



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Sunflower State

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="2020"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5300000.00"/>	<input type="text" value="5300000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="5300000.00"/>	<input type="text" value="5300000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5298835.53"/>	<input type="text" value="5298835.53"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1164.47"/>	<input type="text" value="1164.47"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**Sunflower State**

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5300000.00	5300000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5300000.00	5300000.00
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)).....▶	5300000.00	5300000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5300000.00	5300000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	300.00	300.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	300.00	300.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	5298535.53	5298535.53
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)) ..	5298835.53	5298835.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5298835.53	5298835.53

**DETAILED SUMMARY PAGE**  
of Disbursements

<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) .....	5300000.00	5300000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5300000.00	5300000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	300.00	300.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	300.00	300.00

**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 6 OF 19
<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

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)  
**Sunflower State**

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

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-5998

FEC ID number of contributing federal political committee. **C** C00484642

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3550000.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2020

**Transaction ID : 2058620**

Amount of Each Receipt this Period  
800000.00

Memo Item

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

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-5998

FEC ID number of contributing federal political committee. **C** C00484642

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3550000.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2020

**Transaction ID : 2058621**

Amount of Each Receipt this Period  
200000.00

Memo Item

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

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-5998

FEC ID number of contributing federal political committee. **C** C00484642

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3550000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2020

**Transaction ID : 2058615**

Amount of Each Receipt this Period  
1600000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600000.00
<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 19
<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)  
**Sunflower State**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SMP</b>		Date of Receipt
Mailing Address 700 13th St NW Ste 600		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2020"/>
City Washington	State DC	Zip Code 20005-5998
FEC ID number of contributing federal political committee. <b>C</b> C00484642		<b>Transaction ID : 2058616</b>
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="650000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="3550000.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SMP</b>		Date of Receipt
Mailing Address 700 13th St NW Ste 600		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2020"/>
City Washington	State DC	Zip Code 20005-5998
FEC ID number of contributing federal political committee. <b>C</b> C00484642		<b>Transaction ID : 2058617</b>
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="250000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="3550000.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SMP</b>		Date of Receipt
Mailing Address 700 13th St NW Ste 600		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2020"/>
City Washington	State DC	Zip Code 20005-5998
FEC ID number of contributing federal political committee. <b>C</b> C00484642		<b>Transaction ID : 2058618</b>
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period <input type="text" value="50000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="3550000.00"/>		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="950000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

**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 8 OF 19
<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)  
**Sunflower State**

**A. Women Vote!**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 M St NW  
Ste 375N

City Washington State DC Zip Code 20036-5862

FEC ID number of contributing federal political committee. **C** C00473918

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1750000.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2020

**Transaction ID : 2058709**

Amount of Each Receipt this Period  
1000000.00

Memo Item

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

Mailing Address 1800 M St NW  
Ste 375N

City Washington State DC Zip Code 20036-5862

FEC ID number of contributing federal political committee. **C** C00473918

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1750000.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2020

**Transaction ID : 2058710**

Amount of Each Receipt this Period  
750000.00

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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5300000.00



**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

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)  
**Sunflower State**

Full Name (Last, First, Middle Initial)  
**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Database Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 27 / 2020

FEC Identification Number: C

Transaction ID : 500074626

Amount of Each Disbursement this Period: 300.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
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

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

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).....▶ 300.00

**TOTAL** This Period (last page this line number only).....▶ 300.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moore Campaigns
Mailing Address 447 Irving St NW
City Washington State DC Zip Code 20010-2912
Purpose of Expenditure Direct Mail
Name of Federal Candidate: Kobach, Kris, , ,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

Full Name of Payee Moore Campaigns
Mailing Address 447 Irving St NW
City Washington State DC Zip Code 20010-2912
Purpose of Expenditure Direct Mail
Name of Federal Candidate: Marshall, Roger, W., ,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 135285.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jesse, Jim, , ,

[Electronically Filed]

Date 08 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moore Campaigns
Mailing Address 447 Irving St NW
City Washington State DC Zip Code 20010-2912
Purpose of Expenditure Direct Mail
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

Full Name of Payee Moore Campaigns
Mailing Address 447 Irving St NW
City Washington State DC Zip Code 20010-2912
Purpose of Expenditure Direct Mail
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 256864.93
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jesse, Jim, , ,

[Electronically Filed]

Date 08 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 950198.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jesse, Jim, , ,

[Electronically Filed]

Date 08 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 267019.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jesse, Jim, , ,

[Electronically Filed]

Date 08 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Date of Public Distribution/Dissemination 07/22/2020
Amount 1190419.00
Transaction ID : 500074037
Date of Disbursement or Obligation 07/17/2020
Office Sought: Senate State: KS
Disbursement For: Primary

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Costs & Digital Ad Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Date of Public Distribution/Dissemination 07/21/2020
Amount 99658.00
Transaction ID : 500074010
Date of Disbursement or Obligation 07/21/2020
Office Sought: Senate State: KS
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 1290077.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jesse, Jim, , ,

[Electronically Filed]

Date 08/20/2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Sunflower State</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00751461</span> </div>
---	---

Check if  24-hour report     48-hour report     New report    Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Old Town Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 21 / 2020						
Mailing Address 114 Quay St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">99658.00</div> Transaction ID : <b>500074011</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 21 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314-2609</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314-2609
City		State	Zip Code				
Alexandria	VA	22314-2609					
Purpose of Expenditure Production Costs & Digital Ad Buy							
Name of Federal Candidate: <input type="checkbox"/> Support Kobach, Kris, , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KS</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5298535.53</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Old Town Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 24 / 2020						
Mailing Address 114 Quay St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500000.00</div> Transaction ID : <b>500074061</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 23 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314-2609</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314-2609
City		State	Zip Code				
Alexandria	VA	22314-2609					
Purpose of Expenditure Production Cost & Media Buy							
Name of Federal Candidate: <input type="checkbox"/> Support Marshall, Roger, W., , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KS</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5298535.53</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">599658.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

\_\_\_\_\_ *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y  
 Jesse, Jim, , , 08 / 20 / 2020  
 Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 1340439.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jesse, Jim, , ,

[Electronically Filed]

Date 08 / 20 / 2020

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Cost & Media Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 375994.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jesse, Jim, , ,

[Electronically Filed]

Date 08 / 20 / 2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Sunflower State</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00751461</span> </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Old Town Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 28 / 2020						
Mailing Address 114 Quay St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9333.33</div> Transaction ID : <b>500074130</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 28 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314-2609</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314-2609
City		State	Zip Code				
Alexandria	VA	22314-2609					
Purpose of Expenditure Production Costs & Digital Ad Buy							
Name of Federal Candidate: <input type="checkbox"/> Support Marshall, Roger, W., , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KS</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5298535.53</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Old Town Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 28 / 2020						
Mailing Address 114 Quay St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9333.33</div> Transaction ID : <b>500074131</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 28 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314-2609</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314-2609
City		State	Zip Code				
Alexandria	VA	22314-2609					
Purpose of Expenditure Production Costs & Digital Ad Buy							
Name of Federal Candidate: <input type="checkbox"/> Support Kobach, Kris, , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KS</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5298535.53</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">18666.66</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Jesse, Jim, , ,

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
08 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Sunflower State
FEC IDENTIFICATION NUMBER C C00751461

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Costs & Digital Ad Buy
Name of Federal Candidate: Lindstrom, David, Alan,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Date of Public Distribution/Dissemination 07/28/2020
Amount 9333.34
Transaction ID : 500074132
Date of Disbursement or Obligation 07/28/2020
Office Sought: Senate State: KS

Full Name of Payee Old Town Media
Mailing Address 114 Quay St
City Alexandria State VA Zip Code 22314-2609
Purpose of Expenditure Production Costs & Digital Ad Buy
Name of Federal Candidate: Marshall, Roger, W.,
Calendar Year-To-Date Per Election for Office Sought 5298535.53
Date of Public Distribution/Dissemination 07/29/2020
Amount 55000.00
Transaction ID : 500074159
Date of Disbursement or Obligation 07/29/2020
Office Sought: Senate State: KS

(a) SUBTOTAL of Itemized Independent Expenditures 64333.34
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 5298535.53

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Jesse, Jim, ,

[Electronically Filed]

Date 08/20/2020

Signature