

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Kansans for Huelskamp

ADDRESS (number and street) PO Box 410
Check if different than previously reported. (ACC) Fowler KS 67844-0410

2. FEC IDENTIFICATION NUMBER C C00413096
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
KS 01

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[ ] April 15 Quarterly Report (Q1)
[ ] July 15 Quarterly Report (Q2)
[ ] October 15 Quarterly Report (Q3)
[ ] January 31 Year-End Report (YE)
[ ] Termination Report (TER)
(b) 12-Day PRE-Election Report for the:
[ X ] Primary (12P) [ ] General (12G) [ ] Runoff (12R)
[ ] Convention (12C) [ ] Special (12S)
Election on 11 / 08 / 2016 in the State of KS
(c) 30-Day POST-Election Report for the:
[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)
Election on / / in the State of

5. Covering Period 07 / 01 / 2016 through 07 / 13 / 2016

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

Type or Print Name of Treasurer Ron Schneweis

Signature of Treasurer Ron Schneweis [Electronically Filed] Date 07 / 21 / 2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**Kansans for Huelskamp**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	47537.00	725081.98
(b) Total Contribution Refunds (from Line 20(d)) .....	5400.00	5450.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	42137.00	719631.98
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	274176.32	857311.54
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	274176.32	857311.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	393664.43	
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).....	5375.72	

**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 12/2003)

Write or Type Committee Name

**Kansans for Huelskamp**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20950.00	447369.00
(ii) Unitemized.....	8087.00	148162.55
(iii) TOTAL of contributions from individuals ▶	29037.00	595531.55
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	18500.00	129550.43
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	47537.00	725081.98
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	7467.74
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	47537.00	732549.72

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	274176.32	857311.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	5400.00	5450.00
(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 20(a), (b), and (c)).....	5400.00	5450.00
21. OTHER DISBURSEMENTS .....	0.00	1890.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	279576.32	864651.54

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	625703.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	47537.00
25. SUBTOTAL (add Line 23 and Line 24).....	673240.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	279576.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	393664.43

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Dale Woodruff**

Mailing Address 124 Tanglewood Drive

City State Zip Code  
Dodge City KS 67801-2143

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

Name of Employer self Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2016

**Transaction ID : A37FAA354BDE44609820**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Edgar Williams**

Mailing Address 2900 Cove Cay Drive  
Unit 3G

City State Zip Code  
Clearwater FL 33760-1209

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

Name of Employer Legacy Capital Group, Inc Occupation Commodity pool Operator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2016

**Transaction ID : A98118C0907E1410F831**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 224 Ridgewood Drive

City State Zip Code  
Victoria TX 77901-2572

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

Name of Employer n/a Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 04 / 2016

**Transaction ID : A1365F617BCEA4D178D3**

Amount of Each Receipt this Period  
50.00

Memo Item

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

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

2775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Alice Steward**

Mailing Address 4901 W 69th Street

City State Zip Code  
Prairie Village KS 66208-2014

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

Name of Employer Occupation  
n/a Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2016

**Transaction ID : A8A5AF7B042454A09912**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Doris J. Miller**

Mailing Address 2810 Heartland Valley Drive

City State Zip Code  
Manhattan KS 66503-8722

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

Name of Employer Occupation  
Rocking M Radio. Inc. Radio Station owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2016

**Transaction ID : A456FBAE6186B4AEC8ED**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 2319 N Belmont Place

City State Zip Code  
Garden City KS 67846-3303

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

Name of Employer Occupation  
self homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2016

**Transaction ID : A32CE0BC9953042809B1**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

2650.00

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

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

FOR LINE NUMBER: PAGE 7 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Cindy L Parsell**

Mailing Address 1715 5th Road

City Raymond State KS Zip Code 67573-9629

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

Name of Employer USB 401 Occupation Bus Driver

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2397.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

**Transaction ID : AA28AE34A2A9141C28E7**

Amount of Each Receipt this Period  
 150.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Anita M Sheridan**

Mailing Address PO Box 82

City Raymond State KS Zip Code 67573-0082

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

Name of Employer Owner Occupation Ellinwood Tank Service, Inc.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **222.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2016

**Transaction ID : AF56B794890174D31A75**

Amount of Each Receipt this Period  
 25.00

Memo Item

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

Mailing Address PO BOX 1175

City Frostproof State FL Zip Code 33843-1175

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

Name of Employer self Occupation Business owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2016

**Transaction ID : AA2F84B91986A4A238CB**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

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

**675.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Linda F. Holden**

Mailing Address 4840 SW Skyline Parkway

City Topeka State KS Zip Code 66614-3829

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

Name of Employer Retired Occupation Contract Proofreader

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **372.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 06 / 2016

**Transaction ID : AD71457B6C02C4856B56**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Susan Boaldin**

Mailing Address 6601 Westlake Blvd

City Oklahoma City State OK Zip Code 73142-6080

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

Name of Employer self Occupation homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 06 / 2016

**Transaction ID : A594D0F51FD9A40F6A2F**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

Mailing Address 9232 Sturgeon Drive

City Overland Park State KS Zip Code 66212-4939

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

Name of Employer self Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2016

**Transaction ID : AACBD38B541C94141A21**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

Memo Item

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

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

\_\_\_\_\_ 575.00

\_\_\_\_\_



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

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

FOR LINE NUMBER: PAGE 9 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Donna M Walker**

Mailing Address 17450 Road 17

City State Zip Code  
Kismet KS 67859-6020

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

Name of Employer Occupation  
n/a Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

**Transaction ID : A4CFBA982C66940508D7**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Carolyn A Meyer**

Mailing Address PO Box 518

City State Zip Code  
Hoxie KS 67740-0518

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

Name of Employer Occupation  
Meyer Electric Bookkeeper

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3302.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

**Transaction ID : AB7B6EF69F2304E94A8D**

Amount of Each Receipt this Period  
 25.00

Memo Item

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

Mailing Address PO BOX 710

City State Zip Code  
Troy OH 45373-0710

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

Name of Employer Occupation  
Yasotay, Inc. Business leader

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2016

**Transaction ID : A8FEDF72419E34130941**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

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

**2825.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**David Miller**

Mailing Address 711 Main Street

City Eudora State KS Zip Code 66025-9471

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

Name of Employer Independent Insurance Agent Occupation Independent Insurance Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

**Transaction ID : A101B8679AB764FB382A**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Judith Reedy**

Mailing Address 1907 N 200th Road

City Concordia State KS Zip Code 66901-8045

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

Name of Employer self Occupation Retired Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2016

**Transaction ID : A03BBB111E61D4107B81**

Amount of Each Receipt this Period  
 100.00

Memo Item

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

Mailing Address 711 Main Street

City Eudora State KS Zip Code 66025-9471

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

Name of Employer Self-employed Occupation Independent Insurance Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

**Transaction ID : ABCC3FF62EF384A559C4**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**John Stolte**

Mailing Address 11006 Booth Avenue

City Kansas City State MO Zip Code 64134-3445

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2016

**Transaction ID : AB154141C8E0349DDB61**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Roger Holmes**

Mailing Address PO Box 699

City Plains State KS Zip Code 67869-0699

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

Name of Employer self Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2016

**Transaction ID : A3D1FC00A23A74CA09C7**

Amount of Each Receipt this Period  
1100.00

Memo Item

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

Mailing Address 6711 Lakewood Blvd

City Dallas State TX Zip Code 75214-3750

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

Name of Employer self Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2016

**Transaction ID : AECB8B6B8BCA649AC9C6**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

1375.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 40

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Donald Rutherford**

Mailing Address 1008 SW Fleming Court  
 Apt. 102

City Topeka State KS Zip Code 66604-1867

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

Name of Employer self Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2016

**Transaction ID : A18339E7FF0374BED8E6**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Carolyn A Meyer**

Mailing Address PO Box 518

City Hoxie State KS Zip Code 67740-0518

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

Name of Employer Meyer Electric Occupation Bookkeeper

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 3277.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2016

**Transaction ID : ABF8962A667204720978**

Amount of Each Receipt this Period  
 50.00

Memo Item

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

Mailing Address 1628 N Rocky Creek Road

City Wichita State KS Zip Code 67230-1720

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

Name of Employer BKD, LLP Occupation CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2016

**Transaction ID : AA4D5A8892C7F469E95C**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Marx**

Mailing Address **PO Box 440**

City **Wappingers Falls** State **NY** Zip Code **12590-0440**

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

Name of Employer self Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **397.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 05 / 2016**

**Transaction ID : A1A0ED66DFC3A4692B25**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rachelle Routh**

Mailing Address **34477 Silverbell Road**

City **Alma** State **KS** Zip Code **66401-9071**

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

Name of Employer self Occupation **Information Requested**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 12 / 2016**

**Transaction ID : A92D8BB282B254893A17**

Amount of Each Receipt this Period  
**500.00**

Memo Item

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

Mailing Address **3125 W 375th Street**

City **Louisburg** State **KS** Zip Code **66053-4504**

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

Name of Employer self Occupation **homemaker**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 01 / 2016**

**Transaction ID : A07D9E79B7FB6432EABD**

Amount of Each Receipt this Period  
**500.00**

Memo Item

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey M Landry**

Mailing Address 101 AUBOR LANE

City State Zip Code  
New Iberia LA 70563-2822

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

Name of Employer Occupation  
Jim Landry & Associates Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2016

**Transaction ID : A5F7CA82588EF418C826**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Robert H Kobler**

Mailing Address 14024 W. 91 Terrace # 2

City State Zip Code  
Lenexa KS 66215-3291

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

Name of Employer Occupation  
self Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2016

**Transaction ID : A0A864DC529E5455C8DE**

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**L'Jean m Dixon**

Mailing Address 42913 SW K Rd

City State Zip Code  
Kinsley KS 67547

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

Name of Employer Occupation  
Self Employed Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2016

**Transaction ID : AF07ABAE6B5049C3825**

Amount of Each Receipt this Period  
100.00

Memo Item

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

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

1125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Richard J Powierza**

Mailing Address 2101 FOX MEADOWS

City Manhattan State KS Zip Code 66503-2196

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

Name of Employer US Army Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2016

**Transaction ID : A0EBCBDFBC0364D0D8A7**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Carolyn Anderson**

Mailing Address 429 E 1st Avenue

City Hutchinson State KS Zip Code 67501-7148

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

Name of Employer n/a Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2016

**Transaction ID : A57BAA4BAA84349C1B5A**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael L Patterson**

Mailing Address 228 Abarrant Way

City Alma State KS Zip Code 66401-8779

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

Name of Employer MedCentral Health System Occupation Administrative Physician/Chief Medical

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2016

**Transaction ID : ADED465CD997145A0A94**

Amount of Each Receipt this Period  
50.00

Memo Item

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 16 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Brett Roufs**

Mailing Address 3231 Royer West Drive

City State Zip Code  
Newton KS 67114-9639

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

Name of Employer self Occupation Dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2016

**Transaction ID : AA3F750F514EA4AD3882**

Amount of Each Receipt this Period  
 100.00

Memo Item

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

Mailing Address 6701 SW Scathelock Road

City State Zip Code  
Topeka KS 66614-4457

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

Name of Employer self Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2016

**Transaction ID : A3469F0DB6C77400288E**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

Mailing Address 641 N Rutland Street

City State Zip Code  
Wichita KS 67206-1525

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

Name of Employer self Occupation Retired dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2016

**Transaction ID : AB6EF32751A1146389B8**

Amount of Each Receipt this Period  
 100.00

Memo Item

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

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

450.00



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

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

FOR LINE NUMBER: PAGE 17 OF 40  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**George Binney**

Mailing Address P.O. Box 534

City Ulysses State KS Zip Code 67880-0534

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2016

**Transaction ID : A495A816D93A04019AF9**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Lori Miggiani**

Mailing Address 13213 Sego Rd

City Arlington State KS Zip Code 67514-9422

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

Name of Employer self Occupation home maker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

**Transaction ID : AC44B4A6B7DFB4848BF5**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

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

Mailing Address 169 Kingfisher Circle

City Pooler State GA Zip Code 31322-9763

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

Name of Employer Pfizer Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **775.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2016

**Transaction ID : AA5A58F968CF84638A4E**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 75.00

Memo Item

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

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

\_\_\_\_\_ 2800.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Henkle**

Mailing Address 2319 N Belmont Place

City Garden City State KS Zip Code 67846-3303

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

Name of Employer R.E. Investments Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2016

**Transaction ID : A0D8011DA539D4C7A8B1**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

2500.00

20950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A. Duffy for Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 538  
 City Wausau State WI Zip Code 54402-0538  
 FEC ID number of contributing federal political committee. **C C00464339**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016  
**Transaction ID : A5E313CD606CF447399D**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Conservative Promises PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1919 Oxmoor Rd Number 241  
 City Birmingham State AL Zip Code 35209-3502  
 FEC ID number of contributing federal political committee. **C C00585893**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2016  
**Transaction ID : AECCEd7BE3F6C4A7F8A4**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. Support To Ensure Vicotry Everywhere PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 228 S Washington St Ste 115  
 City Alexandria State VA Zip Code 22314-5404  
 FEC ID number of contributing federal political committee. **C C00501478**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 06 / 2016  
**Transaction ID : AAADBd6B6BB934F42B12**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

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

6000.00

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

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

FOR LINE NUMBER: PAGE 20 OF 40  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Palmer For Congress**

Mailing Address 1919 Oxmoor Rd  
# 235

City Homewood State AL Zip Code 35209-3502

FEC ID number of contributing federal political committee. **C C00551374**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2016

**Transaction ID : A8A5B90159A11487D9B1**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C C00402602**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2016

**Transaction ID : ADADD6EADAE6442D8A32**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Gary Palmer For Congress**

Mailing Address 1919 Oxmoor Rd  
# 235

City Homewood State AL Zip Code 35209-3502

FEC ID number of contributing federal political committee. **C C00551374**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2016

**Transaction ID : AB452D03B47AF4BCEA55**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A.** Full Name (Last, First, Middle Initial)  
**Jody Hice For Congress**

Mailing Address **PO Box 586**

City **Monroe** State **GA** Zip Code **30655-0586**

FEC ID number of contributing federal political committee. **C C00544445**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 06 / 2016**

**Transaction ID : A505D63C00A4345C6959**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TN4UPAC**

Mailing Address **6213 Charlotte Pike Ste 112**

City **Nashville** State **TN** Zip Code **37209-3038**

FEC ID number of contributing federal political committee. **C C00513523**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 12 / 2016**

**Transaction ID : AD4F81B7ADF3D44C99AC**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

Mailing Address **PO Box 75000**

City **Detroit** State **MI** Zip Code **48275-0001**

FEC ID number of contributing federal political committee. **C C00393173**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 13 / 2016**

**Transaction ID : AA74FB888A9E5437DB6A**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A. Full Name (Last, First, Middle Initial)**  
**Jim Banks for Congress**

Mailing Address **PO Box 11431**

City **Fort Wayne** State **IN** Zip Code **46858-1431**

FEC ID number of contributing federal political committee. **C C00577999**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 06 / 2016**

**Transaction ID : A13F205D6234942B394A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B. Full Name (Last, First, Middle Initial)**  
**Supporting Conservatives Of Today & Tomorrow PAC**

Mailing Address **PO Box 905**

City **Newton** State **NJ** Zip Code **07860-0905**

FEC ID number of contributing federal political committee. **C C00453324**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 12 / 2016**

**Transaction ID : A1ED9A271BC774CF3A2A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

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

Mailing Address **PO Box 131808**

City **Houston** State **TX** Zip Code **77219-1808**

FEC ID number of contributing federal political committee. **C C00570739**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 06 / 2016**

**Transaction ID : A76E6B2A4DE844EA0A54**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

Memo Item

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

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

\_\_\_\_\_ 7000.00

\_\_\_\_\_ 18500.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 1601 S California Avenue		Amount of Each Disbursement this Period 163.91 <input type="checkbox"/> Memo Item
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement advertising costs	Transaction ID : B312EB51950E4417DA7E
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Majority Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 135 Professional Drive Suite 104		Amount of Each Disbursement this Period 30925.22 <input type="checkbox"/> Memo Item
City Ponte Vedra Beach	State FL	
Zip Code 32082-6277	Purpose of Disbursement fees for campaign advertising	Transaction ID : B2261FA9E151E4E91AF7
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Constant Contact Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period 195.00 <input type="checkbox"/> Memo Item
City Waltham	State MA	
Zip Code 02451-7333	Purpose of Disbursement advertising fee	Transaction ID : BD6CF19CF32CD4C1FB19
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31284.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Dillons</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 1902 Vine Street		Amount of Each Disbursement this Period 17.53
City Hays State KS Zip Code 67601-3697	Purpose of Disbursement food for volunteers	
Candidate Name	Category/Type 003	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : B9D4B6C960B664F27915</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cox Business</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address PO BOX 1259 Dept. # 102432		Amount of Each Disbursement this Period 185.38
City Oaks State PA Zip Code 19456-1259	Purpose of Disbursement internet at campaign office	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : BD7E16ADFEA6C4D16862</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Majority Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 135 Professional Drive Suite 104		Amount of Each Disbursement this Period 30925.22
City Ponte Vedra Beach State FL Zip Code 32082-6277	Purpose of Disbursement fees for campaign advertising	
Candidate Name	Category/Type 004	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : B23E227AED376474DBFD</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31128.13
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Hutchinson Storage</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 507 N Whiteside Street		Amount of Each Disbursement this Period 70.00
City Hutchinson	State KS	
Zip Code 67501-1518	Purpose of Disbursement rent on storage unit	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B0ECD61FB97A34734A7F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Matthew Becker</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 3200 SW Eveningside Dr		Amount of Each Disbursement this Period 2000.00
City Topeka	State KS	
Zip Code 66614-3715	Purpose of Disbursement compensation/wages	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 006	Transaction ID : B065A7E3E7ADE408395C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Rep. Joshua Powell</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 1822 SW Campbell Ave.		Amount of Each Disbursement this Period 1333.33
City Topeka	State KS	
Zip Code 66604-3217	Purpose of Disbursement compensatioin/wages	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : BC89C496B257C47F6952
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3403.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Nick Taylor</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 801 Carriage Circle		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item
City Salina State KS Zip Code 67401-7908	Purpose of Disbursement compensation/wages 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BACCB16D02CAF445E87C
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Spencer White</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 501 Rustic Rd		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item
City Hutchinson State KS Zip Code 67502-2053	Purpose of Disbursement wages/compensation 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B72981230E3F7486AA0E
State: District:		

Full Name (Last, First, Middle Initial) <b>c. James Van Den Berg</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 1946 N. Split Rail Ct.		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City Wichita State KS Zip Code 67230-7100	Purpose of Disbursement compensation/wages 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BB470B197A50A4C5B8BA
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 40			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Jimmy Keady</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016		
Mailing Address 109 East 5th.			Amount of Each Disbursement this Period 4500.00		
City Hutchinson	State KS	Zip Code 67501-6377	<input type="checkbox"/> Memo Item <b>Transaction ID : BE79A004F6BB34E2685F</b>		
Purpose of Disbursement compensation/wages		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Owen Burgess</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016		
Mailing Address 109 East 5th			Amount of Each Disbursement this Period 3200.00		
City Hutchinson	State KS	Zip Code 67501-6377	<input type="checkbox"/> Memo Item <b>Transaction ID : BA2F898FD4A1E40669F4</b>		
Purpose of Disbursement compensation/wages		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Kerrick Kuder</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016		
Mailing Address 1001 N. 8th			Amount of Each Disbursement this Period 1700.00		
City Manhattan	State KS	Zip Code 66502-1638	<input type="checkbox"/> Memo Item <b>Transaction ID : BF215CC180D504E0AA7A</b>		
Purpose of Disbursement compensation/wages		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9400.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 40			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Dylan Graves</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 307 W. 2th.		Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Memo Item
City Hutchinson	State KS	
Zip Code 67501-5233	Purpose of Disbursement compensation/wages	Transaction ID : <b>B4E7F08BA5E6F4F16A58</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Strategy Group for Media</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 36015.00 <input type="checkbox"/> Memo Item
City Delaware	State OH	
Zip Code 43015-7010	Purpose of Disbursement advertising fees	Transaction ID : <b>B234402E14A1A4CDBA05</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 186 Atoka Munford Road		Amount of Each Disbursement this Period 6.45 <input type="checkbox"/> Memo Item
City Atoka	State TN	
Zip Code 38004-4922	Purpose of Disbursement postage stamps	Transaction ID : <b>B38F22859E0914228A22</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	36621.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 40			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

**A. Handy Mailing**

Full Name (Last, First, Middle Initial)  
Mailing Address 3839 W Dora Street

City State Zip Code  
Wichita KS 67213-1210

Purpose of Disbursement  
mailin of letters

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 01 / 2016

Amount of Each Disbursement this Period  
3442.24

Memo Item

Transaction ID : B646342431A0F4AEF9F1

**B. Walmart**

Full Name (Last, First, Middle Initial)  
Mailing Address N 14th Ave

City State Zip Code  
Dodge City KS 67801

Purpose of Disbursement  
fundraising supplies

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 01 / 2016

Amount of Each Disbursement this Period  
21.78

Memo Item

Transaction ID : B8ED0E3BD4A714111B55

**c. Majority Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 135 Professional Drive  
Suite 104

City State Zip Code  
Ponte Vedra Beach FL 32082-6277

Purpose of Disbursement  
fees for campaign advertising

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 01 / 2016

Amount of Each Disbursement this Period  
32718.70

Memo Item

Transaction ID : BCEAB99A54DB34A499B8

**SUBTOTAL** of Disbursements This Page (optional)..... 36182.72

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT.com</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2016
Mailing Address 5555 Hilton Avenue Suite 106		Amount of Each Disbursement this Period 22.49
City Baton Rouge	State LA	
Zip Code 70808-2597	Purpose of Disbursement credit card processing fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : B31076F11FED446328A3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2016
Mailing Address 1601 S California Avenue		Amount of Each Disbursement this Period 728.95
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement advertising costs	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : B47EE0DF2C2AE45C6A4E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2016
Mailing Address 1601 S California Avenue		Amount of Each Disbursement this Period 21.19
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement advertising costs	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : BE2E242CB43054C768B2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	772.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Jimmy Johns</b>		Date of Disbursement MM / DD / YYYY 07 / 04 / 2016
Mailing Address 1101 14th Street NW # 103		Amount of Each Disbursement this Period 123.26
City Washington	State DC	
Zip Code 20005-5601	Purpose of Disbursement food & beverage	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : <b>BF25A43EAE624493BC2</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address 186 Atoka Munford Road		Amount of Each Disbursement this Period 141.00
City Atoka	State TN	
Zip Code 38004-4922	Purpose of Disbursement postage stamps	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : <b>BF5BF2A72759D4D63823</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address N 14th Ave		Amount of Each Disbursement this Period 65.07
City Dodge City	State KS	
Zip Code 67801	Purpose of Disbursement fundraising supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : <b>BE38D864FBC5E4948AF8</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	329.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Matthew Becker</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016
Mailing Address 3200 SW Eveningside Dr		Amount of Each Disbursement this Period 535.49
City Topeka	State KS	
Zip Code 66614-3715	Purpose of Disbursement reimburse mileage expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 006	<b>Transaction ID : B6AE1E6E5629C4993A9C</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dylan Graves</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016
Mailing Address 307 W. 2th.		Amount of Each Disbursement this Period 170.28
City Hutchinson	State KS	
Zip Code 67501-5233	Purpose of Disbursement reimburse mileage expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : BA034A5380A674AF7A40</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Michael Jackson</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016
Mailing Address 3805 Quivira Drive		Amount of Each Disbursement this Period 122.58
City Hutchinson	State KS	
Zip Code 67502-2241	Purpose of Disbursement reimbursement for mileage	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : B6056B6E55EE54852B61</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	828.35
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Owen Burgess</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address 109 East 5th		Amount of Each Disbursement this Period 1938.35
City Hutchinson	State KS Zip Code 67501-6377	
Purpose of Disbursement reimburse mileage expenses		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>BAA0BDCEA9C9F4BF4B07</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Rep. Joshua Powell</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address 1822 SW Campbell Ave.		Amount of Each Disbursement this Period 675.18
City Topeka	State KS Zip Code 66604-3217	
Purpose of Disbursement reimburse mileage expenses		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>B3E833C470C3D47C9B35</b>
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>c. Nick Taylor</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address 801 Carriage Circle		Amount of Each Disbursement this Period 218.70
City Salina	State KS Zip Code 67401-7908	
Purpose of Disbursement reimburse mileage expenses		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>B90450AB2D53E467B9E0</b>
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2832.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. James Van Den Berg</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 05 / 2016</b>
Mailing Address 1946 N. Split Rail Ct.		Amount of Each Disbursement this Period <b>124.48</b>
City Wichita	State KS	
Zip Code 67230-7100	Purpose of Disbursement reimburse mileage expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>001</b>	<b>Transaction ID : B6957696EE7034FD7848</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Strategic Media Placement Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 05 / 2016</b>
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period <b>115433.00</b>
City Delaware	State OH	
Zip Code 43015-7010	Purpose of Disbursement campaign advertising production	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>004</b>	<b>Transaction ID : BAE4CABE253C44474856</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT.com</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 06 / 2016</b>
Mailing Address 5555 Hilton Avenue Suite 106		Amount of Each Disbursement this Period <b>36.55</b>
City Baton Rouge	State LA	
Zip Code 70808-2597	Purpose of Disbursement credit card processing fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>003</b>	<b>Transaction ID : B973137CDCCCB4D51AE8</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>115594.03</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 40			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016		
Mailing Address 1601 S California Avenue			Amount of Each Disbursement this Period 717.07		
City Palo Alto	State CA	Zip Code 94304-1111	<input type="checkbox"/> Memo Item		
Purpose of Disbursement advertising costs		Category/ Type 004	<b>Transaction ID : B2BB34FC29D944D6B89E</b>		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016		
Mailing Address 1601 S California Avenue			Amount of Each Disbursement this Period 33.00		
City Palo Alto	State CA	Zip Code 94304-1111	<input type="checkbox"/> Memo Item		
Purpose of Disbursement advertising costs		Category/ Type 004	<b>Transaction ID : BF8B43F7836324F9784C</b>		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. ANEDOT.com</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016		
Mailing Address 5555 Hilton Avenue Suite 106			Amount of Each Disbursement this Period 48.98		
City Baton Rouge	State LA	Zip Code 70808-2597	<input type="checkbox"/> Memo Item		
Purpose of Disbursement credit card processing fees		Category/ Type 003	<b>Transaction ID : BB3D90C212CDB4317AD0</b>		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	799.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Waynes Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016
Mailing Address 26 South Main		Amount of Each Disbursement this Period 472.95
City Hutchinson	State KS	
Zip Code 67501-5422	Purpose of Disbursement office supplies	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	<b>Transaction ID : B25B9FBBC28E04826ACA</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vonage</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 12.95
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement cell phone service	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	<b>Transaction ID : BF42446CBF2E24396AEF</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Playa Azul</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2016
Mailing Address 710 E 30th Avenue		Amount of Each Disbursement this Period 106.05
City Hutchinson	State KS	
Zip Code 67502-8435	Purpose of Disbursement food for volunteers	<input type="checkbox"/> Memo Item
Candidate Name	007 Category/ Type	<b>Transaction ID : B82E6E670835F4110AC4</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	591.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2016
Mailing Address 1601 S California Avenue		Amount of Each Disbursement this Period 731.79
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement advertising costs	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : B7FDB8EDB7976401BA6E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2016
Mailing Address 1601 S California Avenue		Amount of Each Disbursement this Period 18.41
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement advertising costs	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : BE184A4129FC34992B39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT.com</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2016
Mailing Address 5555 Hilton Avenue Suite 106		Amount of Each Disbursement this Period 138.42
City Baton Rouge	State LA	
Zip Code 70808-2597	Purpose of Disbursement credit card processing fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : B1BE4829EC0A34D8EAEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	888.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2016
Mailing Address PO Box 689020		Amount of Each Disbursement this Period 106.34
City Des Moines	State IA	
Zip Code 50368-9020	Purpose of Disbursement office supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : B7A92086742364F5288A</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANEDOT.com</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2016
Mailing Address 5555 Hilton Avenue Suite 106		Amount of Each Disbursement this Period 73.19
City Baton Rouge	State LA	
Zip Code 70808-2597	Purpose of Disbursement credit card processing fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	<b>Transaction ID : B2996C5A4D83145A48D6</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
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).....	179.53
<b>TOTAL</b> This Period (last page this line number only).....	273835.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 40
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Kansans for Huelskamp**

Full Name (Last, First, Middle Initial) <b>A. Karen Wright</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2016
Mailing Address 1240 Gambler Road		Amount of Each Disbursement this Period 2700.00
City Mount Vernon	State OH	
Zip Code 43050-3842	Purpose of Disbursement Refund: refund due to limits exceeded	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 010	Transaction ID : B775FCE7BA03F4A89823
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Thomas Rastin</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2016
Mailing Address 1240 Gambler Road		Amount of Each Disbursement this Period 2700.00
City Mount Vernon	State OH	
Zip Code 43050-3842	Purpose of Disbursement Refund: refund due to limits exceeded	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 010	Transaction ID : B6C452927628D4077BBA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
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).....	5400.00
<b>TOTAL</b> This Period (last page this line number only).....	5400.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Kansans for Huelskamp**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Rep. Timothy A Huelskamp</b>		Nature of Debt (Purpose): candidate spent his own money
Mailing Address 601 Church		
City State Zip Code Fowler KS 67844		

Outstanding Balance Beginning This Period <input type="text" value="5375.72"/>		<b>Transaction ID : D60BC153535CB40DD8F0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5375.72"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="5375.72"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="5375.72"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5375.72"/>