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY Primary General 47697.00 Other (specify) TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) EGAN, MIKE, , , Date of Receipt Mailing Address 4655 OSAGE BEACH PKWY 2019 09 30 City State Zip Code Transaction ID: AEB6052A3CEA9485AA43 OSAGE BEACH MO 65065-2663 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation SELF-EMPLOYED SALES Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED **✗** Primary General 500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 30 City State Zip Code Transaction ID: AC8623669BD254FDAA05 ARLINGTON VA 22219-1891 FEC ID number of contributing C C00694323 Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY Primary General Other (specify) 47697.00 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. 500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) FLOYD, DIANE, , , Date of Receipt Mailing Address 6601 E. RD. 5 10 City State Zip Code Transaction ID: A7FF1A500F0CD461A8FB KS **JOHNSON** 67855 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 5600.00 Name of Employer Occupation **SELF** FARMER, BUSINESS Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) FLOYD, DIANE, , , Date of Receipt Mailing Address 6601 E. RD. 5 2019 09 20 City State Zip Code Transaction ID: AE5FA5FDEEB6D41CB800 **JOHNSON** KS 67855 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **SELF** FARMER, BUSINESS x Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION FROM ✗** Primary General 5600.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) FLOYD, DIANE, , , Date of Receipt Mailing Address 6601 E. RD. 5 20 City State Zip Code Transaction ID: A43665A3D6C604E4B93A **JOHNSON** KS 67855 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation FARMER, BUSINESS **SELF** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION TO** Primary ✗ General 5600.00 Other (specify) 5600.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) ZUMBEHL, GLENN, , , Date of Receipt Mailing Address 11609 NORWOOD 25 City State Zip Code Transaction ID: A40BF7D0E5E014EEA8F6 66211 KS LEAWOOD FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation SELF-EMPLOYED **REAL ESTATE AGENT** Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED Primary General 2800.00 Other (specify) Full Name (Last, First, Middle Initial) В.

WIN RED		Date of Receipt				
Mailing Address PO BOX 9891			09 25 2019			
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A3D2183B9AB704DFBA8E			
FEC ID number of contributing federal political committee.	C C0069	94323	Amount of Each Receipt this Period			
Name of Employer	Occupation		2800.00			
Receipt For: 2020	Election Cyc	le-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.			
Full Name (Last, First, Middle Initial) FOOTE, SCOTT, , , Mailing Address PO BOX 416			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City HOXIE	State KS	Zip Code 67740	Transaction ID : A3C09192E7D664A3FB67			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer  FOOTE CATTLE COMPANY, LLC  Receipt For: 2020  X Primary General  Other (specify)	Occupation OWNER Election Cyc	le-to-Date ▼	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN RED			
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MANN FOR CONGRESS  Full Name (Last, First, Middle Initial)			
A. WIN RED			Date of Receipt
Mailing Address PO BOX 9891			09 29 2019
City	State	Zip Code	Transaction ID : A06563E72128F4DAEB18
ARLINGTON	VA	22219-1891	_
FEC ID number of contributing federal political committee.	C C006	94323	Amount of Each Receipt this Period
Name of Employer	Occupation		2800.00
Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cycl	le-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Full Name (Last, First, Middle Initial)  HUTTON, MARK, , ,			Date of Receipt
Mailing Address 3015 FLINT HILLS NATL PI	KY		09 24 2019
City ANDOVER	State KS	Zip Code 67002	Transaction ID : AEFD8D92894304BCF91C
FEC ID number of contributing federal political committee.	С	01002	Amount of Each Receipt this Period
Name of Employer	Occupation		500.00
HUTTON	CEO EMERIT		Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycl	le-to-Date ====================================	EARMARKED (NON-DIRECTED) THROUGH WIN RE
Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
Mailing Address PO BOX 9891			09 24 2019
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID: A82775AB26D17492FA6A
FEC ID number of contributing federal political committee.	C C006	94323	Amount of Each Receipt this Period
Name of Employer	Occupation		500.00
Receipt For: 2020  X Primary General	Election Cycl	le-to-Date	Memo Item INTERMEDIARY
Other (specify) ▼	L,	47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) NAIRN, MARJORIE, , , Date of Receipt Mailing Address P.O. BOX 486 26 City State Zip Code Transaction ID: A8E1A5CFA91B34CC6B45 KS 67855-0486 **JOHNSON** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 5000.00 Name of Employer Occupation L & N PUMP INC **PARTNER** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) NAIRN, MARJORIE, , , Date of Receipt Mailing Address P.O. BOX 486 2019 09 26 City State Zip Code Transaction ID: AFE327E2C1DA84FD2946 **JOHNSON** KS 67855-0486 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2200.00Name of Employer Occupation L & N PUMP INC **PARTNER** x Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION FROM** x Primary General 5000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) NAIRN, MARJORIE, , , Date of Receipt Mailing Address P.O. BOX 486 26 City State Zip Code Transaction ID: A082C41D6C2E549BF9A6 **JOHNSON** KS 67855-0486 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2200.00 Name of Employer Occupation **PARTNER** L & N PUMP INC Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION TO** Primary ✗ General 5000.00 Other (specify) 5000.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) UNDERWOOD, RYAN, , , Date of Receipt Mailing Address 19739 E. 75TH STREET N 17 City State Zip Code Transaction ID: A137395754FB546F78D9 OK 74055 **OWASSO** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation **TEAMTRI** CEO Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED **x** Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 2019 09 City State Zip Code Transaction ID: A0181EDFC63CA408EAC0 **ARLINGTON** VA 22219-1891 FEC ID number of contributing C C00694323 Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation x Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY **✗** Primary General 47697.00 Other (specify) ▼ TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) HAMBELTON, LISA, , , Date of Receipt Mailing Address 11771 W KELLOFF DR 26 City State Zip Code Transaction ID: AE6AB376C7AA94B93AF6 KS **WICHITA** 67209 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation **OWNER** MEL HAMBELTON FORD Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED Primary General 1000.00 Other (specify) SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial) LEAR, SUE, , , Mailing Address 5618 SADDLEBROOKE L	ANE		Date of Receipt
City LOHMAN	State MO	Zip Code 65053	09 26 2019  Transaction ID : AC782F222AD7E4F7BA76
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer NONE	Occupation HOUSEWIF		2800.00
Receipt For: 2020  Primary   General  Other (specify) ▼	Election Cy	vcle-to-Date ▼ 5600.00	REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  LEAR, SUE, , ,  Mailing Address 5618 SADDLEBROOKE L	ANF		Date of Receipt
City LOHMAN	State	Zip Code 65053	09 26 2019  Transaction ID : A61A3B2EB9C6F457F9A2
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer NONE	Occupation HOUSEWIF		2800.00
Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cy	vcle-to-Date ▼ 5600.00	REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  PILKINGTON, JOHN, , ,			Date of Receipt
Mailing Address PO BOX 457  City	State	Zip Code	09 / 26 / 2019
QUINTER	KS	67752	Transaction ID : A542CBCE2FE0E4030897
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer SELF	Occupation INSURANC	E AGENT	250.00 Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cy	vcle-to-Date ▼ 250.00	EARMARKED (NON-DIRECTED) THROUGH WIN REI
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ITEMIZED RECEIPTS 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) HEMMER, TOM, , , Date of Receipt Mailing Address 22 CRESTVIEW DR 27 City State Zip Code Transaction ID: A47A8C7B0C2B04048808 KS 67401 **SALINA** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2800.00 Name of Employer Occupation SOLOMON CORPORATION **PRESIDENT** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date REDESIGNATION TO Primary 🗶 General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) HEMMER, TOM, , , Date of Receipt Mailing Address 22 CRESTVIEW DR 2019 09 27 City State Zip Code Transaction ID: A32F024D09B4741238D7 **SALINA** KS 67401 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **SOLOMON CORPORATION PRESIDENT** x Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION FROM x** Primary General 5600.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) HEMMER, TOM, , , Date of Receipt Mailing Address 22 CRESTVIEW DR City State Zip Code Transaction ID: A0E3F801736E44E82898 KS **SALINA** 67401 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **PRESIDENT SOLOMON CORPORATION** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION FROM** Primary General

5600.00

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

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or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MANN FOR CONGRESS	ne name and add	pointed committee	
Full Name (Last, First, Middle Initial) HEMMER, MARGARET, , ,  Mailing Address 214 GREENWAY			Date of Receipt  09 27 2019
City	State	Zip Code	09 27 2019 Transaction ID : A7D8F419C55554C80A87
SALINA	KS	67401	Transaction id . Arbor419C55554CouAor
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer SELF Receipt For: 2020	Occupation CONSULTAN Election Cycle		Z800.00  Memo Item REATTRIBUTION TO
Y Primary General Other (specify) ▼	-	5600.00	
Full Name (Last, First, Middle Initial)  HEMMER, MARGARET, , ,			Date of Receipt
Mailing Address 214 GREENWAY			09 27 2019
City SALINA	State KS	Zip Code 67401	Transaction ID : A3F45959D506041DF9FA
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation		2800.00
SELF	CONSULTANT	г	
Receipt For: 2020	Election Cycle	e-to-Date 🔻	REATTRIBUTION TO
Primary <b>x</b> General  Other (specify) ▼	9	5600.00	REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  EGAN, DONNA, , ,	'		Date of Receipt
Mailing Address 4655 OSAGE BEACH PKW			09 30 / Y Y Y Y Y Y Y
City OSAGE BEACH	State MO	Zip Code 65065-2663	Transaction ID : A43C89C50E9E34C1BAF3
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED		500.00
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle	9-to-Date ▼ 500.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN R
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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial) WIN RED Mailing Address PO BOX 9891			Date of Receipt
City ARLINGTON	State VA	09 30 2019  Transaction ID : AC7142125796A42279D5	
FEC ID number of contributing federal political committee.	C C006	94323	Amount of Each Receipt this Period
Name of Employer	Occupation		500.00
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cyc	le-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Full Name (Last, First, Middle Initial)  CLAWSON, DAVID, , ,  Mailing Address PO BOX 146			Date of Receipt
City ENGLEWOOD	State KS	09 30 2019  Transaction ID : A52893963CEFD48ADA06	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer SELF	Occupation FARMER		1000.00  Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cyc	le-to-Date ▼ 1000.00	EARMARKED (NON-DIRECTED) THROUGH WIN RED
Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
Mailing Address PO BOX 9891		17. 0.1	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : ADF35E59A784448EFAEF
FEC ID number of contributing federal political committee.	C C006	94323	Amount of Each Receipt this Period
Name of Employer	Occupation		1000.00
Receipt For: 2020  X Primary General	Memo Item     INTERMEDIARY		
Other (specify) ▼		47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
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NAME OF COMMITTEE (In Full)

MANN FOR CONGRESS

Full Name (Last First Middle Initial)

_	Full Name (Last, First, Middle Initial) HAYNES, JANIS, , ,		
Α.	Mailing Address 2435 EDGEMONT		Date of Receipt  09 30 2019
	City	Transaction ID : A870DBCB9ACFD4687BE6	
	ARKANSAS CITY	KS 67005	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer NOT EMPLOYED	Occupation NOT EMPLOYED	2800.00
	Receipt For: 2020    ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date  2800.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN RE
В.	Full Name (Last, First, Middle Initial) WIN RED		Date of Receipt
	Mailing Address PO BOX 9891		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ARLINGTON	State         Zip Code           VA         22219-1891	Transaction ID : ABD80DB70813C464083A
	FEC ID number of contributing federal political committee.	C C00694323	Amount of Each Receipt this Period
	Name of Employer	Occupation	2800.00
	Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼  47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
_	Full Name (Last, First, Middle Initial) BATMAN, STEPHEN, , ,		Date of Receipt
C.	Mailing Address 6902 GASTON AVE		09 30 2019
	City DALLAS	State         Zip Code           TX         75214-3801	Transaction ID : AFEE1AA5227034E8DB7C
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer RETIRED	Occupation RETIRED	500.00
	Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date  500.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN REI
		l)	3300.00

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or for commercial purposes, other than using			e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS					
Full Name (Last, First, Middle Initial) WIN RED Mailing Address PO BOX 9891			Date of Receipt		
City	State	Zip Code	09 30 2019		
ARLINGTON	VA	22219-1891	Transaction ID : A2C1BEDE94C1B4B3792E		
FEC ID number of contributing federal political committee.	C C00694	1323	Amount of Each Receipt this Period		
Name of Employer	Occupation		500.00		
Receipt For: 2020  x Primary General  Other (specify) ▼	Election Cycle-	-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.		
Full Name (Last, First, Middle Initial)  B. HAMPTON, FRANK, , ,			Date of Receipt		
Mailing Address 589 UPPER MILL HEIGHTS	S DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City SALINA	State KS	Zip Code 67401	Transaction ID : A1A9FD4345F7B4842943		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Name of Employer	Occupation		500.00		
HAMPTON FINANCIAL	FINANCIAL AD	VISOR			
Receipt For: 2020    ✓ Primary General  Other (specify) ▼	Election Cycle-	-to-Date	Memo Item  EARMARKED (NON-DIRECTED) THROUGH WIN		
Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt		
Mailing Address PO BOX 9891			09 26 2019		
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A71EE62D454CB41B78CE		
FEC ID number of contributing federal political committee.	<b>C</b> C00694	1323	Amount of Each Receipt this Period		
Name of Employer	Occupation		500.00		
Receipt For: 2020  Receipt For: General	Election Cycle-	-to-Date ▼	Memo Item INTERMEDIARY		
Other (specify)		47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.		
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	d Statements may not be sold or used by any p the name and address of any political committee					
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS						
Full Name (Last, First, Middle Initial) FLOYD, GARY, , ,  Mailing Address 1800 N. RD. I		Date of Receipt  09 26 2019				
City	State Zip Code					
JOHNSON	KS 67855	Transaction ID : A3B8776AF25D64AA4AC6				
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period  11200.00				
Name of Employer	Occupation	11200.00				
SELF	FARMER	Memo Item				
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	I Ivierno item				
Full Name (Last, First, Middle Initial)  FLOYD, GARY, , ,  Mailing Address 1800 N. RD. I		Date of Receipt				
1800 N. RD. I		09 26 2019				
City	State Zip Code	Transaction ID : AC3A39A191A2641DF8D8				
JOHNSON	KS 67855	Transaction to . ACCACCAT 131AZ041DF0D0				
FEC ID number of contributing federal political committee.	FEC ID number of contributing					
Name of Employer	Occupation	- 2800.00				
SELF	FARMER	Mana Ita ::				
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	REDESIGNATION FROM				
Full Name (Last, First, Middle Initial)  FLOYD, GARY, , ,		Date of Receipt				
Mailing Address <sub>1800</sub> N. RD. I		09 26 2019				
City	State Zip Code	Transaction ID : ABDDADC78FB99464DB15				
JOHNSON	KS 67855					
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period				
Name of Employer SELF	Occupation FARMER	2800.00				
Receipt For: 2020	Election Cycle-to-Date	✗ Memo Item				
Primary   ✓ General  Other (specify)   ✓	5600.00	REDESIGNATION TO				
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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS					
Full Name (Last, First, Middle Initial) FLOYD, GARY, , ,  Mailing Address 1800 N. RD. I		Date of Receipt			
City	State Zip Code	09 26 2019			
JOHNSON	KS 67855	Transaction ID : AEF3CFD2F9E3B4CF3862			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  - 2800.00			
Name of Employer	Occupation	- 2800.00			
SELF	FARMER	Memo Item			
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	REATTRIBUTION FROM			
Full Name (Last, First, Middle Initial)  3. FLOYD, GARY, , ,  Mailing Address are at ADD 1		Date of Receipt			
Mailing Address <sub>1800</sub> N. RD. I		09 26 2019			
City	State Zip Code	Transaction ID : A7DA6673EE2464238A11			
JOHNSON	KS 67855				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period - 2800.00			
Name of Employer	Occupation	- 2800.00			
SELF	FARMER	Memo Item			
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼ 5600.00	REATTRIBUTION FROM			
Full Name (Last, First, Middle Initial) FLOYD, MARLA, , ,		Date of Receipt			
Mailing Address 1800 N ROAD I		09 26 2019			
City	State Zip Code KS 67855	Transaction ID: A954D381AB39341A5A7F			
JOHNSON	KS 67855				
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period			
Name of Employer	Occupation	2800.00			
HOMEMAKER	HOMEMAKER				
Receipt For: 2020	Election Cycle-to-Date	Memo Item     REATTRIBUTION TO			
Primary General  Other (specify) ▼	5600.00	NEXT INDOTION TO			
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Receipt For: 2020

Primary

Other (specify) ▼

Full Name (Last, First, Middle Initial)

**X** General

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

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**REDESIGNATION TO** 

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5600.00

Election Cycle-to-Date

В.	ELLIOTT, BRAD, , ,	Date of Receipt							
٠.	Mailing Address <sub>1128</sub> N GLENMOOR DR			09 30 2019					
	City	State	Zip Code	Transaction ID : A6E4D2DC33145482689D					
	WICHITA	KS 67206		Transaction ib . A0L4D2DC33143402003D					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer	Occupation		5600.00					
	EQUITY BANK	CHAIRMAN A	ND CEO						
	Receipt For: 2020	e-to-Date	- Memo Item						
C.	Full Name (Last, First, Middle Initial)  ELLIOTT, BRAD, , ,  Mailing Address 1128 N GLENMOOR DR			Date of Receipt  09 30 2019					
	City WICHITA	State KS	Zip Code 67206	Transaction ID : ACD18BBCCEC3E4BEB9CI					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer EQUITY BANK	Occupation CHAIRMAN A	ND CEO	- 2800.00					
	Receipt For: 2020  X Primary General  Other (specify)	Election Cycl	e-to-Date	REATTRIBUTION FROM					
s	SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	5600.00					

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	NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) ELLIOTT, HEIDI, , , Mailing Address 1128 N GLENMOOR DR			Date of Receipt
	City	State	Zip Code	09302019 Transaction ID : ADC4C8AB17739403CACF
	WICHITA	KS	67206-4116	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer NONE	Occupation HOMEMAKER	र	2800.00
	Receipt For: 2020	Election Cycle	e-to-Date ▼ 2800.00	REATTRIBUTION TO
В.	Full Name (Last, First, Middle Initial) BRECKENRIDGE, BRUCE, , ,			Date of Receipt
	Mailing Address <sub>11064</sub> STRANG LINE ROAD			09 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LENEXA	State KS	Zip Code 66215	Transaction ID : A73EACEB8B3944ED6880
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer ENJET AERO	Occupation CEO		2800.00
	Receipt For: 2020	Election Cycle	e-to-Date ▼ 2800.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN RED
_	Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
C.	Mailing Address PO BOX 9891			09 30 2019
	City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A16CC2A3DE6F54448812
	FEC ID number of contributing federal political committee.	C C0069	94323	Amount of Each Receipt this Period
	Name of Employer	Occupation		2800.00
	Receipt For: 2020  ** Primary General	Election Cycle	e-to-Date	Memo Item INTERMEDIARY
	Other (specify) ▼	7	47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
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## SCHEDULE A (FEC Form 3)

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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) FLOYD, MARTIE, , , Date of Receipt Mailing Address 6601 E ROAD 5 10 City State Zip Code Transaction ID: A438ED89214614A2080B KS **JOHNSON** 67855-8897 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 5600.00 Name of Employer Occupation STANTON COUNTY COMMISSIONER Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) FLOYD, MARTIE, , , Date of Receipt Mailing Address 6601 E ROAD 5 2019 09 20 City State Zip Code Transaction ID: ACDA5A46B850F4FC2A7F **JOHNSON** KS 67855-8897 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation STANTON COUNTY COMMISSIONER x Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION FROM x** Primary General 5600.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) FLOYD, MARTIE, , , Date of Receipt Mailing Address 6601 E ROAD 5 20 City State Zip Code Transaction ID: A15D9D8F72C154C81B18 **JOHNSON** KS 67855-8897 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation COMMISSIONER STANTON COUNTY ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION TO** Primary ✗ General 5600.00 Other (specify) 5600.00 SUBTOTAL of Receipts This Page (optional).....

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Primary General     Other (specify) ▼	INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PA		
Full Name (Last, First, Middle Initial) BROOKOVER, FOREST TY, Mailing Address 2460 S GRANDVIEW DR  City GARDEN CITY  FEC ID number of contributing		Zip Code 67846-9624	Date of Receipt  M M J 2019  Transaction ID: AFA50F069A08D4D62B00  Amount of Each Receipt this Period
Receipt For: 2020  X Primary General  Other (specify) ▼	Occupation PARTNER Election Cyc	cle-to-Date   5600.00	5600.00  Memo Item
UBTOTAL of Receipts This Page (optional	)		8400.00

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

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) BROOKOVER, FOREST TY, , , Date of Receipt Mailing Address 2460 S GRANDVIEW DR City State Zip Code Transaction ID: A0A7BC4C9BC4949C3BB6 KS **GARDEN CITY** 67846-9624 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. -2800.00Name of Employer Occupation BROOKOVER LAND ENT. **PARTNER** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date REDESIGNATION FROM Primary General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) BROOKOVER, FOREST TY, , , Date of Receipt Mailing Address 2460 S GRANDVIEW DR 2019 09 City State Zip Code Transaction ID: AC65F42C679624EEFBEB **GARDEN CITY** KS 67846-9624 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation

BROOKOVER LAND ENT.  Receipt For: 2020  Primary	PARTNER  Election Cycle-to-Date   5600.00	Memo Item REDESIGNATION TO
Full Name (Last, First, Middle Initial) COE, RICHARD, , ,  Mailing Address 12701 E. FOUR OAKS		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WICHITA	State Zip Code KS 67226	Transaction ID : A250B95EEDC284171BCE
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer COE FINANCIAL SERVICRD	Occupation FINANCIAL ADVISOR	1000.00
Receipt For: 2020    ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date  1000.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN RED
		1000.00

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or for commercial purposes, other than using			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
Mailing Address PO BOX 9891			09 26 2019
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A07BA1AFA422946608F4
FEC ID number of contributing federal political committee.	C coo	694323	Amount of Each Receipt this Period
Name of Employer	Occupation		1000.00
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cy	cle-to-Date	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Full Name (Last, First, Middle Initial) PETERSON, PETE, , ,			Date of Receipt
Mailing Address 2527 FLOR DE SOL			09 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SALINA	State KS	Zip Code 67401	Transaction ID: A7A1292A7FB444098A54
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer CLARK, MIZE & LINVILLE, CHTD.	Occupation ATTORNEY		500.00 Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼		cle-to-Date ▼ 500.00	EARMARKED (NON-DIRECTED) THROUGH WIN RE
Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
Mailing Address PO BOX 9891			09 26 2019
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID: A30E838C6227A4824BDA
FEC ID number of contributing federal political committee.	C coo	694323	Amount of Each Receipt this Period
Name of Employer	Occupation		500.00
Receipt For: 2020  Receipt For: General	Election Cy	cle-to-Date ▼	Memo Item INTERMEDIARY
Other (specify) ▼		47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial) BANGERTER, SHANE, , ,			Date of Receipt
Mailing Address 10598 BRIARWOOD DRIVE			09 12 2019 _
City	State	Zip Code	Transaction ID : A95F75719AA0747DDAB1
DODGE CITY	KS	67801	
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer	Occupation		1000.00
BANGERTER LAW P.A.	ATTORNEY		П., .
Receipt For: 2020	Election Cyc	le-to-Date _	Memo Item  EARMARKED (NON-DIRECTED) THROUGH WIN RE
Primary General Other (specify) ▼	,	1000.00	EARMARRED (NON-DIRECTED) THROUGH WIN RE
Full Name (Last, First, Middle Initial)  WIN RED			Date of Receipt
Mailing Address PO BOX 9891			09 / 12 / Y Y Y Y Y Y
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : AB5B51FC1F233470CB5B
	VA	22219-1691	
FEC ID number of contributing federal political committee.	C C0069	94323	Amount of Each Receipt this Period
			1000.00
Name of Employer	Occupation		9
Receipt For: 2020	Floation Cyc	lo to Doto	Memo Item
ricespt 1 of 2020  Reneral  General	Election Cyc	le-to-Date	INTERMEDIARY
Other (specify) ▼		47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Full Name (Last, First, Middle Initial)  MULLIN, DENNIS, , ,			Date of Receipt
Mailing Address 1305 SHARINGBROOK DR			09 30 2019
City MANHATTAN	State KS	Zip Code 66503	Transaction ID : A0A19EB49E00A4FF8970
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation		500.00
SPS COMPANIES, INC.	CHAIRMAN		, , , , , , , , , , , , , , , , , , , ,
Receipt For: 2020	Election Cyc	le-to-Date ▼	Memo Item
	9	500.00	EARMARKED (NON-DIRECTED) THROUGH WIN RE
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			person for the purpose of soliciting contributions be to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS						
Full Name (Last, First, Middle Initial) WIN RED Mailing Address PO BOX 9891			Date of Receipt			
City	State VA	Zip Code	09 30 2019 Transaction ID : ACB28895A20BA44918D8			
ARLINGTON  FEC ID number of contributing federal political committee.		22219-1891 694323	Amount of Each Receipt this Period			
Name of Employer	Occupation		500.00			
Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cy	cle-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.			
Full Name (Last, First, Middle Initial)  MAXWELL, KORB, , ,  Mailing Address 5527 E MISSION DR			Date of Receipt			
City MISSION HILLS	State KS	Zip Code 66208	09 26 2019  Transaction ID : ACA4F57DAE2B34901865			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer POLSINELLI	Occupation SHAREHOL	DER	1000.00  Memo Item			
Receipt For: 2020	Election Cy	cle-to-Date ▼ 1000.00	EARMARKED (NON-DIRECTED) THROUGH WIN REI			
Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt			
Mailing Address PO BOX 9891			09 26 2019			
City ARLINGTON	State VA	Zip Code 22219-1891	Transaction ID : A89BFC2BBA45F4632A7A			
FEC ID number of contributing federal political committee.	C coo	694323	Amount of Each Receipt this Period			
Name of Employer	Occupation		1000.00			
Receipt For: 2020  X Primary General	Election Cy	cle-to-Date ▼	Memo Item INTERMEDIARY			
Other (specify) ▼		47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.			
SUBTOTAL of Receipts This Page (optional	)		1000.00			
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**SALINA** 

FEC ID number of contributing

✗ General

federal political committee.

MORRISON VENTURES

Other (specify) -

Name of Employer

Receipt For: 2020

Primary

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

Use separate schedule(s) for each category of the

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5600.00

67402

C

Occupation **PRESIDENT** 

Election Cycle-to-Date

2800.00

Amount of Each Receipt this Period

Memo Item

**REDESIGNATION TO** 

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

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) BURNS, MICHAEL, , , Date of Receipt Mailing Address 2005 CIRCLE LAKE DR 30 City State Zip Code Transaction ID: A4049EEB08F674B4BAC0 KS DODGE CITY 67801-2979 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation LANDMARK NATIONAL BANK **COMMERCIAL BANKER** Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED **x** Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) WIN RED Date of Receipt Mailing Address PO BOX 9891 2019 09 30 City State Zip Code Transaction ID: A92704516AF0F422AB9F **ARLINGTON** VA 22219-1891 FEC ID number of contributing C C00694323 Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation x Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY **★** Primary General 47697.00 Other (specify) \(\neg \) TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) AUSTIN, DAVID, , , Date of Receipt Mailing Address 8658 SW 90TH AVE 30 City State Zip Code Transaction ID: A99EF00E0D6024227894 **PORTLAND** OR 97223 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation WORLD FOOD PROGRAM DIRECTOR Memo Item Receipt For: 2020 Election Cycle-to-Date EARMARKED (NON-DIRECTED) THROUGH WIN RED Primary General 250.00 Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS	g the name and address of any political committee	5 to 555k oshingukono nom odon odnimkoo.
Full Name (Last, First, Middle Initial) WIN RED Mailing Address PO BOX 9891		Date of Receipt
City ARLINGTON	State         Zip Code           VA         22219-1891	09 30 2019  Transaction ID : A9CFFE0719405402D9E8
FEC ID number of contributing federal political committee.	C C00694323	Amount of Each Receipt this Period
Name of Employer  Receipt For: 2020	Occupation  Election Cycle-to-Date   47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC
Full Name (Last, First, Middle Initial)  DEMETREE, MARK, , ,  Mailing Address 11416 MEADOW		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LEAWOOD	State   Zip Code   KS   66211-3014	Transaction ID : A823102F83CB64846B2A
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer  DEMETREE SALT LLC  Receipt For: 2020	Occupation CHAIRMAN  Election Cycle-to-Date   5600.00	11200.00  Memo Item
Full Name (Last, First, Middle Initial)  DEMETREE, MARK, , ,  Mailing Address 11416 MEADOW  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
LEAWOOD  FEC ID number of contributing federal political committee.	KS 66211-3014	Amount of Each Receipt this Period
Name of Employer  DEMETREE SALT LLC  Receipt For: 2020	Occupation CHAIRMAN  Election Cycle-to-Date  5600.00	→ 2800.00  ✓ Memo Item  REDESIGNATION FROM
SUBTOTAL of Receipts This Page (optional	ıl)	11200.00
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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS		
Full Name (Last, First, Middle Initial) A. DEMETREE, MARK, , ,  Mailing Address 11416 MEADOW		Date of Receipt
aming / Ida 1000   11410 WEADOW		09 26 2019
City	State Zip Code	Transaction ID : A7E5BB061364540D885D
LEAWOOD	KS 66211-3014	_
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer DEMETREE SALT LLC	Occupation CHAIRMAN	2800.00
Receipt For: 2020  Primary   General  Other (specify) ▼	Election Cycle-to-Date   5600.00	─ ★ Memo Item  REDESIGNATION TO
Full Name (Last, First, Middle Initial)  DEMETREE, MARK, , ,  Mailing Address 11416 MEADOW		Date of Receipt
		09 26 2019
City LEAWOOD	State Zip Code KS 66211-3014	Transaction ID : A6F05C490FDC34E008F0
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	- 2800.00
DEMETREE SALT LLC	CHAIRMAN	<b>x</b> Memo Item
Receipt For: 2020   ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date   5600.00	REATTRIBUTION FROM
Full Name (Last, First, Middle Initial) DEMETREE, MARK, , ,		Date of Receipt
Mailing Address 11416 MEADOW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LEAWOOD	State	Transaction ID : A79A817DD2266428E989
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer DEMETREE SALT LLC	Occupation CHAIRMAN	- 2800.00
Receipt For: 2020	Election Cycle-to-Date   5600.00	✗ Memo Item REATTRIBUTION FROM
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ITEMIZED RECEIPTS Detailed Summary Page 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) DEMETREE, CHRISTINA, , , Date of Receipt Mailing Address 11416 MEADOW 26 City State Zip Code Transaction ID: A06E2530901C84064869 KS LEAWOOD 66211 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2800.00 Name of Employer Occupation SELF-EMPLOYED **COMMUNITY VOLUNTEER** ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION TO x** Primary General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) DEMETREE, CHRISTINA, . . Date of Receipt Mailing Address 11416 MEADOW 2019 09 26 City State Zip Code Transaction ID: AE74710D6A6FF483E964 **LEAWOOD** KS 66211 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Occupation Name of Employer SELF-EMPLOYED COMMUNITY VOLUNTEER x Memo Item Receipt For: 2020 Election Cycle-to-Date **REATTRIBUTION TO** 🗶 General Primary 5600.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) KOENIGSFELD, STAN, , , Date of Receipt Mailing Address 6025 MEADOW RIDGE DR 12 City State Zip Code Transaction ID: AA83BC9ED03974B62B63 JEFFERSON CITY MO 65101-8835 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 5000.00 Name of Employer Occupation **RETIRED** RETIRED Memo Item Receipt For: 2020 Election Cycle-to-Date Primary General 2800.00 Other (specify)

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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS	g the name and address of any political committe	
Full Name (Last, First, Middle Initial)  KOENIGSFELD, STAN, , ,  Mailing Address 6025 MEADOW RIDGE D	R	Date of Receipt
City	State Zip Code MO 65101-8835	09 12 2019  Transaction ID : A108B7DEB33B6421EB35
JEFFERSON CITY  FEC ID number of contributing federal political committee.	MO 65101-8835	Amount of Each Receipt this Period
Name of Employer RETIRED  Receipt For: 2020	Occupation RETIRED  Election Cycle-to-Date  2800.00	— 2200.00  Memo Item REATTRIBUTION FROM
Full Name (Last, First, Middle Initial)  KOENIGSFELD, JULIA, , ,  Mailing Address 6025 MEADOW RIDGE D	R	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City JEFFERSON CITY	State Zip Code MO 65101-8835	Transaction ID : AD9ADE573F95B400596D
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer  RETIRED  Receipt For: 2020	Occupation RETIRED  Election Cycle-to-Date  2200.00	X Memo Item REATTRIBUTION TO
Full Name (Last, First, Middle Initial)  LARSON, THAYNE, , ,  Mailing Address 1325 US HIGHWAY 36		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BELLEVILLE	State Zip Code KS 66935	Transaction ID : AA3A0174BB641442285F
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer  SELF  Receipt For: 2020	Occupation FARMER  Election Cycle-to-Date  250.00	Memo Item EARMARKED (NON-DIRECTED) THROUGH WIN R
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NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial)  WIN RED  Mailing Address PO BOX 9891			Date of Receipt
City ARLINGTON	State VA	Zip Code 22219-1891	09 29 2019  Transaction ID : A75B1B18DF2E248ED9EC
FEC ID number of contributing federal political committee.	C C006	94323	Amount of Each Receipt this Period
Name of Employer	Occupation		250.00
Receipt For: 2020    ✓ Primary General  Other (specify) ▼	Election Cyc	le-to-Date ▼ 47697.00	Memo Item INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Full Name (Last, First, Middle Initial)  OLSEN, JEREMIAH, , ,  Mailing Address 143 MARKET ST			Date of Receipt
City ANNAPOLIS	State MD	Zip Code 21401-2628	09 26 2019  Transaction ID : AE2C16833AC154DAEB81
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 500.00
Name of Employer SELF-EMPLOYED Receipt For: 2020	Occupation CONSULTAN		Memo Item
Primary General Other (specify) ▼	Election Cyc	500.00	EARMARKED (NON-DIRECTED) THROUGH WIN RED
Full Name (Last, First, Middle Initial) WIN RED			Date of Receipt
Mailing Address PO BOX 9891	State	Zip Code	09 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ARLINGTON	VA	22219-1891	Transaction ID : AD39380E153E14D35B01
FEC ID number of contributing federal political committee.	C C006	94323	Amount of Each Receipt this Period
Name of Employer	Occupation		500.00
Receipt For: 2020  Primary General	Election Cyc	· · · · · · · · · · · · · · · · · · ·	Memo Item     INTERMEDIARY
Other (specify) ▼		47697.00	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) BROOKOVER, LACY, , , Date of Receipt Mailing Address 2460 S GRANDVIEW DR 25 City State Zip Code Transaction ID: A65EC3C1D73A64C81867 KS **GARDEN CITY** 67846-9624 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 5600.00 Name of Employer Occupation **HOMEMAKER HOMEMAKER** Memo Item Receipt For: 2020 Election Cycle-to-Date **x** Primary General 5600.00 Other (specify) Full Name (Last, First, Middle Initial) BROOKOVER, LACY, , , Date of Receipt Mailing Address 2460 S GRANDVIEW DR 25 2019 09 City State Zip Code Transaction ID: ACF1685387469402FB38 **GARDEN CITY** KS 67846-9624 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **HOMEMAKER HOMEMAKER** x Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION FROM ✗** Primary General

Full Name (Last, First, Middle Initial) BROOKOVER, LACY, , , Date of Receipt Mailing Address 2460 S GRANDVIEW DR 25 City State Zip Code Transaction ID: A57E3B9FACDCA43B3A63 KS **GARDEN CITY** 67846-9624 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation **HOMEMAKER HOMEMAKER** Memo Item Receipt For: 2020 Election Cycle-to-Date **REDESIGNATION TO** Primary ✗ General 5600.00 Other (specify)

5600.00

5600.00

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

FOR LINE NUMBER:					PAGE	7	<b>'</b> 5	OF	1	56	
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Any information copied from such Report or for commercial purposes, other than u						S
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS						
Full Name (Last, First, Middle Initial)  MCCLASKEY, JACKIE, , ,  Mailing Address 3031 SUNNYSIDE DR			M M			
City	State	Zip Code	09	09	2019	
MANHATTAN	KS	66502	Transactio	n ID : AF899A	17056304AF2926	
FEC ID number of contributing federal political committee.	С		Amount o	of Each Recei	pt this Period	,
Name of Employer NEW CAMPUS DEVELOPMENT	Occupation PRESIDENT		<u>ا ا ا</u>	7	500.00	_
Receipt For: 2020    ✓ Primary General  Other (specify) ▼	Election Cyc	cle-to-Date   500.00		no Item KED (NON-DI	RECTED) THROUG	iH WIN RED
Full Name (Last, First, Middle Initial)  WIN RED	<u>'</u>		Date of F	Receipt		
Mailing Address PO BOX 9891			09	09	2019	
City	State	Zip Code	Transactio	n ID : AB38B2	2BA5A6094919B19	ı
ARLINGTON	VA	22219-1891				
FEC ID number of contributing federal political committee.	C C006	94323	Amount	of Each Recei	ipt this Period	
Name of Employer	Occupation			,	500.00	
Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cyc	cle-to-Date ▼ 47697.00	INTERME TOTAL EA		HROUGH CONDUI	Г. РАС
Full Name (Last, First, Middle Initial)  GOODEN, JOSHUA, , ,	'		Date of F	Receipt		_
Mailing Address 109 W 9TH STREET			M M M 09		2019	
City SCOTT CITY	State KS	Zip Code 67871	Transactio	on ID : A52505	3E5EE754624800	
FEC ID number of contributing federal political committee.	C		Amount	of Each Recei	pt this Period	_
Name of Employer SELF-EMPLOYED	Occupation OPTOMETR	IST		,	1000.00	
Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cyc	cle-to-Date 1000.00		no Item KED (NON-DIF	RECTED) THROUG	H WIN RED
SUBTOTAL of Receipts This Page (option	nal)		<b>.</b>		1500.00	]
	·					7
TOTAL This Period (last page this line n	umber only)		<b>•</b>	7		_

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

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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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) **WIN RED** Date of Receipt Mailing Address PO BOX 9891 30 City State Zip Code Transaction ID: A17F6D73A05FC454BB33 VA 22219-1891 ARLINGTON FEC ID number of contributing Amount of Each Receipt this Period C C00694323 federal political committee. 1000.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date INTERMEDIARY Primary General 47697.00 Other (specify) TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 0.00 SUBTOTAL of Receipts This Page (optional)..... 249600.00 TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 77 OF 156 (check only one)
TEMIZED RECEIPTS		for each category of the	11a 11b X 11c 11d
		Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MANN FOR CONGRESS			
Full Name (Last, First, Middle Initial) YOPAC			Date of Receipt
Mailing Address 5631 ABERDEEN RD			09 30 2019
City	State	Zip Code	Transaction ID : A5BF583D3A620499088D
FAIRWAY	KS	66205-2610	
FEC ID number of contributing federal political committee.	C co	0497305	Amount of Each Receipt this Period
Name of Employer	Occupation	n	1000.00
Receipt For: 2020	Flection C	ycle-to-Date 🕳	Memo Item
rimary General	Election c	yole to Bate $\blacktriangledown$	
Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial)			Poly of Provide
Mailing Address			Date of Receipt
Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
FEC ID number of contributing			Associated Foots Booking His Booking
federal political committee.	C		Amount of Each Receipt this Period
Name of Employer	Occupation	1	Memo Item
Receipt For:	Election C	ycle-to-Date ▼	Wellio item
Primary General Other (specify) ▼			1
Curior (specify)		7	4
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			<u> </u>
			M M / D D / Y Y Y Y
City	State	Zip Code	
FEC ID number of contributing			
federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation	1	
Receipt For:	Election C	ycle-to-Date _	Memo Item
Primary General		· · · · · · · · · · ·	_
Other (specify) ▼		, , , , , , , , , , , , , , , , , , , ,	1

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

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

1000.00

1000.00

78 OF PAGE FOR LINE NUMBER: 156 (check only one) Use separate schedule(s) for each category of the 11a 11b 11d 11c **Detailed Summary Page** 12 13b 14

**x** | 13a 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) MANN, TRACEY, ROBERT, , Date of Receipt Mailing Address PO BOX 1084 09 City State Zip Code Transaction ID: AACE612CE846445C0B9B KS 67402-1084 **SALINA** FEC ID number of contributing Amount of Each Receipt this Period H0KS01123 federal political committee. 200.00 Name of Employer Occupation SELF-EMPLOYED REAL ESTATE INVESTOR Memo Item Receipt For: 2020 Election Cycle-to-Date PERSONAL FUNDS OF THE CANDIDATE x Primary General 200.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... 200.00 TOTAL This Period (last page this line number only).....

Candidate Name

Office Sought:

House Senate

## SCHEDULE B (FEC Form 3)

PAGE 79 156 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) WIN RED TECHNICAL SERVICES LLC Date of Disbursement 09 20 2019 Mailing Address 1776 WILSON BLVD SUITE 530 City State Zip Code **FEC Identification Number** VA ARLINGTON 22209-2515 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 Office Sought: House 50.30 Senate Primary General Transaction ID: B11AE50E170D046D2A45 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) **BEST BUY** Date of Disbursement Mailing Address 329 TUTTLE CREEK BLVD 2019 09 City State Zip Code **FEC Identification Number** KS 66502-6394 **MANHATTAN** Purpose of Disbursement OFFICE EQUIPMENT 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 437.79 Office Sought: House Senate Primary General Transaction ID: BDF20611CC33344A1B06 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. WIN RED TECHNICAL SERVICES LLC Date of Disbursement Mailing Address 1776 WILSON BLVD 09 24 2019 SUITE 530 City Zip Code State **FEC Identification Number** 22209-2515 **ARLINGTON** VA Purpose of Disbursement PROCESSING FEES 001

President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 497.89 TOTAL This Period (last page this line number only).....

General

Disbursement For: 2020

Primary

Category/ Type

Amount of Each Disbursement this Period

Transaction ID: BE5ED10D52C284A7D898

9.80

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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) MANN FOR CONGRESS Full Name (Last, First, Middle Initial) WIN RED TECHNICAL SERVICES LLC Date of Disbursement 25 2019 Mailing Address 1776 WILSON BLVD SUITE 530 Citv State Zip Code **FEC Identification Number** VA ARLINGTON 22209-2515 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 Office Sought: House 38.30 Senate Primary General Transaction ID: B8F280FE6CB3F49C3B9C Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) WIN RED TECHNICAL SERVICES LLC Date of Disbursement Mailing Address 1776 WILSON BLVD 2019 26 09 SUITE 530 City State Zip Code **FEC Identification Number** VA 22209-2515 **ARLINGTON** Purpose of Disbursement PROCESSING FEES 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 126.00 Office Sought: House Senate Primary General Transaction ID: B505879EBA65D4A03990 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. WIN RED TECHNICAL SERVICES LLC Date of Disbursement

 Mailing Address
 1776 WILSON BLVD

 SUITE 530
 State
 Zip Code

 ARLINGTON
 VA
 22209-2515

FEC Identification Number

09

001

Category/ Type

Purpose of Disbursement PROCESSING FEES Candidate Name

Amount of Each Disbursement this Period 251.70

2019

Office Sought:

House
Senate
President

State:

Disbursement For: 2020

A Primary
Other (specify)

Other (specify)

Transaction ID : B0C422C7190A24344ABD

Memo Item

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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# 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)

7 17 18 19a 19b 20c 20c 21

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NAME OF COMMITTEE (In Full)

MANN FOR CONGRESS

	NAME OF COMMITTEE (In Full)  MANN FOR CONGRESS		
A.	Full Name (Last, First, Middle Initial) WIN RED TECHNICAL SERVICES LLC  Mailing Address 1776 WILSON BLVD		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUITE 530  City State Zip Code ARLINGTON VA 22209-2518  Purpose of Disbursement PROCESSING FEES	001	FEC Identification Number
	Candidate Name  Office Sought: House Disbursement For: 2020  Senate President Other (specify) ▼  State: District:	Category/ Type	Amount of Each Disbursement this Period  256.10  Transaction ID: B0F646BF0ECAE42FB98C  Memo Item
В.	Mailing Address PO BOX 1084		Date of Disbursement  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code SALINA KS 67402-1084  Purpose of Disbursement FUNDRAISING CONSULTING  Candidate Name	003 Category/	FEC Identification Number  C  Amount of Each Disbursement this Period
	Office Sought:  Senate President  State:  Disbursement For: 2020	Туре	1500.00  Transaction ID: BB08FB6ABCB3B497F8AB  Memo Item
C.	Full Name (Last, First, Middle Initial) WIN RED TECHNICAL SERVICES LLC  Mailing Address 1776 WILSON BLVD SUITE 530		Date of Disbursement  M M M O9
	City State Zip Code ARLINGTON VA 22209-2518  Purpose of Disbursement PROCESSING FEES  Candidate Name  Office Sought: House Disbursement For: 2020	001 Category/ Type	FEC Identification Number  C  Amount of Each Disbursement this Period  38.30
_	Senate President  State:  District:  District:  District Tol. 2020  Frimary Other (specify)  Other (specify)		Transaction ID : BC741591A029247F089A  Memo Item
	SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)		2708.29

#### SCHEDULE C (FEC Form 3) **LOANS**

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

PAGE FOR LINE NUMBER: (check only one)

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> **X** 13a 13b

156

NAME OF COMMITTEE (In Full) Transaction ID: C0D47264CD03244AEA27 MANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 Memo Item Primary MANN, TRACEY, ROBERT, , General Mailing Address PO BOX 1084 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate KS 67402-1084 **SALINA** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 22500.00 25000.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>27<sup>D</sup> M 07M Ž010 NONĚ x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2500.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### SCHEDULE C (FEC Form 3) **LOANS**

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

PAGE 83 FOR LINE NUMBER: (check only one)

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156

OF

NAME OF COMMITTEE (In Full) Transaction ID: C2B582E9910F846EDA46 MANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 Memo Item Primary MANN, TRACEY, ROBERT, , General Mailing Address PO BOX 1084 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate KS 67402-1084 **SALINA** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>13<sup>D</sup> M 07M Ž010 NONĚ x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### SCHEDULE C (FEC Form 3) **LOANS**

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

PAGE 84 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: CACE612CE846445C0B9B MANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2020 Memo Item Primary MANN, TRACEY, ROBERT, , General Mailing Address PO BOX 1084 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate KS 67402-1084 **SALINA** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D09D M09M ž019 NONĚ x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 200.00 TOTALS This Period (last page in this line only) ..... 102700.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Excluding Loans** 

NA

MANN FOR CONGR	ESS		
A. Full Name (Last, First, Middle Initial) of Dimensional MANN, TRACEY, ROBERT, ,		ditor	Nature of Debt (Purpose): PO BOX RENTAL- TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	ŀ		Transaction ID : D2E6BAF9871A1453D8BF
44.00			
Amount Incurred This Period	·	Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	44.00
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Cred	litor	Nature of Debt (Purpose): CANDIDATE'S CAMPAIGN CELL PHONE - TO BE REIMBURSED
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	i		Transaction ID : D5CDFDB697A784E0597B
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	283.87
C. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,		ditor	Nature of Debt (Purpose): WEBSITE PRODUCTION - TO BE REIMBURSED
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	t		Transaction ID: D254BB99CF53344D7900
2050.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	2050.00
SUBTOTALS This Period This Page (optional	เป)		2377.87
TOTALS This Period (last page this line num	nber only) ····	)	
TOTAL OUTSTANDING LOANS from Sched	lule C (last p	page only)·····	
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PAGE 85 OF

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Excluding Loans			numbered line)	<b>                                     </b>
NAME OF COMMITTEE (In Full)			•	
MANN FOR CONGR	ESS			
A. Full Name (Last, First, Middle Initial) of D		editor		ebt (Purpose):
MANN, TRACEY, ROBERT, ,			PHOTOS I BE REIMB	FOR CAMPAIGN WEBSITE - TO URSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	d		Transacti	on ID : D60F37C2D9C2944B0949
800.00				
Amount Incurred This Period	·	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	800.00
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,  Mailing Address PO BOX 1084	ebtor or Cred	ditor		rebt (Purpose): R WEBSITE - TO BE REIMBURSED
Cit.	01-1-	7:- Cada		
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period	d		Transacti	on ID : DFB91A88084EE42BE9F6
418.73				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	418.73
C. Full Name (Last, First, Middle Initial) of DMANN, TRACEY, ROBERT, ,  Mailing Address PO BOX 1084		editor		ebt (Purpose): IAGES FOR WEBSITE - TO BE SED
PO BOX 1064				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	d		Transact	ion ID : D10E4590B19DD4AAB9B3
35.00				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	l L.	0.0	00	35.00
1) SUBTOTALS This Period This Page (optional	al)		>	1253.73
2) TOTALS This Period (last page this line num	nber only) ···			
3) TOTAL OUTSTANDING LOANS from Sched	lule C (last p	page only)		
4) ADD 2) and 3) and carry forward to approp	riate line of	Summary Page (last page o	nly) 🕨	, , ,

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PAGE 86 OF

FOR LINE NUMBER:

(check only one)

(Use separate schedule(s)

for each

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE 87 OF

	9
X	10

156

#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): SERVICE FOR CAMPAIGN PHONE - TO BE MANN, TRACEY, ROBERT, , REIMBURSED Mailing Address PO BOX 1084 State City Zip Code 67402-1084 **SALINA** KS Transaction ID: D131AB75D05A747C8A6B Outstanding Balance Beginning This Period 148.98 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 148.98 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , CELLPHONE FOR PRIMARY CAMPAIGN PHONE - TO BE REIMBURSED Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: D5347D73D60B344CAA8B 274.63 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 274.63 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , SHIPPING DATA TO WEB DEVELOPER FOR WEBSITE - TO BE REIMBURSED Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D32A1661A199E4B46B42 45.31 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 45 31 0.00 1) SUBTOTALS This Period This Page (optional) ..... 468.92 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

NAME OF COMMITTEE (In Full)

MANN FOR CONGR	ESS			
A. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,		ditor	Nature of Debt (Purpose): CAMPAIGN PHONE CHARGES - TO BE REIMBURSED	
Mailing Address PO BOX 1084			-	
City	State	Zip Code	-	
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	d		Transaction ID : D8F2CE36BEA3F496A84E	
253.79				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	253.79	
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): PRINTED CAMPAIGN MATERIALS - TO BE REIMBURSED			
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	Transaction ID : DC2583C5DFEFA4C6580A			
519.86				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	519.86	
C. Full Name (Last, First, Middle Initial) of D	ebtor or Cre	editor	Nature of Debt (Purpose):	
MANN, TRACEY, ROBERT, ,			WEBSITE HOSTING - TO BE REIMBURSED	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period	d		Transaction ID : D186CA21241EE4A08A3D	
7 7 7		Dayment This Deried	Outstanding Palance at Class of This Paviod	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	167.40	
1) SUBTOTALS This Period This Page (optional	al)		941.05	
2) TOTALS This Period (last page this line num	nber only) ····		, , , , , , , , , , , , , , , , , , , ,	
3) TOTAL OUTSTANDING LOANS from Sched	lule C (last p	page only)		
4) ADD 2) and 3) and carry forward to approp	riate line of	Summary Page (last page only)	, , , , , , , , , , , , , , , , , , , ,	

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### SCHEDULE D (FEC Form 3) DE

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CHEDULE D (FEC Form 3)			(Use separate		PAGE 89 OF 156		
DEBTS AND OBLIGATIONS			` ' '		FOR LINE NUMBER: (check only one) 9		
xcluding Loans				pered line)	(criccit offic) 3 x 10		
NAME OF COMMITTEE (In Full)							
MANN FOR CONGR	<u>ESS</u>						
A. Full Name (Last, First, Middle Initial) of Dimensional MANN, TRACEY, ROBERT, ,	ebtor or Cre	ditor			Debt (Purpose): MATERIALS - TO BE		
Mailing Address PO BOX 1084				TTE IN BOTT	020		
City SALINA	State KS	Zip Code 67402-1084					
Outstanding Balance Beginning This Period	i			Transacti	on ID : D09C56F8429854392B2C		
176.63							
Amount Incurred This Period	Amount Incurred This Period Payment This Period				Outstanding Balance at Close of This Period		
0.00		0.0	00		176.63		
9 9		7			7		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,					Debt (Purpose): - TO BE REIMBURSED		
Mailing Address PO BOX 1084							
City SALINA	State KS						
Outstanding Balance Beginning This Period	i			Transacti	on ID : DAF5F8D4A75A7439C9EE		
125.57							
Amount Incurred This Period		Payment This Period		Outstanding Balance at Close of This Period			
0.00		0.0	00		125.57		
C. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,	ebtor or Cre	ditor			Debt (Purpose): EXPENSES- TO BE REIMBURSED		
Mailing Address PO BOX 1084							
City	State	Zip Code					
SALINA	KS	67402-1084					
Outstanding Balance Beginning This Period 238.78	<b>!</b>			Transact	tion ID : DE028D1A437B74B7B8BB		
Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close of This Period		
0.00		0.0	00		238.78		
SUBTOTALS This Period This Page (optional)	ıl)		···· <b>&gt;</b>		540.98		
2) TOTALS This Period (last page this line num	nber only) ····		···· •		, ,		
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last p	age only)	···· •		, , , , , ,		
4) ADD 2) and 3) and carry forward to appropri	riate line of	Summary Page (last page or	nly) <b>&gt;</b>				

**Excluding Loans** 

NAME OF COMMITTEE (In Full)

MANN	FOR CONGR	ESS			
	e (Last, First, Middle Initial) of De TRACEY, ROBERT, ,	ebtor or Crec	litor	Nature of Debt (Purpose): CONSTANT CONTACT EMAIL SUPPORT FEE - TO BE REIMBURSED	
Mailing Addr	ess PO BOX 1084				
City		State	Zip Code	-	
SALINA		KS	67402-1084		
	ng Balance Beginning This Period 81.00			Transaction ID: D54EFD6BD2DFB4BD4980	
Am	ount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
L	0.00	L	0.00	81.00	
	e (Last, First, Middle Initial) of Del TRACEY, ROBERT, ,	Nature of Debt (Purpose): CAMPAIGN PHONE CHARGES - TO BE REIMBURSED			
Mailing Addr	ess PO BOX 1084				
City		State	Zip Code	_	
SALINA		KS	67402-1084		
Outstandin	ng Balance Beginning This Period			Transaction ID: D06D82C6D22D3431C9C7	
	313.27				
Am	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	313.27	
C. Full Nam	e (Last, First, Middle Initial) of De	ebtor or Cred	ditor	Nature of Debt (Purpose):	
,	TRACEY, ROBERT, ,			PRINTED MATERIALS - TO BE REIMBURSED	
Mailing Addr	ess PO BOX 1084				
City SALINA		State KS	Zip Code 67402-1084		
	ng Balance Beginning This Period	1	7	Transaction ID : D2630561BAEB04A86811	
	804.54				
Am	ount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		, 0.00	804.54	
1) SUBTOTAL	S This Period This Page (optiona	l) ·····	)	1198.81	
2) TOTALS Th	is Period (last page this line num	ber only) ·····			
3) TOTAL OUT	TSTANDING LOANS from Sched	ule C (last pa	age only)		
4) ADD 2) and	3) and carry forward to appropr	iate line of S	Summary Page (last page only)		

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**Excluding Loans** 

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AME OF COMMITTEE (IN FUII)  MANN FOR CONGR	ESS				
	Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,				
Mailing Address PO BOX 1084			-		
City SALINA	State KS	Zip Code 67402-1084			
Outstanding Balance Beginning This Period		,	Transaction ID : DE2C914E975354573A5C		
504.00					
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	504.00		
B. Full Name (Last, First, Middle Initial) of Del MANN, TRACEY, ROBERT, ,	btor or Cred	tor	Nature of Debt (Purpose): FAX PHONE LINE - TO BE REIMBURSED		
Mailing Address PO BOX 1084	Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084			
Outstanding Balance Beginning This Period 21.77			Transaction ID : D67A05D8C08EF445AAFB		
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	21.77		
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Cred	ditor	Nature of Debt (Purpose): PRINTED MATERIALS - TO BE REIMBURSED		
Mailing Address PO BOX 1084					
City SALINA	State KS	Zip Code 67402-1084			
Outstanding Balance Beginning This Period			Transaction ID : D75F2D07EBBEE443BB73		
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	101.84		
SUBTOTALS This Period This Page (optional	l)		627.61		
TOTALS This Period (last page this line num	ber only) ·····				
TOTAL OUTSTANDING LOANS from Sched	ule C (last p	age only)			
ADD 2) and 3) and carry forward to appropr	iate line of S	Summary Page (last page only)			

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**Excluding Loans** 

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MANN FOR CONGR	FSS			
A. Full Name (Last, First, Middle Initial) of Di MANN, TRACEY, ROBERT, ,		editor	Nature of Debt (Purpose): CAMPAIGN PHONES - TO BE REIMBURSED	
Mailing Address PO BOX 1084				
City	State KS	Zip Code		
Outstanding Balance Beginning This Period		67402-1084	Transaction ID : DB59E9F964BD7426092E	
283.57			Transaction ID : DB33E31 304BB1420032E	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	283.57	
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): PRINTED MATERIALS - TO BE REIMBURSED			
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period	Transaction ID : D312FDC958D6746A7AD4			
455.60				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	455.60	
C. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,	ebtor or Cre	editor	Nature of Debt (Purpose): PHONE CHARGES - TO BE REIMBURSED	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period	i		Transaction ID : DA9DE9BA04DDC4DBF988	
283.57				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		, 0.00	283.57	
SUBTOTALS This Period This Page (optional	ıl)		1022.74	
TOTALS This Period (last page this line num	nber only) ····		-	
TOTAL OUTSTANDING LOANS from Sched	ule C (last p	page only)	, , , , , , , , , , , , , , , , , , , ,	
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**Excluding Loans** 

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NA	ME OF COMMITTEE (In Full)					
Ν	MANN FOR CONGRI	ESS				
	A. Full Name (Last, First, Middle Initial) of De	btor or Cred	litor		Pebt (Purpose):	
	MANN, TRACEY, ROBERT, ,			FAX LINE	- TO BE REIMBURSED	
	Mailing Address PO BOX 1084					
f	City	State	Zip Code			
	SALINA	KS	67402-1084			
	Outstanding Balance Beginning This Period			Transacti	on ID : DEB173BCEA90A4187AD7	
	159.46					
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00		0.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	159.46	
Ī	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Pebt (Purpose):	
	MANN, TRACEY, ROBERT, ,			FUNDRAIS	SER FOOD - TO BE REIMBURSED	
İ	Mailing Address PO BOX 1084					
ŀ	City	State	Zip Code			
	SALINA	KS	67402-1084			
Ī	Outstanding Balance Beginning This Period	,	·	Transacti	on ID : D20EA9BC839A9456582D	
	248.34					
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00		0.0	00	248.34	
Ī	C. Full Name (Last, First, Middle Initial) of De	btor or Cred	litor	Nature of D	Debt (Purpose):	
	MANN, TRACEY, ROBERT, ,				BUMPER STICKERS- TO BE REIMBURSED	
	Mailing Address PO BOX 1084					
ŀ	City	State	Zip Code			
	SALINA	KS	67402-1084			
l	Outstanding Balance Beginning This Period			Transact	tion ID : D3A81952D1875481391B	
	491.32					
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
		-	<del></del>			
	0.00		0.0	00	491.32	
1)	SUBTOTALS This Period This Page (optional	)		>	899.12	
2)	TOTALS This Period (last page this line num	ber only) ·····			7	
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last pa	age only)	··· •	7	
4)	ADD 2) and 3) and carry forward to appropri	nly) ▶				

**Excluding Loans** 

NAME OF COMMITTEE (In Full)  MANN FOR CONGR	ESS		
A. Full Name (Last, First, Middle Initial) of D. MANN, TRACEY, ROBERT, ,	ebtor or Cre	editor	Nature of Debt (Purpose): GAS - TO BE REIMBURSED
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	ı		Transaction ID : D372935A0967243D98C4
47.86  Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00			
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): PARADE SIGNAGE EQUIPMENT- TO BE REIMBURSED		
Mailing Address PO BOX 1084	Mailing Address PO BOX 1084		
City SALINA	State KS	Zip Code 67402-1084	
19.58	Outstanding Balance Beginning This Period 19.58		
Amount Incurred This Period  0.00		Payment This Period 0.00	Outstanding Balance at Close of This Period 19.58
C. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,	ebtor or Cre	editor	Nature of Debt (Purpose): PARADE SIGNAGE EQUIPMENT- TO BE REIMBURSED
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period 9.77	l 		Transaction ID : D3CBA70981F9C45D9A50
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	9.77
1) SUBTOTALS This Period This Page (optional	ıl)		77.21
2) TOTALS This Period (last page this line num	nber only)		
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last <sub>l</sub>	page only)	
4) ADD 2) and 3) and carry forward to appropri	riate line of	Summary Page (last page only)	

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**Excluding Loans** 

ХC	cluding Loans	ding Loans num			
NA	ME OF COMMITTEE (In Full)				
Ν	MANN FOR CONGRI	ESS			
	A. Full Name (Last, First, Middle Initial) of De	btor or Cre	ditor		Debt (Purpose):
	MANN, TRACEY, ROBERT, ,			GAS- TO	BE REIMBURSED
	Mailing Address PO BOX 1084				
	City	State	Zip Code		
	SALINA	KS	67402-1084		
	Outstanding Balance Beginning This Period			Transact	ion ID : DA73A00E72E0C43C0A9F
	40.89				
	Amount Incurred This Period		Payment This Period	Outstand	ing Balance at Close of This Period
	0.00		0.0	0	40.89
	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	litor	Nature of [	Debt (Purpose):
	MANN, TRACEY, ROBERT, ,			GAS- TO	BE REIMBURSED
	Mailing Address PO BOX 1084				
	City	State	Zip Code		
	SALINA	KS	67402-1084		
	Outstanding Balance Beginning This Period			Transact	ion ID : D6F6CA9CF12804AD4902
	41.10				
	Amount Incurred This Period		Payment This Period	Outstand	ing Balance at Close of This Period
	0.00		0.0	00	41.10
	C. Full Name (Last, First, Middle Initial) of De	htor or Cre	ditor		
	MANN, TRACEY, ROBERT, ,	biol of ole	uitoi		Debt (Purpose): GN PHONES- TO BE REIMBURSED
	Mailing Address PO BOX 1084				
	Cit.	Ctata	7:- Code		
	City SALINA	State KS	Zip Code 67402-1084		
		1.10	07402 1004		4: ID - DEDZODD A 5050040DZA FD
	Outstanding Balance Beginning This Period			Transac	tion ID: D5B7CDDA52F9242D7AFB
	285.04				
	Amount Incurred This Period		Payment This Period	Outstand	ing Balance at Close of This Period
	0.00		0.0	0	285.04
1)	SUBTOTALS This Period This Page (optional	)		▶	367.03
2)	TOTALS This Period (last page this line num	ber only) ····		··· <b>}</b>	
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	page only)	<b>,</b>	
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**Excluding Loans** 

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ESS				
btor or Cred	itor	Nature of D	ebt (Purpose):	
		FAX LINE-	TO BE REIMBURSED	
State	Zip Code			
KS	67402-1084			
		Transacti	on ID : D7A11462C5E854391AA6	
	Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.0	00	21.62	
star ar Cradit	or.			
nor or Great	Oi		ebt (Purpose): E REIMBURSED	
MANN, TRACEY, ROBERT, ,  Mailing Address PO BOX 1084				
State	Zip Code			
KS	67402-1084			
		Transacti	on ID : DF7C0DABF70A741CDB01	
	Payment This Period	Outstandi	ng Balance at Close of This Period	
1.0				
	0.0	00	160.78	
btor or Cred	itor		lebt (Purpose): BE REIMBURSED	
State	Zip Code			
KS	67402-1084			
		Transact	ion ID : DA3CADFFF7E414D2BBFA	
	Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.0	00	25.00	
)		•	207.40	
ber only) ······				
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ate line of S	ummary Page (last page or	nly) ►	9 9 9	
	State KS  State KS  State KS  State KS  State Control or Credit	State Zip Code KS Payment This Period  State Zip Code KS 67402-1084  Payment This Period  Payment This Period  Payment This Period  O.C  State Zip Code KS 67402-1084  Payment This Period  O.C  Payment This Period  O.C  O.C  O.C  O.C  O.C  O.C  O.C  O.	State   Zip Code   KS   67402-1084   Transacti   Payment This Period   Outstandi   State   KS   Exp Code   Exp	

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NA	ME OF COMMITTEE (In Full)						
Λ	MANN FOR CONGRE	ESS					
_	A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,		ditor			ebt (Purpose): N PHONES- TO BE REIMBURS	ED
-	Mailing Address PO BOX 1084						
	City SALINA	State KS	Zip Code 67402-1084				
	Outstanding Balance Beginning This Period			Т	ransactio	on ID : DD7CC7E2A605149EBA	82
	285.04						
	Amount Incurred This Period		Payment This Period	(	Outstandii	ng Balance at Close of This Pe	riod
	0.00		0.0	00		285.04	
-	B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,			ebt (Purpose): - TO BE REIMBURSED			
ĺ	Mailing Address PO BOX 1084						
	City SALINA	State         Zip Code           KS         67402-1084					
	Outstanding Balance Beginning This Period			Т	ransactio	on ID : D8D36E893B096438F82	96438F825
	836.00						
	Amount Incurred This Period		Payment This Period	(	Outstandii	ng Balance at Close of This Pe	riod
	0.00		0.0	00		836.00	
ŀ	C. Full Name (Last, First, Middle Initial) of De	btor or Cred	ditor	Na	Nature of Debt (Purpose):		
	MANN, TRACEY, ROBERT, ,			L	LETTERHEAD, ENVELOPES- TO BE REIMBURSED		
	Mailing Address PO BOX 1084						
	City	State	Zip Code				
-	SALINA	KS	67402-1084				
	Outstanding Balance Beginning This Period				Transact	ion ID : D51B16AF95AA04DA5	A2E
	1229.58						
	Amount Incurred This Period		Payment This Period	- (	Outstandii	ng Balance at Close of This Pe	riod
	0.00		7 0.0	00		1229.58	_
1)	SUBTOTALS This Period This Page (optional)	)		···· •		2350.62	
2)	TOTALS This Period (last page this line number	ber only) ·····		···· <b>•</b>		, ,	
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	age only)	···· •		, ,	
4)	ADD 2) and 3) and carry forward to appropri	iate line of S	Summary Page (last page or	nly) ►			٦

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**Excluding Loans** 

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ME OF COMMITTEE (IN FUII)  MANN FOR CONGR	ESS		
A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): EVENT TABLE CLOTH- TO BE REIMBURSED		
Mailing Address PO BOX 1084	-		
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Period			Transaction ID : D85A6E8AAB435496CA41
277.90			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	277.90
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Cred	itor	Nature of Debt (Purpose):  EVENT PROMOTIONAL MATERIALS- TO BE REIMBURSED
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period			Transaction ID : D627BB903B5844D0DA39
278.50			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	278.50
C. Full Name (Last, First, Middle Initial) of Do	ebtor or Cred	ditor	Nature of Debt (Purpose): T-SHIRTS- TO BE REIMBURSED
Mailing Address PO BOX 1084			-
City	State	Zip Code	-
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Period 702.85			Transaction ID : DA35175AB42EC4D03A45
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	702.85
SUBTOTALS This Period This Page (optional	l)		1259.25
TOTALS This Period (last page this line num	ber only) ·····		
TOTAL OUTSTANDING LOANS from Sched	ule C (last p	age only)	
ADD 2) and 3) and carry forward to appropri	iate line of S	Summary Page (last page only)	

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**Excluding Loans** 

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): BUMPER STICKERS- TO BE REIMBURSED MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D57D0B48C2C3C457F8C1 Outstanding Balance Beginning This Period 1808.29 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1808.29 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , POSTAGE- TO BE REIMBURSED Mailing Address PO BOX 1084 City State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: DE58B93E375124D3D808 132.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 132.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , **INK-TO BE REIMBURSED** Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D94AB9386E83B4014915 51.03 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 51.03 0.00 1) SUBTOTALS This Period This Page (optional) ..... 1991.32 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

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AME OF COMMITTEE (In Full)				
MANN FOR CONGR	ESS			
A. Full Name (Last, First, Middle Initial) of De		editor	Nature of Deb	t (Purpose):
MANN, TRACEY, ROBERT, ,		PHONES- TO BE REIMBURSED		
, , , , , , , , , , , , , , , , , , ,				
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	<u> </u>	·	Transaction	ID : DBEFD8AADCC6C481F84C
285.04				
Amount Incurred This Period		Payment This Period	Outstanding	Balance at Close of This Period
0.00		0	00	285.04
0.00		· · · · · · · · · · · · · · · · · · ·		203.04
B. Full Name (Last, First, Middle Initial) of De	btor or Cred	ditor	Nature of Deb	t (Purnose):
MANN, TRACEY, ROBERT, ,				PHONES- TO BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	I		Transaction	ID : DF653D89D7D7C4F549AE
284.50			Transastion	
, , , , , , , , , , , , , , , , , , , ,				
Amount Incurred This Period		Payment This Period	Outstanding	Balance at Close of This Period
0.00		0.	00	284.50
C. Full Name (Last First Middle Initial) of D	-1-1			
C. Full Name (Last, First, Middle Initial) of D	eptor or Cre	editor	Nature of Deb	t (Purpose): REIMBURSED.
MANN, TRACEY, ROBERT, ,			GAS- TO BE	REINIBURSED.
Mailing Address PO BOX 1084				
City	Ctata	7in Codo		
City SALINA	State KS	Zip Code 67402-1084		
		01402 1004		ID DAGE 4 40 E 4 E 90 A 40 A 90 B 90 E
Outstanding Balance Beginning This Period			Transaction	D: DA6E11354E9024032B0F
56.74				
Amount Incurred This Period		Payment This Period	Outstanding	Balance at Close of This Period
0.00		0.	00	56.74
7 7		,		9 9
CURTOTAL O Tide Resident Tide Research (self-see	1)			
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NAME OF COMMITTEE (In Full)						
MANN FOR CONGR	ESS					
,	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor					
MANN, TRACEY, ROBERT, ,	HOTEL- T	O BE REIMBÜRSED.				
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period			Transacti	on ID : D76D3C562E8204138948		
99.48						
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00		0.00	0	99.48		
B. Full Name (Last, First, Middle Initial) of De	btor or Credito	or	Noture of F	Ocht (Durnoco):		
MANN, TRACEY, ROBERT, ,				Debt (Purpose): BE REIMBURSED.		
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period			Transacti	on ID : D289C6E276640448FAFD		
47.00						
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00		0.00	0	47.00		
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Credit	or		Debt (Purpose): BE REIMBURSED.		
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period			Transact	ion ID : D755BD1AA014245CBAD0		
31.06						
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00		<del></del>		31.06		
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1) SUBTOTALS This Period This Page (optional	l)		· •	177.54		
2) TOTALS This Period (last page this line num	iber only) ······		· •	, , , , , , , ,		
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last pag	ge only)	·· •	, , , , , , , ,		
4) ADD 2) and 3) and carry forward to appropri	riate line of Su	mmary Page (last page on	ly) ►	9 1 9 1 1 9 1		

PAGE 101 OF

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**Excluding Loans** 

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): GAS- TO BE REIMBURSED. MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D19FBC05295974C0EA93 Outstanding Balance Beginning This Period 56.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 56.73 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , POSTAGE- TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: DBC6E18F3FA224F8299A 1144.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1144.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , COPY PAPER- TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D63CA6BE7540443CF8DB 28.92 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 28 92 0.00 1) SUBTOTALS This Period This Page (optional) ..... 1229.65 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

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NA	ME OF COMMITTEE (In Full)				
٨	MANN FOR CONGRE	=55			
					_
	A. Full Name (Last, First, Middle Initial) of De	Nature of Debt (Purpose):			
	MANN, TRACEY, ROBERT, ,	CAMPAIGN PHONES- TO BE REIMBURSED.			
-					
	Mailing Address PO BOX 1084				
ŀ	C:L.	01-1-	7:- 01-		
	City	State	Zip Code		
ŀ	SALINA	KS	67402-1084		_
	Outstanding Balance Beginning This Period			Transaction ID: DD5409165F5024D47BBC	
	266.61				
	200.01				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	l
	0.00		0.00	266.61	
	3.00		7	200.01	
ŀ	B. Full Name (Last, First, Middle Initial) of Deb	tor or Cro	ditor		_
		nor or cred	ditor	Nature of Debt (Purpose):	
	MANN, TRACEY, ROBERT, ,			CAMPAIGN PHONES SERVICE, TO BE REIMBURSED.	
ŀ	Mailing Address PO BOX 1084			TEMBOROLS.	
	Mailing Address PO BOX 1084				
ŀ	City	State	Zip Code		
	SALINA	KS	67402-1084		
ŀ					_
	Outstanding Balance Beginning This Period			Transaction ID : DC7F490CEDBA343D2A7A	
	266.61				
	A LITTLE DOLL			0	
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	1
	0.00		0.00	266.61	
			7		
ı	C. Full Name (Last, First, Middle Initial) of De	btor or Cre	editor	Nature of Debt (Purpose):	_
	MANN FOR CONGRESS			SHIPPING- TO BE REIMBURSED.	
Ī	Mailing Address PO BOX 1084				
	City	State	Zip Code		
	SALINA	KS	67402-1084		
	Outstanding Balance Beginning This Period			Transaction ID : DF8846C3B882E468EBC4	
				114110401101112   21 00 100020022 100220 1	
	20.90				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	ı
	000			20.00	
	0.00		0.00	20.90	
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Outstanding Balance Beginning This Period

Amount Incurred This Period

99.25

**Excluding Loans** 

NAME OF COMMITTEE (In Full)

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MANN FOR CONGRI	ESS		
A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): EMAIL SERVICE, TO BE REIMBURSED.		
Mailing Address PO BOX 1084			-
City SALINA	State KS	Zip Code 67402-1084	-
Outstanding Balance Beginning This Period 36.86			Transaction ID : D816549A65E6A4249A81
Amount Incurred This Period  0.00	F	Payment This Period 0.00	Outstanding Balance at Close of This Period 36.86
B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084	otor or Creditor		Nature of Debt (Purpose): FAX LINE- TO BE REIMBURSED.
City SALINA	State KS	Zip Code 67402-1084	-
Outstanding Balance Beginning This Period 21.62			Transaction ID : D65FFD3A9932B4CEE86D
Amount Incurred This Period 0.00	F	Payment This Period 0.00	Outstanding Balance at Close of This Period 21.62
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,  Mailing Address PO BOX 1084	btor or Credito	r	Nature of Debt (Purpose): HOTEL- TO BE REIMBURSED
City	State	Zip Code	_
SALINA	KS	67402-1084	

1)	SUBTOTALS This Period This Page (optional)		I	,	I	<del>-</del>	7	_	15	7.73	3
2)	TOTALS This Period (last page this line number only)		Ξ	,	Ι	Ξ	,	Ξ	_	_	
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Payment This Period

0.00

Transaction ID: D0A42DC86B7F249D89E7

Outstanding Balance at Close of This Period

99.25

**Excluding Loans** 

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3)

4)

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ME OF COMMITTEE (In Full)  MANN FOR CONGRI	<b>-</b> SS		
A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.		
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period		1	Transaction ID : DCA784B49B6FD4B42BA3
35.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	35.00
B. Full Name (Last, First, Middle Initial) of Del MANN, TRACEY, ROBERT, ,	otor or Credito	r	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period 57.80			Transaction ID : DC334393B2C964320822
Amount Incurred This Period 0.00		Payment This Period  0.00	Outstanding Balance at Close of This Period 57.80
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Credite	or	Nature of Debt (Purpose): HOTEL, TO BE REIMBURSED.
Mailing Address PO BOX 1084			_
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period 75.42			Transaction ID: D005A73AE523D49F88A4
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	75.42
SUBTOTALS This Period This Page (optional	)		168.22
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TOTAL OUTSTANDING LOANS from Schedu	ıle C (last pag	e only)·····	
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PAGE 105 OF

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numbered line)

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**Excluding Loans** 

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	ME OF COMMITTEE (In Full)  MANN FOR CONGRI	ESS					
_	A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): CAMPAIGN PHONES SERVICE, TO BE REIMBURSED.					
-	Mailing Address PO BOX 1084						
ŀ	City	State	Zip Code	_			
	SALINA	KS	67402-1084				
-	Outstanding Balance Beginning This Period	Payment This Period		Transaction ID : DEA302847C2364A40AD7			
	267.07						
	Amount Incurred This Period			Outstanding Balance at Close of This Period			
	0.00		0.00	267.07			
ŀ	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	litor	Nature of Debt (Purpose):			
	MANN, TRACEY, ROBERT, ,			GAS, TO BE REIMBURSED.			
Ī	Mailing Address PO BOX 1084						
	City	State	Zip Code	_			
	SALINA	KS	67402-1084				
Ī	Outstanding Balance Beginning This Period	utstanding Balance Beginning This Period		Transaction ID : D87D181A6C014443B839			
	40.25						
	Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period			
	0.00		0.00	40.25			
ŀ	C. Full Name (Last, First, Middle Initial) of De	htor or Cro	ditor				
	MANN, TRACEY, ROBERT, ,	anoi	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.				
ŀ	Mailing Address PO BOX 1084						
-	City	State	Zip Code	_			
	SALINA	KS	67402-1084				
	Outstanding Balance Beginning This Period			Transaction ID: D96504CB1E0FD4052B14			
	19.86						
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
	0.00			19.86			
	0.00		0.00	13.60			
1)	SUBTOTALS This Period This Page (optional	UBTOTALS This Period This Page (optional)					
2)	TOTALS This Period (last page this line num	ber only) ····		-			
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)						
4)	) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)						

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PAGE 107 OF 156 FOR LINE NUMBER: (check only one)

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ESS					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor					
MANN, TRACEY, ROBERT, ,					
Mailing Address PO BOX 1084					
State	Zip Code				
KS	67402-1084				
i		Transaction	on ID : DAEED25CB0D2C4022834		
	Payment This Period	Outstandi	ng Balance at Close of This Period		
	0.	00	176.41		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,					
State	Zip Code				
KS	67402-1084				
Outstanding Balance Beginning This Period					
27.34  Amount Incurred This Period Payment This Period		Outstandi	Outstanding Balance at Close of This Period		
	<del> </del>		27.34		
ebtor or Cre	ditor	Not as at D	orlet (Decrease)		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  MANN, TRACEY, ROBERT, ,					
State	Zip Code				
KS	67402-1084				
I		Transact	ion ID : D7534E64A796340C19B5		
	Payment This Period	Outstandi	ng Balance at Close of This Period		
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nber only) ····		···· <b>&gt;</b>			
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
	State KS  State KS  State KS  State KS  I  I  I  I  I  I  I  I  I  I  I  I  I	State Zip Code KS 67402-1084  Payment This Period  State KS 12ip Code KS 67402-1084  Payment This Period  Payment This Period  Payment This Period  Payment This Period  Payment This Period  Payment This Period  Payment This Period  O.  Payment This Period  O.  Payment This Period  O.  Payment This Period  O.  Payment This Period  O.	State   Zip Code   KS   67402-1084    State   Zip Code   G7402-1084    Payment This Period   Outstandi    State   Zip Code   KS   67402-1084    State   Zip Code   G7402-1084    State   Zip Code   G7402-1084    Payment This Period   Outstandi    Payment This Period   Outstandi    Payment This Period   Outstandi    Payment This Period   Outstandi    State   Zip Code   G7402-1084    Payment This Period   Outstandi    State   Zip Code   Code		

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): HOTEL, TO BE REIMBURSED. MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D7711D300ED43456A978 Outstanding Balance Beginning This Period 136.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 136.73 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , AIRFARE, TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: DEB65F9734AE7493FADC 500.58 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 500.58 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , POSTAGE, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D8623C55DE0F64B3F944 44.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 44 00 0.00 1) SUBTOTALS This Period This Page (optional) ..... 681.31 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

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EBTS AND OBLIGATIONS			1	edule(s) each	FOR LINE NUMBER: (check only one) 9	
cluding Loans			1	ered line)	(criccit offly offic)	
AME OF COMMITTEE (In Full)			•			_
MANN FOR CONGR	FSS					
A. Full Name (Last, First, Middle Initial) of De		ditor		Vature of D	obt (Durana)	_
MANN, TRACEY, ROBERT,	spiol of Cled	altoi			ebt (Purpose): O BE REIMBURSED.	
With the transfer of the trans						
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period	<u> </u>		·	Transaction	on ID : D06AE423C889042AF993	
71.40						
7		D . T. D		0		
Amount Incurred This Period		Payment This Period		Outstandii	ng Balance at Close of This Perio	d
0.00		0.0	00		71.40	J
					,	_
B. Full Name (Last, First, Middle Initial) of De	btor or Cred	itor			ebt (Purpose): 3E REIMBURSED. SEE SCHED. [	`
MANN, TRACEY, ROBERT, ,				GAS, TO E	BE KEIMBURSED. SEE SCHED. I	<i>)</i> .
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period				Transaction	on ID : D8BDAC064C429416587A	
				Hansach	UII ID . DOBDAG004G429410367A	L
41.00						
Amount Incurred This Period		Payment This Period	_	Outstandi	ng Balance at Close of This Perio	bd
0.00		0.0	00	L	41.00	
		111			, ,	_
C. Full Name (Last, First, Middle Initial) of Domain MANN, TRACEY, ROBERT,	eptor or Gre	ditor			ebt (Purpose): BE REIMBURSED.	
WANN, TRACET, ROBERT,				GAS, TO E	DE REIIVIDURSED.	
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period				Transact	ion ID : DC141B049ABAB4E30A	16
55.00				Transact		
7 7						
Amount Incurred This Period		Payment This Period	-	Outstandi	ng Balance at Close of This Perio	)d
0.00	L	0.0	00		55.00	J
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PAGE 109 OF

**Excluding Loans** 

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NAME OF COMMITTEE (In Full)

MANN FOR CONGR	ESS		
A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): HOTEL, TO BE REIMBURSED.		
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Period			Transaction ID : D4AFB6A2DAD8E4F5695F
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	84.32
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): GAS, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	l I		Transaction ID : D3ED9EC8A20034111915
21.01			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	21.01
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Credito	or	Nature of Debt (Purpose): HOTEL, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period 90.02			Transaction ID: D735BBFB1D60C412382F
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	90.02
SUBTOTALS This Period This Page (optional	l)		195.35
TOTALS This Period (last page this line num	ber only) ·······		
TOTAL OUTSTANDING LOANS from Sched	ule C (last page	e only)·····	
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**Excluding Loans** 

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AME OF COMMITTEE (In Full)	IE OF COMMITTEE (In Full)				
MANN FOR CONGRI					
A. Full Name (Last, First, Middle Initial) of De	btor or Creditor				ebt (Purpose):
, , ,	MANN, TRACEY, ROBERT, ,			WIRELES	S ROUTER, TO BE REIMBURSED.
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Period				Transacti	on ID : D2B69129639EA44C0836
53.57					
Amount Incurred This Period	P	ayment This Period		Outstandi	ng Balance at Close of This Period
0.00	,	0.0	00		53.57
B. Full Name (Last, First, Middle Initial) of Det MANN, TRACEY, ROBERT, ,	otor or Creditor				ebt (Purpose): TO BE REIMBURSED.
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Period				Transacti	on ID : D9465FFF445F14D58944
21.62					
Amount Incurred This Period	P	ayment This Period		Outstandi	ng Balance at Close of This Period
0.00		0.0	00		21.62
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Creditor	•			lebt (Purpose): N PHONES SERVICE, TO BE
WANN, TRACET, ROBERT,				REIMBUR	
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Period				Transact	ion ID : DAF17A2281AA84335A80
267.07					
Amount Incurred This Period	P	ayment This Period		Outstandi	ng Balance at Close of This Period
0.00	,	0.0	00		267.07
SUBTOTALS This Period This Page (optional	)		•	· ·	342.26
TOTALS This Period (last page this line num	ber only) ······		···· •		, , , , , ,
TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
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**Excluding Loans** 

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NAME OF COMMITTEE (In Full)					
MANN FOR CONG	RESS				
A. Full Name (Last, First, Middle Initial) of		ditor	Nature of Debt (Purpo	 ose):	
MANN, TRACEY, ROBERT			FUNDRAISER INVIT		
			REIMBURSED.		
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Pe	eriod		Transaction ID : DC	5DFDE364E7C415680C	
218.69					
7	_	Doumant This Davied	Outstanding Rolens	a at Class of This Davied	
Amount Incurred This Period		Payment This Period		e at Close of This Period	
0.00		0.00		218.69	
B. Full Name (Last, First, Middle Initial) of	Dobtor or Cros	litor			
MANN, TRACEY, ROBERT		iitOi	Nature of Debt (Purpo	ose): ND OFFICE SUPPLIES,	
Wilder, TOOLI, ROBERT	, ,		TO BE REIMBURSE		
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Pe	eriod		Transaction ID - DE		
			Transaction iD : DF	A15AC7547E641E4A40	
227.73					
Amount Incurred This Period		Payment This Period	Outstanding Balanc	e at Close of This Period	
0.00		0.00		227.73	
	(5.11	, ,	,	,	
C. Full Name (Last, First, Middle Initial) of		ditor	Nature of Debt (Purpo		
MANN, TRACEY, ROBERT	, ,		POSTAGE, TO BE R	EIMBURSED.	
Mailing Address PO BOX 1084					
Oit.	01-1-	7:- Code			
City SALINA	State KS	Zip Code 67402-1084			
	I	07402 1004	Transaction ID - DI	D4574D76D6644A54A54	
Outstanding Balance Beginning This Pe	anou		i ransaction id : Di	D4F71D76B6614AE4AE1	
1488.00					
Amount Incurred This Period		Payment This Period	Outstanding Balanc	e at Close of This Period	
0.00		0.00		1488.00	
7 7		7	7	7	
) SUBTOTALS This Period This Page (opti	ional)			1024.42	
, 13210 mas mis rage (opti				1934.42	
2) TOTALS This Period (last page this line	number only) ····		<b>&gt;</b>		
D) TOTAL OLITETANIDING LOANS form Co					
B) TOTAL OUTSTANDING LOANS from Sc	nedule o (last p	age only)		, , , , , , , , , , , , , , , , , , , ,	
4) ADD 2) and 3) and carry forward to app	ropriate line of	Summary Page (last page only	<i>(</i> )		

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	ME OF COMMITTEE (In Full)						<u> </u>	10	
	MANN FOR CONGRE	ESS_							
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,					ebt (Purpose): TO BE REIMBURSED.			
	Mailing Address PO BOX 1084								
	City SALINA	State KS	Zip Code 67402-1084						
	Outstanding Balance Beginning This Period				Transaction	on ID : DE9FF2B114E824	4086	843	
	154.70								
	Amount Incurred This Period Payment This Period			Outstandii	ng Balance at Close of T	his	Period		
	0.00					, 15	4.70	)	
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,				CAMPAIG	ebt (Purpose): N MANAGER COMMUNIC TO BE REIMBURSED.	CATI	ONS	
Mailing Address PO BOX 1084									
	City SALINA	State KS	Zip Code 67402-1084						
	Outstanding Balance Beginning This Period				Transactio	on ID : DD2FAE09F50AF	43B	4B43	
	137.79								
	Amount Incurred This Period		Payment This Period		Outstandii	ng Balance at Close of T	his	Period	
	0.00		0.0				7.79		
	C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Cred	ditor			ebt (Purpose): TO BE REIMBURSED.			
	Mailing Address PO BOX 1084								
ŀ	City	State	Zip Code						
	SALINA	KS	67402-1084						
	Outstanding Balance Beginning This Period				Transact	ion ID : D38DB14A229A7	743	A4BE4	
	154.70								
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close of T	his	Period	
	0.00		0.0	00		15	4.70		
1)	SUBTOTALS This Period This Page (optional)	)		···· <b>&gt;</b>		44	7.19	)	
2)	TOTALS This Period (last page this line numb	oer only) ·····		····•		7			
3)	TOTAL OUTSTANDING LOANS from Schedu	ile C (last pa	age only)·····	···· <b>•</b>		7			
4)	ADD 2) and 3) and carry forward to appropria	ate line of S	Summary Page (last page or	nly) 🕨		7 1 7			

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**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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NAME OF COMMITTEE (In F	Full)
MANN FOR	CONGRESS

Ν	MANN FOR CONGRE	ESS		
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): OFFICE MAP BOARD, TO BE REIMBURSED.
ŀ	Mailing Address PO BOX 1084			
	City SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period			Transaction ID: D1C35A75EE8D14719A17
	17.13			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	17.13
	B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	tor or Cred	itor	Nature of Debt (Purpose): OFFICE BINDERS AND TAPE, TO BE REIMBURSED.
	Mailing Address PO BOX 1084			
İ	City SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period			Transaction ID : DB05B0C3CAFE44721BD2
	17.35			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	17.35
Ī	C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Cre	ditor	Nature of Debt (Purpose): FAX LINE, TO BE REIMBURSED.
	Mailing Address PO BOX 1084			
İ	City	State	Zip Code	
-	SALINA	KS	67402-1084	
	Outstanding Balance Beginning This Period			Transaction ID : DF6A338319C8843129F9
	21.62			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		7 7 0.00	21.62
1)	SUBTOTALS This Period This Page (optional)			56.10
2)	TOTALS This Period (last page this line numb	oer only) ·····		<b>&gt;</b>
3)	TOTAL OUTSTANDING LOANS from Schedu	le C (last p	age only)······	<b>&gt;</b>
4)	ADD 2) and 3) and carry forward to appropri	ate line of S	Summary Page (last page only)	·

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CAR RENTAL, TO BE REIMBURSED. MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D9E3507B5A1B9428C9B0 Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 96.52 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , LETTER TRAYS, TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: D264BF2AE7BC64733925 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 25.71 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , DRY ERASE SUPPLIES, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D467A558EA97F42C19B9 17.99 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 17 99 0.00 1) SUBTOTALS This Period This Page (optional) ..... 140.22 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 116 OF FOR LINE NUMBER: (check only one)

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): PHOTO TRANSFER TO DVD, TO BE MANN, TRACEY, ROBERT, , REIMBURSED. Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: DEA1739EA9F074E8CACD Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 13.94 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , OFFICE SUPPLIES, TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: D8CE145C1717243E08D6 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 9.32 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , CAMPAIGN PHONES SERVICE, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: DA4A4A0144E434A2189C 267.07 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 267.07 0.00 1) SUBTOTALS This Period This Page (optional) ..... 290.33 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

# NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line)

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MANN FOR CONGR	ESS			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): TONER AND OFFICE SUPPLIES, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City	State	Zip Code	-	
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period			Transaction ID : D004A6AEB9BD648708C2	
62.10				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	62.10	
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Cred	ditor	Nature of Debt (Purpose): TONER, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period			Transaction ID : DD2982AE2B97B49549AE	
99.68				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	99.68	
C. Full Name (Last, First, Middle Initial) of D	ebtor or Cre	editor	Nature of Debt (Purpose):	
MANN, TRACEY, ROBERT, ,			TONER, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	!		Transaction ID : DA20A5B5247D3412E9A2	
68.59				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	68.59	
SUBTOTALS This Period This Page (optional	l)		230.37	
TOTALS This Period (last page this line num	ber only) ····			
TOTAL OUTSTANDING LOANS from Sched	ule C (last p	page only)	-	
ADD 2) and 3) and carry forward to appropri	riate line of	Summary Page (last page only)		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CAMPAIGN HEADQUARTERS OFFICE MANN, TRACEY, ROBERT, , SUPPLIES, TO BE REIMBURSED. Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D1F92CCF38C8F496FB0D Outstanding Balance Beginning This Period 13.76 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 13.76 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , GAS, TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: D634990D0B9A34E8CA7F Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 30.57 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , POSTAGE, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D97EBA36620414C7284A 19.10 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 19 10 0.00 1) SUBTOTALS This Period This Page (optional) ...... 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

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#### **x** 10 NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FOOD FOR ROLL OUT TOUR, TO BE MANN, TRACEY, ROBERT, , REIMBURSED. Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: DE14E43FE0AA8429C83D Outstanding Balance Beginning This Period 213.34 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 213.34 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , GAS, TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: D5016D6562C64479383A 50.90 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 50.90 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , GAS, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D53A9814A14D34F8F8E5 25.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 25.00 0.00 1) SUBTOTALS This Period This Page (optional) ..... 289.24 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

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PAGE 120 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)  MANN FOR CONGRI	ESS			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): FOOD FOR TOUR, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period			Transaction ID : D29B970E7A404476BAAD	
87.78				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	87.78	
B. Full Name (Last, First, Middle Initial) of Det MANN, TRACEY, ROBERT, ,	otor or Cred	ditor	Nature of Debt (Purpose): FOOD FOR ROLLOUT TOUR, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period	1	-	Transaction ID : D55B7585FF9794307928	
89.91			Transaction in . 5555750511 5754507525	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	89.91	
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Cre	editor	Nature of Debt (Purpose): FOOD FOR ROLLOUT TOUR, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period 46.10			Transaction ID: D78B68F025CE84C39B5A	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	46.10	
) SUBTOTALS This Period This Page (optional	)		223.79	
TOTALS This Period (last page this line num	ber only) ····		·	
) TOTAL OUTSTANDING LOANS from Schedu	Schedule C (last page only)			
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						for each (check only one) 9 mbered line)		
	ME OF COMMITTEE (In Full)			l	<u> </u>		100	10
Λ	MANN FOR CONGRE							
	A. Full Name (Last, First, Middle Initial) of Del MANN, TRACEY, ROBERT, ,	btor or Cred	ditor			ebt (Purpose): R ROLLOUT TOUR, TO BE SED.	E	
ŀ	Mailing Address PO BOX 1084							
	City SALINA	State KS	Zip Code 67402-1084					
Ī	Outstanding Balance Beginning This Period				Transacti	on ID : DCB02A2163DB3	429	5BAC
	40.00							
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close of T	his	Period
	0.00		0.0			4	0.00	
ļ	B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	otor or Cred	itor			ebt (Purpose): R ROLLOUT TOUR, TO B SED.	E	
Ì	Mailing Address PO BOX 1084							
-	City SALINA	State KS	Zip Code 67402-1084					
Ī	Outstanding Balance Beginning This Period		,		Transaction	on ID : DFA27272133C34	7B4	A56
	167.35							
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close of T	his	Period
	0.00		0.0				7.35	
ŀ	C. Full Name (Last, First, Middle Initial) of De	btor or Cred	ditor		Nature of D	eht (Purnose):		
	MANN, TRACEY, ROBERT, ,				Nature of Debt (Purpose):  FUEL FOR ROLLOUT TOUR, TO BE REIMBURSED.			
	Mailing Address PO BOX 1084							
	City	State	Zip Code					
ŀ	SALINA	KS	67402-1084					
	Outstanding Balance Beginning This Period				Transact	ion ID : DF5BB37DC057	<b>440</b> I	FAACE
	35.00							
	Amount Incurred This Period		Payment This Period	-	Outstandi	ng Balance at Close of T	his	Period
	0.00		0.0	00		3:	5.00	
1)	SUBTOTALS This Period This Page (optional)	)		···· <b>•</b>		24	2.35	
2)	TOTALS This Period (last page this line numb	ber only) ·····		···· •		7 7		
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	age only)	···· •		, ,		
4)	ADD 2) and 3) and carry forward to appropria	ate line of S	Summary Page (last page or	nly) 🕨				

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**Excluding Loans** 

NAME OF COMMITTEE (In Full)

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	ANN FOR CONGRI	ESS		
Α	Full Name (Last, First, Middle Initial) of De	Nature of Debt (Purpose): POSTAGE, TO BE REIMBURSED.		
N	1ailing Address PO BOX 1084	_		
	ity	State	Zip Code	-
	SALINA	KS	67402-1084	
	Outstanding Balance Beginning This Period		-	Transaction ID: D8901AB9B9F0645DAA03
	11.40			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	11.40
В	MANN, TRACEY, ROBERT, ,	otor or Cre	ditor	Nature of Debt (Purpose): PARKING, TO BE REIMBURSED.
Ν	failing Address PO BOX 1084			
	ity SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period			Transaction ID : DFB2DBD1FBBF04277B42
	4.00			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	4.00
С	MANN, TRACEY, ROBERT, ,	btor or Cr	editor	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.
N	failing Address PO BOX 1084			
	ity SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period	ı	1	Transaction ID : D9FBFDB252C664DF2B91
	60.00			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	60.00
)	SUBTOTALS This Period This Page (optional	)		75.40
2)	TOTALS This Period (last page this line numl	ber only) ···		
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last	page only)	
1)	ADD 2) and 3) and carry forward to appropri	ate line of	Summary Page (last page only)	

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): EMAIL SERVICE, TO BE REIMBURSED. MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D8D337B7720E94E99A33 Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 42.12 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , AIRLINE TICKET, TO BE REIMBURSED. SEE SCHED, D. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: DC9814364033B484DA49 561.40 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 561.40 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , MAILERS, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: DDBB2704FAD544E2295E 356.33 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 356 33 0.00 1) SUBTOTALS This Period This Page (optional) ...... 959.85 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

# NAME OF COMMITTEE (In Full)

PAGE 124 OF 156 (Use separate schedule(s) FOR LINE NUMBER: for each (check only one) 9 numbered line) **X** 10

Ν	IANN FOR CONGRE	ESS		
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): FAX LINE, TO BE REIMBURSED.
F	Mailing Address PO BOX 1084			
	City SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period			Transaction ID: D293293DF5B594CB8A10
	21.62			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00	L.	0.00	21.62
Ī	B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	tor or Cred	itor	Nature of Debt (Purpose): POSTAGE, TO BE REIMBURSED.
	Mailing Address PO BOX 1084			
Ī	City SALINA	State KS	Zip Code 67402-1084	
f	Outstanding Balance Beginning This Period		l	Transaction ID : D5BFB7A9727984944883
	264.00			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	264.00
	C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Cre	ditor	Nature of Debt (Purpose): HOTEL, TO BE REIMBURSED.
	Mailing Address PO BOX 1084			
f	City SALINA	State KS	Zip Code 67402-1084	-
Ī	Outstanding Balance Beginning This Period		0.000	Transaction ID : D681B76B2BD04430FBB0
	121.59			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	121.59
1)	SUBTOTALS This Period This Page (optional)	)		407.21
2)	TOTALS This Period (last page this line number	oer only) ·····		
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last p	age only)	
4)	ADD 2) and 3) and carry forward to appropri	ate line of S	Summary Page (last page only)	

**Excluding Loans** 

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3)

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ME OF COMMITTEE (In Full)  MANN FOR CONGRI	ESS		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): GAS, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City	State	Zip Code	-
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Period 70.00			Transaction ID: D818CB1A91E6A4B0DA9B
Amount Incurred This Period	I	Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	70.00
B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	otor or Creditor		Nature of Debt (Purpose): TONER, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period  111.47  Amount Incurred This Period  0.00		Payment This Period 0.00	Transaction ID: D597298833E264F92852  Outstanding Balance at Close of This Period  111.47
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Credito	or	Nature of Debt (Purpose): ENVELOPES, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period  17.15  Amount Incurred This Period  0.00		Payment This Period 0.00	Transaction ID: D9C711BE16B3046F6BF1  Outstanding Balance at Close of This Period  17.15
SUBTOTALS This Period This Page (optional	)	·····	198.62
TOTALS This Period (last page this line number	ber only) ······		
TOTAL OUTSTANDING LOANS from Schedu	ıle C (last page	e only)·····	
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xcluding Loans			numbered line)	<b>x</b> 10
NAME OF COMMITTEE (In Full)				
MANN FOR CONGRI	ESS			
A. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	editor	Nature of D	Pebt (Purpose):
MANN, TRACEY, ROBERT, ,	CAMPAIG REIMBUR	N PHONES SERVICE, TO BE SED.		
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period			Transacti	on ID : D80E7431C055944C5A9F
270.67				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	270.67
B. Full Name (Last, First, Middle Initial) of Del	otor or Cred	ditor	Notice of 5	Nobt (Purposo):
MANN, TRACEY, ROBERT, ,				Debt (Purpose): TE CD OF PHOTO IMAGES
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period			Transacti	on ID : D62A33616E5B646D790C
50.00				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0		50.00
0.00		, , , ,		, , , ,
C. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	editor	Nature of D	Debt (Purpose):
MANN, TRACEY, ROBERT, ,			TONER A	ND PAPER, TO BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period			Transact	ion ID: D6A816A89FAE547D9BBC
57.52				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	57.52
1) SUBTOTALS This Period This Page (optional	)		•	378.19
2) TOTALS This Period (last page this line num	ber only) ···			
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last <sub>l</sub>	page only)·····	··· <b>\</b>	, , , , , , , , ,
4) ADD 2) and 3) and carry forward to appropr	iate line of	Summary Page (last page or	nlv) <b>&gt;</b>	, ,

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NAME OF COMMITTEE (In Full)		•	•	1
MANN FOR CONGR				
A. Full Name (Last, First, Middle Initial) of D		editor	Nature of Debt (Purp	
MANN, TRACEY, ROBERT,	1		GAS, TO BE REIME	SURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Perio	d	1	Transaction ID : DI	B716DFEAFDA547E39DE
47.00	1			
7 7 7				
Amount Incurred This Period		Payment This Period	Outstanding Baland	ce at Close of This Period
0.00	l L.	0.0	0	47.00
B. Full Name (Last, First, Middle Initial) of D	ebtor or Cre	ditor	Nature of Debt (Purp	.oco).
MANN, TRACEY, ROBERT,				TO BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Perio	d		Transaction ID : D4	1251123BE99048C3B6B
518.80				
Amount Incurred This Period		Payment This Period	Outstanding Baland	ce at Close of This Period
0.00		0.0	0	518.80
C. Full Name (Last, First, Middle Initial) of [	Johton on Cu	a dita v		
MANN, TRACEY, ROBERT,		editor	Nature of Debt (Purp POSTAGE, TO BE	
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Perio		07402 1004	Transaction ID : D	F06685B5AF354EC98E7
88.00	1			
7 7 7				
Amount Incurred This Period		Payment This Period	Outstanding Baland	ce at Close of This Period
0.00		0.00	0	88.00
SUBTOTALS This Period This Page (option	al)		· · · · · ·	653.80
	•		_	7
2) TOTALS This Period (last page this line nur	mber only) ···		·	,
3) TOTAL OUTSTANDING LOANS from Sche	dule C (last	page only)·····	· · ·	,
4) ADD 2) and 3) and carry forward to approp	oriate line of	Summary Page (last page on	ily) ►	. ,

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Exc

NAME OF COMMITTEE (In Full)
MANN FOR CONGRESS

xcluding Loans			numbered line)	<b>                                     </b>	
NAME OF COMMITTEE (In Full)					
MANN FOR CONGR	ESS_				
A. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	editor		Debt (Purpose): , TO BE REIMBURSED.	
MANN, TRACEY, ROBERT, ,	MANN, TRACEY, ROBERT, ,				
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Period			Transacti	ion ID: D37AAE9DF3A934D48B3C	
21.62					
Amount Incurred This Period		Dovmont This Period	Outetandi	ing Palanca at Class of This Pariod	
		Payment This Period		ing Balance at Close of This Period	
0.00		0.0		21.62	
B. Full Name (Last, First, Middle Initial) of Del	otor or Cred	ditor	Nature of D	Debt (Purpose):	
MANN, TRACEY, ROBERT, ,				R TOUR, TO BE REIMBURSED.	
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Period	l		Transacti	on ID : D28BB242B490746B88AD	
85.03					
Amount Incurred This Period		Payment This Period	Outstandi	ing Balance at Close of This Period	
0.00		0.0		85.03	
C. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	editor	Nature of D	Debt (Purpose):	
MANN, TRACEY, ROBERT, ,				PR TOUR, TO BE REIMBURSED.	
Mailing Address PO BOX 1084					
City	State	Zip Code			
SALINA	KS	67402-1084			
Outstanding Balance Beginning This Period	ı		Transact	tion ID : D21BDF9E010A64CD38D7	
33.13					
Amount Incurred This Period	ı	Payment This Period	Outstandi	ing Balance at Close of This Period	
0.00		0.0	20	33.13	
9 9		7 7		yy	
1) SUBTOTALS This Period This Page (optional	l)		··· •	139.78	
2) TOTALS This Period (last page this line num	ber only) ····		···· <b>-</b>	7	
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last r	page only)······	····· <b>·</b>	7	
4) ADD 2) and 3) and carry forward to appropr	iate line of	Summary Page (last page or	nly) ▶	7 7	

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**Excluding Loans** 

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ME OF COMMITTEE (In Full)				
MANN FOR CONGI	RESS			
A. Full Name (Last, First, Middle Initial) of		ditor	Nature of Debt (Pu	
MANN, TRACEY, ROBERT	YARD SIGNS, TO	BE REIMBURSED.		
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Per	iod		Transaction ID :	D2973EB0F4B8C436E878
2974.42	Ä			
		D	0	
Amount Incurred This Period	-	Payment This Period	Outstanding Bala	ince at Close of This Period
0.00		0.0	00	2974.42
B. Full Name (Last, First, Middle Initial) of	Debtor or Cred	litor	N ( D ( D	
MANN, TRACEY, ROBERT,			Nature of Debt (Pu	
	,		REIMBURSED.	
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Per	iod		Transaction ID :	D67A1D51A281243DA91D
64.89				
Amount Incurred This Period		Payment This Period	Outstanding Bala	unce at Close of This Period
0.00			00	64.89
0.00		, , ,		0.100
C. Full Name (Last, First, Middle Initial) of	Debtor or Cre	ditor	Nature of Debt (Pu	rpose):
MANN, TRACEY, ROBERT	, ,		GAS, TO BE REI	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
	I	07402-1004	ID	DD=D445040004050D0
Outstanding Balance Beginning This Per	100		Transaction ID :	DD7D1AE919C3C4079B3
40.00				
Amount Incurred This Period		Payment This Period	Outstanding Bala	ince at Close of This Perio
0.00		0.0	00	40.00
, , , , .		, , , ,	,	,
SUBTOTALS This Period This Page (option	onal)		•	3079.31
				7
TOTALS This Period (last page this line n	umber only) ····		···· <b>-</b>	
TOTAL OUTSTANDING LOANS from Sch	edule C (last p	page only)	<b>&gt;</b>	
				7
ADD 2) and 3) and carry forward to appr	opriate line of	Summary Page (last page o	nly) 🕨	

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 130 OF
FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)	ECC		
A. Full Name (Last, First, Middle Initial) of D. MANN, TRACEY, ROBERT,	Nature of Debt (Purpose): POSTAGE, TO BE REIMBURSED.		
Mailing Address PO BOX 1084			
Total Total Cost PO BOX 1004			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Perio	d		Transaction ID : D1FFC5BC03BEF4115B3C
44.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	44.00
B. Full Name (Last, First, Middle Initial) of De	ebtor or Cred	ditor	Nature of Debt (Purpose):
MANN, TRACEY, ROBERT,	1		CAMPAIGN PHONES SERVICE, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Perio	d		Transaction ID: DDE8689F24F264735AA0
268.37			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	268.37
C. Full Name (Last, First, Middle Initial) of D	Debtor or Cre	editor	Nature of Debt (Purpose):
MANN, TRACEY, ROBERT,	,		GAS, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City	State	Zip Code	_
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Perio	d		Transaction ID : DB6DC55550E8A4ABBAFD
60.14	1		
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00	_ <del></del>		60.14
0.00		0.00	00.14
1) SUBTOTALS This Period This Page (option	al)		372.51
2) TOTALS This Period (last page this line nur	mber only) ····		·
3) TOTAL OUTSTANDING LOANS from Schee	dule C (last p	page only)	·
4) ADD 2) and 3) and carry forward to approp	oriate line of	Summary Page (last page only)	·

**Excluding Loans** 

AME OF COMMITTEE (In Full)  MANN FOR CONGRI	ESS			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): POSTAGE, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period			Transaction ID : D9561AEFE83AC48909F3	
264.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	264.00	
B. Full Name (Last, First, Middle Initial) of Del MANN, TRACEY, ROBERT, ,	otor or Credi	tor	Nature of Debt (Purpose): INK CARTRIDGES, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period			Transaction ID : DF973BC8715D44BB9A83	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	72.20	
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Cred	litor	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period 40.00			Transaction ID : DED6A60ECC4D24A3A8F7	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	40.00	
) SUBTOTALS This Period This Page (optional	)		376.20	
) TOTALS This Period (last page this line num				
) TOTAL OUTSTANDING LOANS from Schedu	ule C (last pa	age only)		
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**Excluding Loans** 

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ME OF COMMITTEE (In Full)				
MANN FOR CONGR	ESS			
A. Full Name (Last, First, Middle Initial) of D		Pebt (Purpose):		
MANN, TRACEY, ROBERT, ,	GAS, TO E	BE REIMBURSED. SEE SCHED. D.		
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	i		Transacti	on ID : DF679E6D92D71457DAF0
42.65				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	42.65
B. Full Name (Last, First, Middle Initial) of De	btor or Credit	or	Nature of D	Pebt (Purpose):
MANN, TRACEY, ROBERT, ,				BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	İ		Transacti	on ID : D9A9B4392E722465CB6A
55.99				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	55.99
C. Full Name (Last, First, Middle Initial) of D	ebtor or Credi	tor		Debt (Purpose): O BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
		07402 1004		
Outstanding Balance Beginning This Period 61.65	i 		Transact	tion ID : DAC23A8DA87CE4045B58
7				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	61.65
SUBTOTALS This Period This Page (optional	ıl)		•	160.29
TOTALS This Period (last page this line num				7
TOTAL OUTSTANDING LOANS from Sched				7
				7
ADD 2) and 3) and carry forward to approp	riate line of Si	ımmary Page (last page or	nly) ▶	7

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**Excluding Loans** 

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PAGE 133 OF FOR LINE NUMBER (check only one)

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AME OF COMMITTEE (In Full)	DECC		
MANN FOR CONGE A. Full Name (Last, First, Middle Initial) of		ditor	Nature of Debt (Purpose):
MANN, TRACEY, ROBERT, ,			HOTEL, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Period	bc		Transaction ID : DF089699D793740CCB5F
122.82			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	122.82
B. Full Name (Last, First, Middle Initial) of D		litor	Nature of Debt (Purpose):
MANN, TRACEY, ROBERT,	,		POSTAGE, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Period	od		Transaction ID : DC0BBF32109E94225843
88.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	88.00
C. Full Name (Last, First, Middle Initial) of MANN, TRACEY, ROBERT,		ditor	Nature of Debt (Purpose): HOTEL, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Period	od		Transaction ID : DEE9DD4E515A14B5C8BE
59.34			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	59.34
SUBTOTALS This Period This Page (option	nal)		270.16
TOTALS This Period (last page this line nu	ımber only) ····		<b>&gt;</b>
TOTAL OUTSTANDING LOANS from Sche	edule C (last p	page only)·····	<b>•</b>
ADD 2) and 3) and carry forward to appro	priate line of	Summary Page (last page only)	<b>&gt;</b>

**Excluding Loans** 

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NAME OF COMMITTEE (In Full)				
MANN FOR CONGR	ESS			
A. Full Name (Last, First, Middle Initial) of De	ebtor or Credi	tor		Pebt (Purpose):
MANN, TRACEY, ROBERT, ,			GAS, TO I	BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	ı		Transacti	on ID : D739DEF6C940D4978BA7
56.00				
Amount Incurred This Period		Payment This Period	Outstand	ng Balance at Close of This Period
0.00		0.0	00	56.00
B. Full Name (Last, First, Middle Initial) of De	btor or Credite	or	Notine of F	)obt (Dumoss):
MANN, TRACEY, ROBERT, ,	or or order			Debt (Purpose): BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	I		Transacti	on ID : D54E84BA2921847C29E0
31.61				
Amount Incurred This Period		Payment This Period	Outstand	ng Balance at Close of This Period
0.00		0.0	00	31.61
C. Full Name (Last, First, Middle Initial) of D. MANN, TRACEY, ROBERT, ,	ebtor or Credi	tor		Debt (Purpose): BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period	l	•	Transaci	tion ID : D713DC80984334F9591C
53.64				
Amount Incurred This Period		Payment This Period	Outstand	ing Balance at Close of This Period
		<del></del>		
0.00		0.0	0	53.64
1) SUBTOTALS This Period This Page (optional	ıl)		> [	141.25
2) TOTALS This Period (last page this line num	nber only) ······			
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropri	riate line of Su	ımmary Page (last page or	nly) ►	9 9 9

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**Excluding Loans** 

NA

MANN FOR CONGR	ESS		
A. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.		
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	d		Transaction ID : DBCE3EC13098D4EFC82E
50.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00	لنا ا	0.00	50.00
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Cred	ditor	Nature of Debt (Purpose): 4X8 SIGNS, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	d		Transaction ID: D2A793527AEBD4962876
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	1325.63
C. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,		ditor	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	t		Transaction ID: D4A924BA1E30247D88B6
46.26			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	46.26
1) SUBTOTALS This Period This Page (optional	al)		1421.89
2) TOTALS This Period (last page this line num	nber only) ····		-
3) TOTAL OUTSTANDING LOANS from Sched	lule C (last p	page only)·····	
4) ADD 2) and 3) and carry forward to approp	riate line of	Summary Page (last page only)	

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**Excluding Loans** 

#### (Use separate schedule(s) for each numbered line)

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): GAS, TO BE REIMBURSED. MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D405801DE1F89404FAFB Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 53.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , GAS, TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: D5AFB9F0F7B4E4E79857 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 60.53 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , GAS, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: D2FB6FFB0DE33409D9F5 37.80 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 37 80 0.00 1) SUBTOTALS This Period This Page (optional) ..... 151.33 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

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NA	ME OF COMMITTEE (In Full)					
	MANN FOR CONGRE					
	A. Full Name (Last, First, Middle Initial) of De		Nature of Debt (Purpose):			
	MANN, TRACEY, ROBERT, ,				FAX LINE, TO BE REIMBURSED.	
	Mailing Address PO BOX 1084					
	City	State	Zip Code			
ŀ	SALINA	KS	67402-1084			
	Outstanding Balance Beginning This Period			Transaction	on ID : D8EC88519E0974E3AA7A	
	21.62					
	Amount Incurred This Period	ı	Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00		0.00		21.62	
	0.00		0.00		21.02	
<u>-</u>	B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	otor or Creditor			ebt (Purpose): BE REIMBURSED.	
	Mailing Address PO BOX 1084					
Ì	City	State	Zip Code			
	SALINA	KS	67402-1084			
	Outstanding Balance Beginning This Period			Transaction	on ID : DE961D25A4222457880C	
	55.18					
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00		0.0		55.18	
ŀ	C. Full Name (Last, First, Middle Initial) of De	btor or Credito	r	Nature of D	light (Purposs):	
	MANN, TRACEY, ROBERT, ,			POSTAGE	Nature of Debt (Purpose): POSTAGE AND COPY PAPER, TO BE REIMBURSED.	
	Mailing Address PO BOX 1084					
ĺ	City	State	Zip Code			
ŀ	SALINA	KS	67402-1084			
	Outstanding Balance Beginning This Period			Transact	ion ID : DE7DEF78AB7CF49CF8F8	
	219.10					
	Amount Incurred This Period	I	Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00		0.00	)	219.10	
1)	SUBTOTALS This Period This Page (optional)	)		· •	295.90	
2)	TOTALS This Period (last page this line number	ber only) ······		· ·	, ,	
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last page	e only)	·	, , , , , , , , , , , , , , , , , , , ,	
4)	ADD 2) and 3) and carry forward to appropri	ate line of Sun	nmary Page (last page on	ly) ►		

PAGE 137 OF

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**Excluding Loans** 

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PAGE 138 OF FOR (che

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			, , , , , , , , , , , , , , , , , , , ,	
NAME OF COMMITTEE (In Full)  MANN FOR CONGR	ESS			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): YARD SIGNS, TO BE REIMBURSED.	
Mailing Address PO BOX 1084	Mailing Address PO BOX 1084			
City SALINA	State         Zip Code           KS         67402-1084		-	
Outstanding Balance Beginning This Period			Transaction ID : D666DCF6FB7EC4BC2842	
2704.83				
Amount Incurred This Period	1	Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	2704.83	
B. Full Name (Last, First, Middle Initial) of Del MANN, TRACEY, ROBERT, ,	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period			Transaction ID : D55553B4BED0946009EC	
124.81				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	124.81	
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Cre	editor	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period 46.55			Transaction ID : DF1DCF4ECA69242CBB7D	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	46.55	
1) SUBTOTALS This Period This Page (optional	l)		2876.19	
2) TOTALS This Period (last page this line num	ber only) ···		-	
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last <sub>l</sub>	page only)·····		
4) ADD 2) and 3) and carry forward to appropr	iate line of	Summary Page (last page only)		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 139 OF FOR LINE NUMBER: (check only one)

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				, , , , , , , , , , , , , , , , , , , ,	
	ME OF COMMITTEE (In Full)  MANN FOR CONGRE	ESS			
	A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): CAMPAIGN PHONES SERVICE, TO BE REIMBURSED.			
Mailing Address PO BOX 1084				-	
ŀ	City	State Zip Code		1	
	SALINA	KS	67402-1084		
	Outstanding Balance Beginning This Period			Transaction ID : DF0041BF79BC54207A0F	
	268.37	268.37			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	268.37	
	B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	tor or Cred	ditor	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.	
	Mailing Address PO BOX 1084			_	
	City SALINA	State KS	Zip Code 67402-1084	-	
	Outstanding Balance Beginning This Period	Transaction ID : D446CA1FC90274BE288B			
	52.04			Transaction 15 : 54400ATI 000214522005	
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	52.04	
-	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  MANN, TRACEY, ROBERT, ,		Nature of Debt (Purpose): GAS, TO BE REIMBURSED.		
	Mailing Address PO BOX 1084				
Ī	City	State	Zip Code		
-	SALINA	KS	67402-1084		
	Outstanding Balance Beginning This Period 54.11			Transaction ID : DEC1D1B1BF40743C9917	
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	54.11	
1)	SUBTOTALS This Period This Page (optional)	)		374.52	
2)	TOTALS This Period (last page this line number	per only) ····			
3)	TOTAL OUTSTANDING LOANS from Schedu	lle C (last p	page only)		
4)	ADD 2) and 3) and carry forward to appropri	ate line of	Summary Page (last page only)		

**Excluding Loans** 

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NAME OF COMMITTEE (In Full)						
MANN FOR CONGR	ESS					
A. Full Name (Last, First, Middle Initial) of [	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor					
MANN, TRACEY, ROBERT,	MANN, TRACEY, ROBERT, ,					
Mailing Address PO BOX 1084	Mailing Address PO BOX 1084					
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period	d		Transac	tion ID : D5896967B57CE4D928B4		
111.97						
Amount Incurred This Period		Doumont This Daried	Outoton	ding Balanca at Class of This Baried		
Amount incurred This Period	1	Payment This Period	-	ding Balance at Close of This Period		
0.00		0.0	00	111.97		
B. Full Name (Last, First, Middle Initial) of D	ebtor or Credit	or	Nature of	Debt (Purpose):		
MANN, TRACEY, ROBERT,	,			IG COSTS, TO BE REIMBURSED.		
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period	d		Transac	tion ID : D30341DAB9D874F22841		
40.00						
Amount Incurred This Period		Payment This Period	Outstand	ding Balance at Close of This Period		
0.00		0.0	00	40.00		
O. F. II Never (Leat First Middle 1995) of I	2 - 1 - 1	1	<u> </u>			
C. Full Name (Last, First, Middle Initial) of I		tor		Nature of Debt (Purpose): CATERING COSTS, TO BE REIMBURSED.		
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Perio	d d		Transa	ction ID : DB0E01AC4DC22429D8C7		
			ITalisa	CHOILID : DB0E01AC4DC22429D0C7		
76.25						
Amount Incurred This Period		Payment This Period	Outstand	ding Balance at Close of This Period		
0.00		0.0	00	76.25		
1) SUBTOTALS This Period This Page (option	al)		···· <b> </b>	228.22		
2) TOTALS This Period (last page this line nu	mber only) ······		···· <b>·</b>	, ,		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			···· <b>&gt;</b>			
4) ADD 2) and 3) and carry forward to approp	oriate line of Su	ummary Page (last page o	nly) 🕨			

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**Excluding Loans** 

1)

2)

3)

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NAME OF COMMITTEE (In Full)

MANN FOR CONGRI	ESS			
A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): FOOD FOR MEET AND GREET, TO BE REIMBURSED.			
Mailing Address PO BOX 1084			-	
City	State	Zip Code	-	
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period 25.63			Transaction ID : D6AE8D41FC82B4E7E802	
Amount Incurred This Period	P	ayment This Period	Outstanding Balance at Close of This Period	
0.00	,	0.00	25.63	
B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	otor or Creditor		Nature of Debt (Purpose): POSTAGE, TO BE REIMBURSED.	
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period			Transaction ID : DD95D884F57FD4759BCC	
91.02				
Amount Incurred This Period	P	ayment This Period	Outstanding Balance at Close of This Period	
0.00	,	0.00	91.02	
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Creditor		Nature of Debt (Purpose): GAS, TO BE REIMBURSED.	
Mailing Address PO BOX 1084			-	
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period		I	Transaction ID : DB29165D69B7A4894BA6	
60.00				
Amount Incurred This Period	P	ayment This Period	Outstanding Balance at Close of This Period	
0.00	,	0.00	60.00	
SUBTOTALS This Period This Page (optional	)		176.65	
TOTALS This Period (last page this line number	ber only) ······			
TOTAL OUTSTANDING LOANS from Schedu	ıle C (last page	only)·····		
ADD 2) and 3) and carry forward to appropri	ate line of Sum	mary Page (last page only)		

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**Excluding Loans** 

NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line)

PAGE 142 OF FOR LINE NUMBER: (check only one)

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Ν	MANN FOR CONGRE	ESS		
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): GAS, TO BE REIMBURSED.
ŀ	Mailing Address PO BOX 1084			
	City SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period			Transaction ID : D9A5C62DCCF374FD1A0C
	30.00			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	30.00
-	B. Full Name (Last, First, Middle Initial) of Deb MANN, TRACEY, ROBERT, ,	tor or Credito	r	Nature of Debt (Purpose): FAX LINE, TO BE REIMBURSED.
	Mailing Address PO BOX 1084			
	City SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period  21.62  Amount Incurred This Period  0.00		Payment This Period 0.00	Transaction ID: D4580BF5CD12549DA9EF  Outstanding Balance at Close of This Period  21.62
-	C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Credit	or	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.
	Mailing Address PO BOX 1084			
Ī	City	State KS	Zip Code	
_	SALINA  Outstanding Balance Beginning This Period  56.99	ro	67402-1084	Transaction ID : D33D2A5E5DE4343C29E7
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	56.99
1)	SUBTOTALS This Period This Page (optional)	)	·····	108.61
2)	TOTALS This Period (last page this line number	per only)		
3)	TOTAL OUTSTANDING LOANS from Schedu	ile C (last pag	e only)·····	7 7 7
4)	ADD 2) and 3) and carry forward to appropri	ate line of Sui	mmary Page (last page only)	7

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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#### NAME OF COMMITTEE (In Full) MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): POSTAGE, TO BE REIMBURSED. MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: D9D0473DCD4D048718A0 Outstanding Balance Beginning This Period 00.088 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 880.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , GAS, TO BE REIMBURSED. Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: DD981198FD2564306AC1 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 40.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , GAS, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: DA1F11E1D13134BB8B8A 31.31 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 31 31 0.00 1) SUBTOTALS This Period This Page (optional) ..... 951.31 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 144 OF FOR LINE NUMBER: (check only one)

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	ME OF COMMITTEE (In Full)					
N	MANN FOR CONGRI	ESS				
	A. Full Name (Last, First, Middle Initial) of De	btor or Cre	ditor		ebt (Purpose):	
	MANN, TRACEY, ROBERT, ,			CAMPAIGN	I PHONES, TO BE REIMBURSED.	
ŀ	Mailing Address PO BOX 1084					
	aig / taa.995 TO BOX 1004					
	City	State	Zip Code			
ŀ	SALINA	KS	67402-1084			
	Outstanding Balance Beginning This Period			Transactio	n ID : DCFB657A9CD1944999ED	
	1144.89	Payment This Period				
	Amount Incurred This Period			Outstandin	g Balance at Close of This Period	
	0.00		0.	00	1144.89	
	7		, , , , ,		, , , ,	
ŀ	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	litor	Nature of De	ebt (Purpose):	
	MANN, TRACEY, ROBERT, ,				E RÈIMBURSED.	
ŀ	Mailing Address PO ROX 1084					
	Mailing Address PO BOX 1084					
Ī	City	State	Zip Code			
ļ	SALINA KS 67402-1084					
	Outstanding Balance Beginning This Period			Transactio	n ID : D1D0265CDDB344636ACC	
	34.00					
	Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of This Period	
	0.00		0	00	34.00	
	0.00		01100			
Ī	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor				ebt (Purpose):	
	MANN, TRACEY, ROBERT, ,				GAS, TO BE REIMBURSED.	
ŀ	Mailing Address PO BOX 1084					
	Mailing Address PO BOX 1084					
Ī	City	State	Zip Code			
ļ	SALINA	KS	67402-1084			
Outstanding Balance Beginning This Peri				Transaction	on ID : D62675D003969459199A	
	50.00					
	Amount Incurred This Period		Payment This Period	Outstandin	g Balance at Close of This Period	
	0.00		0.	00	50.00	
	, , ,		, , , , , ,		7	
1)	SUBTOTALS This Period This Page (optional	)		···· • L	1228.89	
2)	TOTALS This Period (last page this line num	ber only) ····				
_				_		
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	age only)	··· <b>}</b>		
4)	ADD 2) and 3) and carry forward to appropri	ate line of	Summary Page (last page o	only) ▶	· · · · · · · · ·	
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**Excluding Loans** 

NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line)

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MANN FOR CONGR	ESS		
A. Full Name (Last, First, Middle Initial) of D MANN, TRACEY, ROBERT, ,	Nature of Debt (Purpose): GAS, TO BE REIMBURSED.		
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	t L		Transaction ID: D5983DC83923543EDBA6
Amount Incurred This Period	1	Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	40.00
B. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,		ditor	Nature of Debt (Purpose): VOLUNTEER FOOD, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	t		Transaction ID : D8E160D848A804A6F925
50.77			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	50.77
C. Full Name (Last, First, Middle Initial) of DMANN, TRACEY, ROBERT, ,		editor	Nature of Debt (Purpose): EVENT DECORATIONS, TO BE REIMBURSED.
Mailing Address PO BOX 1084			
City SALINA	State KS	Zip Code 67402-1084	
Outstanding Balance Beginning This Period	t t		Transaction ID : D3828E6A6A2574510853
38.63  Amount Incurred This Period	J	Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	38.63
SUBTOTALS This Period This Page (optional	al)		129.40
TOTALS This Period (last page this line num	nber only) ···		
TOTAL OUTSTANDING LOANS from Scheo	dule C (last p	page only)	
ADD 2) and 3) and carry forward to approp	riate line of	Summary Page (last page only)	

DEBTS AND OBLIGATIONS			for each numbered line)	(check only one) 9
Excluding Loans  NAME OF COMMITTEE (In Full)			Turribered line)	<b>                                     </b>
MANN FOR CONGRI	-SS			
A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,		r		lebt (Purpose): ECORATIONS, TO BE SED.
Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084		
Outstanding Balance Beginning This Period			Transacti	on ID : D56F29DAC66104506A97
110.95				
Amount Incurred This Period	1	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	0	110.95
B. Full Name (Last, First, Middle Initial) of Det MANN, TRACEY, ROBERT, ,	otor or Creditor			lebt (Purpose): HONES, TO BE REIMBURSED.
Mailing Address PO BOX 1084				
City SALINA	State	Zip Code		
	KS	67402-1084		
Outstanding Balance Beginning This Period			Transacti	on ID : DE4F7EB0DF4D64E848F6
120.39				
Amount Incurred This Period		Payment This Period		ng Balance at Close of This Period
0.00		0.0	00	120.39
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	btor or Credito	r		lebt (Purpose): N PHONES, TO BE REIMBURSED.
Mailing Address PO BOX 1084				
City	State	Zip Code		
SALINA	KS	67402-1084		
Outstanding Balance Beginning This Period			Transact	ion ID : D15431913668E40219A8
1103.10				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	1103.10
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3) TOTAL OUTSTANDING LOANS from Schedu	ıle C (last page	e only)·····	··· •	
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**Excluding Loans** 

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AME OF COMMITTEE (In Full)  MANN FOR CONGR	ESS					
A. Full Name (Last, First, Middle Initial) of IMANN, TRACEY, ROBERT,	Nature of Debt (Purpose): CAMPAIGN MNG APT COMMUNICATIONS PACKAGE, TO BE REIMBURSED.					
Mailing Address PO BOX 1084	Mailing Address PO BOX 1084					
City SALINA	State KS	Zip Code 67402-1084				
Outstanding Balance Beginning This Perio	d		Transaction ID: D49AE494BAA99477895A			
120.62						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	120.62			
B. Full Name (Last, First, Middle Initial) of DMANN, TRACEY, ROBERT,		ditor	Nature of Debt (Purpose): DOMAIN NAME REGISTRATIONS, TO BE REIMBURSED.			
Mailing Address PO BOX 1084						
City SALINA	State KS	Zip Code 67402-1084				
Outstanding Balance Beginning This Perio	od		Transaction ID : D859C5F4AB282436389C			
405.82	]					
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	405.82			
C. Full Name (Last, First, Middle Initial) of I MANN, TRACEY, ROBERT,		editor	Nature of Debt (Purpose): FEC REPORTING - TO BE REIMBURSED			
Mailing Address PO BOX 1084						
City	State	Zip Code				
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Period	od		Transaction ID: DB32ADF96BAE845CB89F			
150.00						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	150.00			
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**Excluding Loans** 

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AME OF COMMITTEE (In Full)  MANN FOR CONGRI	ESS				
A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	MANN, TRACEY, ROBERT, ,				
Mailing Address PO BOX 1084	Mailing Address PO BOX 1084				
City SALINA	State KS	Zip Code 67402-1084			
Outstanding Balance Beginning This Period			Transaction ID : DEFDBE5BBACE04A61A45		
52.50					
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	52.50		
B. Full Name (Last, First, Middle Initial) of Del MANN, TRACEY, ROBERT, ,	otor or Credit	or	Nature of Debt (Purpose): FEC REPORTING - TO BE REIMBURSED		
Mailing Address PO BOX 1084					
City SALINA	State KS	Zip Code 67402-1084			
Outstanding Balance Beginning This Period			Transaction ID : DB4AF03A1A2524E4EABF		
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	135.00		
C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Cred	itor	Nature of Debt (Purpose): FEC REPORTING - TO BE REIMBURSED		
Mailing Address PO BOX 1084					
City SALINA	State KS	Zip Code 67402-1084			
Outstanding Balance Beginning This Period			Transaction ID : D6E7A8CC734DB4F19BF3		
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	105.71		
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PAGE 148 OF

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**Excluding Loans** 

NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line)

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PAGE 149 OF

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### MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FEC REPORTING - TO BE REIMBURSED MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: DEDEC0C35E4A646138FB Outstanding Balance Beginning This Period 100.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 100.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , FEC REPORTING - TO BE REIMBURSED Mailing Address PO BOX 1084 City State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: DC055A926958445CEB41 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 75.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , DEPOSIT TO GENERAL ACCOUNT, TO BE REIMBURSED. Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: DB42428BD335B45D8B4D

Payment This Period

0.00

726.89

Amount Incurred This Period

Outstanding Balance at Close of This Period

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	ME OF COMMITTEE (In Full)			I mann	ocica iiric)		×	10
	MANN FOR CONGRE	<b>-</b> SS						
	A. Full Name (Last, First, Middle Initial) of Del MANN, TRACEY, ROBERT, ,		litor		Nature of D DEPOSIT	Debt (Purpose): TO PRIMARY ACCOUN' SED.	т, тс	) BE
	Mailing Address PO BOX 1084					<b>U</b>		
	City	State	Zip Code					
	SALINA	KS	67402-1084					
	Outstanding Balance Beginning This Period				Transaction	on ID : D8666DE65FA30	)415I	FB03
	540.43							
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close of	This	Period
	0.00		0.0			5	40.4	3
	7		7 7 7			, , , , , , , , , , , , , , , , , , , ,	-	
	B. Full Name (Last, First, Middle Initial) of Deb MANN FOR CONGRESS	tor or Credi	tor			ebt (Purpose): DRTING - TO BE REIMB	URS	ED
	Mailing Address PO BOX 1084							
ŀ	City	State	Zip Code					
	SALINA	KS	67402-1084					
	Outstanding Balance Beginning This Period				Transaction	on ID : DE46E124FFEEI	F4BC	C832
	150.00							
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close of	This	Period
	0.00		0.0				50.00	
	C. Full Name (Last, First, Middle Initial) of De MANN FOR CONGRESS	btor or Cred	litor			ebt (Purpose): DRTING - TO BE REIMB	URS	ED
	Mailing Address PO BOX 1084							
	City	State	Zip Code					
	SALINA	KS	67402-1084					
	Outstanding Balance Beginning This Period				Transact	ion ID : DC314328C29D	D4D	0C8F5
	75.00							
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close of	This	Period
	0.00		0.0	00		7	75.00	)
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**Excluding Loans** 

NAME OF COMMITTEE (In Full)

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# MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MANN, TRACEY, ROBERT, , Mailing Address PO BOX 1084 City State Zip Code SALINA KS 67402-1084 Outstanding Balance Beginning This Period Nature of Debt (Purpose): FEC FILING- TO BE REIMBURSED Transaction ID : D80AA297EFC134CA68CB

75.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	75.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  MANN, TRACEY, ROBERT, ,			Nature of Debt (Purpose): FEC FILING- TO BE REIMBURSED
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning	g This Period		Transaction ID : D4C3A3A07EEEA41EDABC

75.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	75.00

C. Full Name (Last, First, Middle In MANN, TRACEY, ROE	*	ditor	Nature of Debt (Purpose): FEC FILING- TO BE REIMBURSED
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning 1	his Period		Transaction ID : D9DC33ADC47D146FD98

Outstanding Balance Beginning This Period		Transaction ID: D9DC33ADC47D146FD98
75.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	75.00

1)	SUBTOTALS This Period This Page (optional)	<b>•</b>	Ι	Ξ	,	Ξ	Ξ	,	22	5.00	
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NA	ME OF COMMITTEE (In Full)								
٨	MANN FOR CONGRE	ESS							
	A. Full Name (Last, First, Middle Initial) of De	btor or Cred	litor			ebt (Purpose):			
	MANN, TRACEY, ROBERT, ,				FEC FILING- TO BE REIMBURSED				
	Mailing Address PO BOX 1084								
Ī	City	State	Zip Code						
	SALINA	KS	67402-1084						
	Outstanding Balance Beginning This Period				Transaction	on ID : D9262EE2FA30F477DA04			
	75.00								
	Amount Incurred This Period		Payment This Period		Outstandir	as Palanco at Class of This Pariod			
	Amount incurred This Feriod		r ayment mis r enou	-	Outstandii				
	0.00		0.0	00		75.00			
Ī	B. Full Name (Last, First, Middle Initial) of Deb	tor or Credi	tor		Nature of D	eht (Purnose):			
	MANN, TRACEY, ROBERT, ,								
	Mailing Address PO BOX 1084								
ŀ	City	State	Zip Code						
	SALINA	KS	67402-1084						
	Outstanding Balance Beginning This Period				Transactio	on ID : D02775099E87F493B96C			
	75.00								
	Amount Incurred This Period		Payment This Period		Outstandir	ng Balance at Close of This Period			
	0.00		0.0	00		75.00			
	, ,		, , ,			,			
	C. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	me (Last, First, Middle Initial) of Debtor or Creditor  Nature of Debt (Purpose): FEC FILING BY JON DAUGHARTHY- TO BE							
	NA-99 on Addition								
	Mailing Address PO BOX 1084								
Ī	City	State	Zip Code						
	SALINA	KS	67402-1084	Transaction ID : D9262EE2FA30F477DA04  Transaction ID : D9262EE2FA30F477DA04  Transaction ID : D9262EE2FA30F477DA04  Outstanding Balance at Close of This Period 75.00  Nature of Debt (Purpose): FEC FILING- TO BE REIMBURSED  Transaction ID : D02775099E87F493B96C  Outstanding Balance at Close of This Period 75.00  Nature of Debt (Purpose): FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED  Transaction ID : DE96CA318E4094DAFB9D  Outstanding Balance at Close of This Period 0.00  Transaction ID : DE96CA318E4094DAFB9D  Outstanding Balance at Close of This Period 0.00  75.00					
	Outstanding Balance Beginning This Period				Transacti	ion ID : DE96CA318E4094DAFB9D			
	75.00								
	Amount Incurred This Period		Payment This Period		Outstandir	ng Balance at Close of This Period			
	0.00		0.0	00		75.00			
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AME OF COMMITTEE (In Full)			
MANN FOR CONGR	ESS		
A. Full Name (Last, First, Middle Initial) of I	Nature of Debt (Purpose): FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED		
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Perio	d		Transaction ID : D24CFF160DE7F4445A3F
150.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	150.00
B. Full Name (Last, First, Middle Initial) of D. MANN, TRACEY, ROBERT,		ditor	Nature of Debt (Purpose): FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Perio	d		Transaction ID : D9C8A1CC148AA4CDD8B6
150.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	150.00
C. Full Name (Last, First, Middle Initial) of [	Debtor or Cre	editor	Nature of Debt (Purpose):
MANN, TRACEY, ROBERT,	,		FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED
Mailing Address PO BOX 1084			
City	State	Zip Code	
SALINA	KS	67402-1084	
Outstanding Balance Beginning This Perio	d		Transaction ID: D8DB11D06E4794B2D893
150.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	150.00
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**Excluding Loans** 

NAME OF COMMITTEE (In Full)

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# MANN FOR CONGRESS

			-			
A. Full Name (Last, First, Middle Initial) of IMANN, TRACEY, ROBERT,	Nature of Debt (Purpose): FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED					
Mailing Address PO BOX 1084						
City	State	Zip Code	_			
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Perio	Outstanding Balance Beginning This Period					
25.00						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00	الله	0.00	25.00			
B. Full Name (Last, First, Middle Initial) of D	ebtor or Cred	ditor	Nature of Debt (Purpose):			
MANN, TRACEY, ROBERT,			FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED			
Mailing Address PO BOX 1084						
City	State	Zip Code	_			
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Perio	d		Transaction ID : D57691FC82C734A14A1F			
100.00						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	100.00			
C. Full Name (Last, First, Middle Initial) of [	Debtor or Cre	ditor	Nature of Debt (Purpose):			
MANN, TRACEY, ROBERT,	,		FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED			
Mailing Address PO BOX 1084						
City	State	Zip Code	7			
SALINA	KS	67402-1084				
Outstanding Balance Beginning This Perio	d		Transaction ID : DBDCB9C9463274C73B14			
75.00						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	75.00			
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OF COMMITTEE (In Full)	

(check only one) numbered line) **x** 10 MANN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IN-KIND - FEC FILING BY JON MANN, TRACEY, ROBERT, , DAUGHARTHY- TO BE REIMBURSED Mailing Address PO BOX 1084 State City Zip Code **SALINA** KS 67402-1084 Transaction ID: DECF03D28C36847DC874 Outstanding Balance Beginning This Period 75.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 75.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , IN-KIND - FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED Mailing Address PO BOX 1084 State Zip Code **SALINA** 67402-1084 KS Outstanding Balance Beginning This Period Transaction ID: D77C090BC2C4C45F3942 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 75.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANN, TRACEY, ROBERT, , IN-KIND - FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED Mailing Address PO BOX 1084 City State Zip Code KS **SALINA** 67402-1084 Outstanding Balance Beginning This Period Transaction ID: DAD6059603DE449A1AA6 75.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 75.00 0.00 1) SUBTOTALS This Period This Page (optional) ...... 225.00 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

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**Excluding Loans** 

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	1ANN FOR CONGRI	ESS		
,	A. Full Name (Last, First, Middle Initial) of De MANN, TRACEY, ROBERT, ,	ebtor or Cre	editor	Nature of Debt (Purpose): IN-KIND - FEC FILING BY JON DAUGHARTHY- TO BE REIMBURSED
Ī	Mailing Address PO BOX 1084			
	City	State Zip Code		
F	SALINA  Outstanding Palance Paginning This Paying	KS	67402-1084	Transaction ID : DD00D4A6263C944E8BC1
	Outstanding Balance Beginning This Period 75.00			Transaction ib . DD00D4A0203C544E6BC1
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	75.00
ħ	B. Full Name (Last, First, Middle Initial) of Del	otor or Cred	ditor	Nature of Debt (Purpose):
	MANN, TRACEY, ROBERT, ,			OFFICE SUPPLIES
Ī	Mailing Address PO BOX 1084			
	City SALINA	State KS	Zip Code 67402-1084	
	Outstanding Balance Beginning This Period 0.00			Transaction ID : DFD940B30D6274545946
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	997.21		0.00	997.21
(	C. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	editor	Nature of Debt (Purpose):
Ī	Mailing Address			_
(	City	State	Zip Code	
	Outstanding Balance Beginning This Period			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	Amount Incurred This Period		rayment mis renou	Outstanding Balance at Close of This Period
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