

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
Team Marshall

ADDRESS (number and street) PO Box 26141  
Check if different than previously reported. (ACC) Alexandria VA 22313

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00632950 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] / [ ] / [ ] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] / [ ] / [ ] in the State of [ ]

5. Covering Period [04] / [01] / [2018] through [06] / [30] / [2018]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Marston, Chris, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Marston, Chris, , , [Electronically Filed] Date [07] / [11] / [2018]

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Team Marshall**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		2349.60
(b) Cash on Hand at Beginning of Reporting Period.....	1899.59	
(c) Total Receipts (from Line 19) .....	82100.00	203350.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	83999.59	205699.60
7. Total Disbursements (from Line 31).....	80715.31	202415.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3284.28	3284.28
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Team Marshall**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	64100.00	167850.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	64100.00	167850.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	18000.00	35500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	82100.00	203350.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	82100.00	203350.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	82100.00	203350.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1284.28	3076.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1284.28	3076.70
22. Transfers to Affiliated/Other Party Committees.....	79431.03	199338.62
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	80715.31	202415.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	80715.31	202415.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	82100.00	203350.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	82100.00	203350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1284.28	3076.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1284.28	3076.70

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

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

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)  
**Team Marshall**

**A. DOLE, ROBERT, J., HON,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 NEW HAMPSHIRE AVE NW  
 City WASHINGTON State DC Zip Code 20037-2407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ATTORNEY Occupation (for Individual) ALSTON & BIRD LLP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11A.3104**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. GEDULDIG, SAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 K STREET, NW SUITE 650  
 City WASHINGTON State DC Zip Code 20005-4048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CGCN GROUP Occupation (for Individual) GOVERNMENT RELATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 11 / 2018  
**Transaction ID : SA11A.3067**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**C. HARSHBERGER, GARY, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1302 UNIVERSITY DR  
 City DODGE CITY State KS Zip Code 67801-2946  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HARSHBERGER ENTERPRISES Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 04 / 16 / 2018  
**Transaction ID : SA11A.3045**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	17500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A. KLOTZ, CHRISTIE, KAYE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 86  
 City HOLCOMB State KS Zip Code 67851-0086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KLOTZ SAND CO., INC. Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 14100.00

Date of Receipt 04 / 30 / 2018  
**Transaction ID : SA11A.3060**  
 Amount of Each Receipt this Period 6600.00  
 Memo Item  
**CONTRIBUTION**

**B. WLC COMPANY**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 901 APOLLO ST  
 City LIBERAL State KS Zip Code 67901-5520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 04 / 16 / 2018  
**Transaction ID : SA11A.3046**  
 Amount of Each Receipt this Period 40000.00  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW

**C. WILLIS, PATRICIA, JO, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 901 APOLLO ST  
 City LIBERAL State KS Zip Code 67901-5520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 04 / 16 / 2018  
**Transaction ID : SA11A.3048**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item  
**CONTRIBUTION**  
 PARTNERSHIP ATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	46600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WILLIS, THOMAS, MCKAY, ,

Mailing Address 901 APOLLO ST

City LIBERAL    State KS    Zip Code 67901-5520

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

Name of Employer (for Individual) CONESTOGA ENERGY PARTNERS    Occupation (for Individual) CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 16 / 2018

**Transaction ID : SA11A.3047**

Amount of Each Receipt this Period  
20000.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	64100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A. AUSTIN SCOTT FOR CONGRESS INC.**

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

Mailing Address PO BOX 2530

City TIFTON	State GA	Zip Code 31793-2530
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00482737

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2018

**Transaction ID : SA11C.3062**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION PAC**

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

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON	State VA	Zip Code 20191-4326
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00343459

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2018

**Transaction ID : SA11C.3137**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC**

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

Mailing Address 316 PENNSYLVANIA AVE SE  
SUITE 401

City WASHINGTON	State DC	Zip Code 20003-1172
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00503680

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2018

**Transaction ID : SA11C.3136**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A. INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL AC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 K STREET NW  
SUITE 700

City WASHINGTON State DC Zip Code 20006-1135

FEC ID number of contributing federal political committee. **C** C00084491

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2018

**Transaction ID : SA11C.3068**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. LIBERTY MARITIME PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1979 MARCUS AVENUE  
SUITE 200

City LAKE SUCCESS State NY Zip Code 11042-1059

FEC ID number of contributing federal political committee. **C** C00485466

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2018

**Transaction ID : SA11C.3119**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. LOCKTON INC PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 444 WEST 47TH STREET SUITE 900

City KANSAS CITY State MO Zip Code 64112-1906

FEC ID number of contributing federal political committee. **C** C00652529

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2018

**Transaction ID : SA11C.3135**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A. OLSSON FRANK AND WEEDA P C FUND FOR AMERICAN VALUES PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 NEW HAMPSHIRE AVE. NW  
 SUITE 500  
 City WASHINGTON State DC Zip Code 20037-2443  
 FEC ID number of contributing federal political committee. **C** C00359687  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11C.3105**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. PLAINS COTTON GROWERS INC PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4517 W LOOP 289  
 City LUBBOCK State TX Zip Code 79414-1235  
 FEC ID number of contributing federal political committee. **C** C00599084  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2018  
**Transaction ID : SA11C.3118**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF OR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 317 MASSACHUSETTS AVENUE, NE  
 1ST FLOOR  
 City WASHINGTON State DC Zip Code 20002-5769  
 FEC ID number of contributing federal political committee. **C** C00343137  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11C.3106**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A. SMITHFIELD FOODS INC PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 200 COMMERCE STREET  
City SMITHFIELD State VA Zip Code 23430-1204  
FEC ID number of contributing federal political committee. **C** C00359075  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2018  
**Transaction ID : SA11C.3108**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item  
CONTRIBUTION

**B. SYNGENTA CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (SY**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1775 PENNSYLVANIA AVENUE NW SUITE 600  
City WASHINGTON State DC Zip Code 20006-4602  
FEC ID number of contributing federal political committee. **C** C00363945  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2018  
**Transaction ID : SA11C.3107**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item  
CONTRIBUTION

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	18000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2018
Mailing Address 1593 SPRING HILL RD		FEC Identification Number C <b>Transaction ID : SB21B.I2556</b> Amount of Each Disbursement this Period 250.00
City VIENNA	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE SERVICES	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 1593 SPRING HILL RD		FEC Identification Number C <b>Transaction ID : SB21B.I2663</b> Amount of Each Disbursement this Period 250.00
City VIENNA	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE SERVICES	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address 1593 SPRING HILL RD		FEC Identification Number C <b>Transaction ID : SB21B.I2664</b> Amount of Each Disbursement this Period 250.00
City VIENNA	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE SERVICES	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A. ELECTION CFO LLC**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2555

Amount of Each Disbursement this Period: 534.28

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	534.28
<b>TOTAL</b> This Period (last page this line number only).....▶	1284.28

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Team Marshall**

Full Name (Last, First, Middle Initial)

**A. KANSANS FOR MARSHALL**

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2018

Mailing Address PO BOX 1588

FEC Identification Number

C C00576173

City  
GREAT BEND

State  
KS

Zip Code  
67530

**Transaction ID : SB22.I2557**

Amount of Each Disbursement this Period

2630.34

Purpose of Disbursement  
DISTRIBUTION OF NET PROCEEDS

Category/  
Type

Candidate Name

**MARSHALL, ROGER, W, ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Memo Item

State: KS District: 01

Full Name (Last, First, Middle Initial)

**B. KANSANS FOR MARSHALL**

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2018

Mailing Address PO BOX 1588

FEC Identification Number

C C00576173

City  
GREAT BEND

State  
KS

Zip Code  
67530

**Transaction ID : SB22.I2558**

Amount of Each Disbursement this Period

2630.34

Purpose of Disbursement  
DISTRIBUTION OF NET PROCEEDS

Category/  
Type

Candidate Name

**MARSHALL, ROGER, W, ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Memo Item

State: KS District: 01

Full Name (Last, First, Middle Initial)

**C. KANSANS FOR MARSHALL**

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2018

Mailing Address PO BOX 1588

FEC Identification Number

C C00576173

City  
GREAT BEND

State  
KS

Zip Code  
67530

**Transaction ID : SB22.I2666**

Amount of Each Disbursement this Period

13831.18

Purpose of Disbursement  
NET DISTRIBUTION

Category/  
Type

Candidate Name

**MARSHALL, ROGER, W, ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Memo Item

State: KS District: 01

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

19091.86

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

Full Name (Last, First, Middle Initial)  
**A. KANSANS FOR MARSHALL**

Mailing Address PO BOX 1588

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement NET DISTRIBUTION

Candidate Name **MARSHALL, ROGER, W, ,**

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼

State: KS District: 01

Date of Disbursement: 06 / 30 / 2018

FEC Identification Number: **C00576173**  
**Transaction ID : SB22.I2669**  
 Amount of Each Disbursement this Period: 3338.56

Memo Item

Full Name (Last, First, Middle Initial)  
**B. KANSAS LEADERSHIP PAC**

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement DISTRIBUTION OF NET PROCEEDS

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2018

FEC Identification Number: **C00632323**  
**Transaction ID : SB22.I2559**  
 Amount of Each Disbursement this Period: 9742.01

Memo Item

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

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement NET DISTRIBUTION

Candidate Name

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

State: District:

Date of Disbursement: 06 / 30 / 2018

FEC Identification Number: **C00632323**  
**Transaction ID : SB22.I2667**  
 Amount of Each Disbursement this Period: 2766.24

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15846.81

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Team Marshall**

**A. NRCC**

Full Name (Last, First, Middle Initial)  
Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
DISTRIBUTION OF NET PROCEEDS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 19 / 2018

FEC Identification Number  
C C00075820  
Transaction ID : SB22.I2560  
Amount of Each Disbursement this Period  
38578.34

Memo Item

**B. NRCC**

Full Name (Last, First, Middle Initial)  
Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
NET DISTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2018

FEC Identification Number  
C C00075820  
Transaction ID : SB22.I2668  
Amount of Each Disbursement this Period  
5914.02

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 44492.36

**TOTAL** This Period (last page this line number only)..... ▶ 79431.03