

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Adrian Smith for Congress

Report Covering the Period:

From:

M	M
0	4

D	D
2	4

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	87439.00	633629.68
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87439.00	633629.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	40001.99	413536.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	9535.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40001.99	404000.77
8. Cash on Hand at Close of Reporting Period (from Line 27).....	323094.24	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Adrian Smith for Congress

Report Covering the Period: From:

M	M
0	4

D	D
2	4

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

32528.75

269205.37

(ii) Unitemized.....

6642.00

47067.42

(iii) TOTAL of contributions

39170.75

316272.79

from individuals..... ▶

0.00

2000.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

48268.25

312156.89

(d) The Candidate.....

0.00

3200.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

87439.00

633629.68

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

1.91

101.91

13. LOANS

(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

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

9535.28

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

104.79

702.93

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

87545.70

643969.80

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40001.99	413536.05
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.....	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	474.95
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	40001.99	414011.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	275550.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	87545.70
25. SUBTOTAL (add Line 23 and Line 24).....	363096.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40001.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	323094.24

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

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

FOR LINE NUMBER: PAGE 5 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William Abbott

Mailing Address 40169 190 Avenue

City State Zip Code
Creston NE 68631-4021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Pole Maintenance Co. Pole Inspector

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

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

Transaction ID: A-C12407

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Jack Albertine

Mailing Address 700 12th Street NW
Suite 700

City State Zip Code
Washington DC 20005-4052

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Albertine Enterprises Consultant

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

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 8

Transaction ID: A-C12322

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mr. James J Albertine

Mailing Address 700 12th Street NW
Suite 700

City State Zip Code
Washington DC 20005-4052

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Albertine Enterprises Consultant

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

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 8

Transaction ID: A-C12323

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert L Anderson

Mailing Address 1335 H Street
Suite 100

City Lincoln State NE Zip Code 68508-3790

FEC ID number of contributing federal political committee. C

Name of Employer: Ne Agri-business Assn. In-c. Occupation: President

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

Date of Receipt: 06 / 27 / 2008

Transaction ID: A-C12548

Amount of Each Receipt this Period: 250.00

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

B. Full Name (Last, First, Middle Initial)
Ms. Donna Bamford

Mailing Address 10 Grandview Heights

City Kearney State NE Zip Code 68845-4006

FEC ID number of contributing federal political committee. C

Name of Employer: none Occupation: Homemaker

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

Date of Receipt: 06 / 30 / 2008

Transaction ID: A-C12588

Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
Mr. John Baty

Mailing Address 2626 Ridgetop Road

City Ames State IA Zip Code 50014-4573

FEC ID number of contributing federal political committee. C

Name of Employer: Information Requested Occupation: Retired

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

Date of Receipt: 06 / 24 / 2008

Transaction ID: A-C12465

Amount of Each Receipt this Period: 190.00

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

SUBTOTAL of Receipts This Page (optional) 1440.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Todd W. Baustert</p> <p>Mailing Address 7713 S 155th Avenue</p> <p>City State Zip Code Omaha NE 68138-7470</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation DCI Group Government Affairs</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8</p> <p>Transaction ID: A-C12295</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Mr. W. W. Boyd</p> <p>Mailing Address PO Box 1147</p> <p>City State Zip Code Tallahassee FL 32302-1147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Mechanical Engineer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 8</p> <p>Transaction ID: A-C12425</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Sen. Kermit Brashear</p> <p>Mailing Address 216 N 117th Street</p> <p>City State Zip Code Omaha NE 68154-2204</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Brashear & Ginn Lawyer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8</p> <p>Transaction ID: A-C12319</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. David Briggs</p> <p>Mailing Address 256 Burnham Drive</p> <p>City State Zip Code Alliance NE 69301-2120</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation WESTCO CEO</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8</p> <p>Transaction ID: A-C12384</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Mr. Ralph Castner</p> <p>Mailing Address 2308 Linden Street</p> <p>City State Zip Code Sidney NE 69162-1861</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cabelas CFO</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8</p> <p>Transaction ID: A-C12294</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Mr. Jack Chain</p> <p>Mailing Address 521 Hillcrest Drive</p> <p>City State Zip Code Scottsbluff NE 69361-1423</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Chain Oil President</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 8</p> <p>Transaction ID: A-C12405</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Lonnie Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8		
	Mailing Address 2514 S Locust Street		Transaction ID: A-C12296		
	City Grand Island	State NE	Zip Code 68801-8226	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Da-Ly Realty	Occupation Broker			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00				

B.	Full Name (Last, First, Middle Initial) Mrs. Jean Des Enfants		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 8		
	Mailing Address 1201 Meadowlark Drive		Transaction ID: A-C12486		
	City Scottsbluff	State NE	Zip Code 69361-4916	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer none	Occupation Retired			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00				

C.	Full Name (Last, First, Middle Initial) Mr. Brian Downes		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8		
	Mailing Address 19519 Northern Boulevard		Transaction ID: A-C12347		
	City Flushing	State NY	Zip Code 11358-3034	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Self Employed	Occupation Insurance Agent			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00				

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Anthony Dworak	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 3805 22nd Street	Transaction ID: A-I12560
	City State Zip Code Columbus NE 68601-2911	Amount of Each Receipt this Period 493.75
	FEC ID number of contributing federal political committee. C	Inkind: Food and Beverages <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 493.75	

B.	Full Name (Last, First, Middle Initial) Mr. Chet Fliesbach	Date of Receipt MM / DD / YYYY 06 / 16 / 2008
	Mailing Address 210087 Williams Drive	Transaction ID: A-C12436
	City State Zip Code Scottsbluff NE 69361-5823	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer N.A.	Occupation Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Nancy Freburg	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address PO Box 295	Transaction ID: A-C12591
	City State Zip Code Kearney NE 68848-0295	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self	Occupation Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	993.75
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

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

Mailing Address 2722 Husker Lane

City Columbus State NE Zip Code 68601-1776

FEC ID number of contributing federal political committee. C

Name of Employer none Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2008

Transaction ID: A-C12371

Amount of Each Receipt this Period 250.00

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

B.

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

Mailing Address 703 S Chestnut Street

City Friend State NE Zip Code 68359-1633

FEC ID number of contributing federal political committee. C

Name of Employer none Occupation Reitred

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 24 / 2008

Transaction ID: A-C12508

Amount of Each Receipt this Period 50.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. Michael D. Gill

Mailing Address 1824 Randolph Street NW

City Washington State DC Zip Code 20011-5340

FEC ID number of contributing federal political committee. C

Name of Employer C & M Capitollink Occupation Partner of Government Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 460.00

Date of Receipt 06 / 27 / 2008

Transaction ID: A-C12594

Amount of Each Receipt this Period 210.00

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

SUBTOTAL of Receipts This Page (optional) 510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Gordon Glade

Mailing Address 308 N Locust Street

City State Zip Code
Grand Island NE 68801-5969

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Central Bio Energy Corp. CEO

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: A-C12460

Amount of Each Receipt this Period

	1250.00
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Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Mrs. Anne Hall

Mailing Address 3564 Linden Drive

City State Zip Code
Columbus NE 68601-8179

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Bankfirst Banker

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

Date of Receipt

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

Transaction ID: A-C12399

Amount of Each Receipt this Period

	250.00
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Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mr. George E. Hall

Mailing Address 183 RR 1

City State Zip Code
Bridgeport NE 69336-9632

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Employed Farmer

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	0	8

Transaction ID: A-C12497

Amount of Each Receipt this Period

	500.00
--	--------

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Chad Hatch

Mailing Address 8109 S Grass Creek Drive

City State Zip Code
Sioux Falls SD 57108-6232

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

Name of Employer Occupation
US Bio Energy Treasurer

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

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

Transaction ID: A-C12404

Amount of Each Receipt this Period
400.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Marvin Hefti

Mailing Address PO Box 1267

City State Zip Code
Scottsbluff NE 69363-1267

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

Name of Employer Occupation
First State Bank Banker

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

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 7 / 2 0 0 8

Transaction ID: A-C12372

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Jim Hellbusch

Mailing Address 2810 38th Street

City State Zip Code
Columbus NE 68601-3844

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

Name of Employer Occupation
Duo Lift Manufacturing President

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

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: A-C12451

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Sam Huston

Mailing Address 2008 Stolley Park Rd.

City State Zip Code
Grand Island NE 68801

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

Name of Employer Information Requested Occupation Information Requested

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

Amount of Each Receipt this Period
100.00

Transaction ID: A-C12474

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

B. Full Name (Last, First, Middle Initial)
Mr. Bryan Hyzdu

Mailing Address 1927 Lakeshore Drive

City State Zip Code
Lodi CA 95242-4233

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

Name of Employer Service 1st Bank Occupation President & CEO

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

Amount of Each Receipt this Period
100.00

Transaction ID: A-C12346

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

C. Full Name (Last, First, Middle Initial)
Mrs. Joan Kopf

Mailing Address 732 Webster Street

City State Zip Code
Minden NE 68959-2112

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

Name of Employer none Occupation Retired

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

Amount of Each Receipt this Period
50.00

Transaction ID: A-C12462

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

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Darlene Kovarik
Mailing Address 230946 Highway 92
City Gering State NE Zip Code 69341-5202
FEC ID number of contributing federal political committee. **C**
Name of Employer Century 21 Occupation Realtor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 06 / 23 / 2008
Transaction ID: A-C12445
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. David Kramer
Mailing Address 9919 Essex Drive
City Omaha State NE Zip Code 68114-3873
FEC ID number of contributing federal political committee. **C**
Name of Employer Baird Holm LLP. Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 05 / 13 / 2008
Transaction ID: A-C12358
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Rick Kubler
Mailing Address PO Box 592
City Columbus State NE Zip Code 68602-0592
FEC ID number of contributing federal political committee. **C**
Name of Employer Kubler Management Inc. Occupation Self
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 05 / 30 / 2008
Transaction ID: A-C12370
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

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

Mailing Address 3915 22nd Street

City Columbus State NE Zip Code 68601-2913

FEC ID number of contributing federal political committee. C

Name of Employer Total Realty, Inc. Occupation Broker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 23 / 2008

Transaction ID: A-C12450

Amount of Each Receipt this Period 250.00

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

B.

Full Name (Last, First, Middle Initial)
Mrs. Patricia M. Lundeen

Mailing Address 524 D Road

City Wilcox State NE Zip Code 68982-3013

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Agriculture

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2008

Transaction ID: A-C12572

Amount of Each Receipt this Period 100.00

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

C.

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

Mailing Address 24715 Highway 10

City Pleasanton State NE Zip Code 68866-3058

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Rancher

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 23 / 2008

Transaction ID: A-C12448

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Dr. Judson C. Martin

Mailing Address 329 W 40th Street

City State Zip Code
Scottsbluff NE 69361-4634

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Oregon Trail Eye Center Ophthalmologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
05 / 06 / 2008

Transaction ID: A-C12307

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Dr. Martin Massengale

Mailing Address 3436 Cape Charles Road W

City State Zip Code
Lincoln NE 68516-5446

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
University Of Nebraska Educator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 325.00

Date of Receipt
06 / 24 / 2008

Transaction ID: A-C12524

Amount of Each Receipt this Period
50.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. Don Mehring

Mailing Address 3421 State Street, Plaza #4

City State Zip Code
Grand Island NE 68803

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mehring Enterprises Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt
06 / 30 / 2008

Transaction ID: A-C12587

Amount of Each Receipt this Period
25.00

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

SUBTOTAL of Receipts This Page (optional) 325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Dennis H Nelson

Mailing Address 14 Kings Court

City State Zip Code
Kearney NE 68845-4254

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

Name of Employer Occupation
The Buckle CEO

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

Date of Receipt
MM / DD / YYYY
06 / 27 / 2008

Transaction ID: A-C12549

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mrs. Marsha Nelson

Mailing Address 14 Kings Court

City State Zip Code
Kearney NE 68845-4254

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

Name of Employer Occupation
Information Requested Information Requested

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

Date of Receipt
MM / DD / YYYY
06 / 24 / 2008

Transaction ID: A-C12510

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Michael Nelson

Mailing Address 2109 Wilderness Ridge Drive

City State Zip Code
Lincoln NE 68512-9291

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

Name of Employer Occupation
First Tier Bank Banker

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

Date of Receipt
MM / DD / YYYY
05 / 27 / 2008

Transaction ID: A-C12373

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Rev. Raymond Norris

Mailing Address PO Box 257

City Osceola State NE Zip Code 68651-0257

FEC ID number of contributing federal political committee. C

Name of Employer Center for Independent Living of Centr Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 310.00

Date of Receipt 05 / 01 / 2008

Transaction ID: A-C12337

Amount of Each Receipt this Period 25.00

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

B.

Full Name (Last, First, Middle Initial)
Rev. Raymond Norris

Mailing Address PO Box 257

City Osceola State NE Zip Code 68651-0257

FEC ID number of contributing federal political committee. C

Name of Employer Center for Independent Living of Centr Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 310.00

Date of Receipt 05 / 06 / 2008

Transaction ID: A-C12299

Amount of Each Receipt this Period 30.00

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

C.

Full Name (Last, First, Middle Initial)
Rev. Raymond Norris

Mailing Address PO Box 257

City Osceola State NE Zip Code 68651-0257

FEC ID number of contributing federal political committee. C

Name of Employer Center for Independent Living of Centr Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 310.00

Date of Receipt 06 / 06 / 2008

Transaction ID: A-C12408

Amount of Each Receipt this Period 30.00

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

SUBTOTAL of Receipts This Page (optional) 85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Shirley Oliver

Mailing Address 1410 Grand Avenue

City State Zip Code
Grand Island NE 68801-7412

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

Name of Employer Occupation
Town & Country Bank Banker

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 4 / 2 0 0 8

Transaction ID: A-C12494

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 4817 N 56th Street Suite 21

City State Zip Code
Lincoln NE 68504-1798

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

Name of Employer Occupation
Insulation Systems Self

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

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

Transaction ID: A-C12403

Amount of Each Receipt this Period
1650.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Matt Pawloski

Mailing Address 216 W 42nd Street

City State Zip Code
Kearney NE 68845-8500

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

Name of Employer Occupation
State Farm Agent

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 0 8

Transaction ID: A-C12309

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ► **2050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 76
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Justin M. Peterson

Mailing Address 5100 Wehawken Road

City State Zip Code
Bethesda MD 20816-2225

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

Name of Employer Occupation
DCI Group Issues Management

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2008

Transaction ID: A-C12348

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Terry R Peterson

Mailing Address 1310 S 78th Avenue

City State Zip Code
Omaha NE 68124-1407

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

Name of Employer Occupation
The Yard OF Omaha Inc President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: A-C12589

Amount of Each Receipt this Period
200.00

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

C. Full Name (Last, First, Middle Initial)
Dr. Jim Pillen, DVM

Mailing Address 6275 Country Club Drive

City State Zip Code
Columbus NE 68601-8363

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

Name of Employer Occupation
Progressive Swine Technologies CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: A-C12386

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4800.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Aaron A. Rickert

Mailing Address 2323 14th Street

City Columbus State NE Zip Code 68601-5009

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

Name of Employer Rickert Chiropractic Clinic Occupation Chiropractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 06 / 2008
Transaction ID: A-C12401
 Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Ms. Lucile Rickertsen

Mailing Address 803 11th Street

City Gothenburg State NE Zip Code 69138-2024

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

Name of Employer none Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 06 / 24 / 2008
Transaction ID: A-C12500
 Amount of Each Receipt this Period 50.00

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

C. Full Name (Last, First, Middle Initial)
Honorable Lee Rupp

Mailing Address 38378 253rd Street

City Monroe State NE Zip Code 68647

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

Name of Employer Self Occupation Property Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 02 / 2008
Transaction ID: A-C12387
 Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Dr. Timothy Rutz

Mailing Address 42 Arnold Palmer

City State Zip Code
San Antonio TX 78257-1723

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Tejas Anesthesia Doctor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: A-C12535

Amount of Each Receipt this Period
500.00

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

B.

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

Mailing Address 3212 20th Avenue

City State Zip Code
Kearney NE 68845-2702

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Sahling Kenworth Inc. Self-employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

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

Transaction ID: A-C12441

Amount of Each Receipt this Period
1000.00

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

C.

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

Mailing Address 6000 33rd Avenue

City State Zip Code
Columbus NE 68601-8095

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: A-C12398

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) 2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Paul Schock

Mailing Address 4201 S Vista Lane

City State Zip Code
Sioux Falls SD 57105-6835

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Developer

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

4600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2008

Transaction ID: A-C12316

Amount of Each Receipt this Period
2300.00

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

B.

Full Name (Last, First, Middle Initial)
Mr. Paul Schock

Mailing Address 4201 S Vista Lane

City State Zip Code
Sioux Falls SD 57105-6835

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Developer

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

4600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2008

Transaction ID: A-C12402

Amount of Each Receipt this Period
2300.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. William Siegel

Mailing Address PO Box 320

City State Zip Code
Morrill NE 69358-0320

FEC ID number of contributing federal political committee. C

Name of Employer Jirdon Agri Chemicals, Inc. Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

350.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2008

Transaction ID: A-C12317

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) 4700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Aaron M. Smith</p> <p>Mailing Address 4200 S Louise Avenue Suite 101</p> <p>City State Zip Code Sioux Falls SD 57106-3123</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Employed Occupation Insurance Agent</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">1800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 8</p> <p>Transaction ID: A-C12286</p> <p>Amount of Each Receipt this Period 1800.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Mr. James M. Smith</p> <p>Mailing Address 14133 Kutztown Road</p> <p>City State Zip Code Fleetwood PA 19522-8658</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self-employed Occupation Attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8</p> <p>Transaction ID: A-C12310</p> <p>Amount of Each Receipt this Period 150.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Mr. John Stinner</p> <p>Mailing Address 2310 17th Street</p> <p>City State Zip Code Gering NE 69341-2047</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Valley Bank & Trust Occupation President</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 8</p> <p>Transaction ID: A-C12466</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2450.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 26 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Bus Whitehead
 Mailing Address 2433 Woodscrest Avenue
 City Lincoln State NE Zip Code 68502-4054
 FEC ID number of contributing federal political committee. C
 Name of Employer Whitehead Oil Occupation Retired
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00
 Date of Receipt 06 / 16 / 2008
Transaction ID: A-C12438
 Amount of Each Receipt this Period 25.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mrs. Janice Wiebusch
 Mailing Address 2712 Central Avenue
 City Kearney State NE Zip Code 68847-4505
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Employed Occupation Real Estate Broker
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt 06 / 30 / 2008
Transaction ID: A-C12590
 Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mrs. Barbara Wills
 Mailing Address 1590 Park Terrace
 City Gering State NE Zip Code 69341-7114
 FEC ID number of contributing federal political committee. C
 Name of Employer Information Requested Occupation Information Requested
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00
 Date of Receipt 05 / 12 / 2008
Transaction ID: A-C12332
 Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 375.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

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

Mailing Address PO Box 238

City Minden State NE Zip Code 68959-0238

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

Name of Employer KAAPA Ethanol Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 26 / 2008

Transaction ID: A-C12546

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
Mrs. Birdeen Zier

Mailing Address 1540 Park Terrace

City Gering State NE Zip Code 69341-7114

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

Name of Employer N.A. Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 06 / 24 / 2008

Transaction ID: A-C12468

Amount of Each Receipt this Period 200.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	32528.75

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE) NATIONAL RURAL ELECTRIC COOP. ASSOC

Mailing Address 4301 Wilson Boulevard

City State Zip Code
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. C C00002972

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 06 / 08 / 2008

Transaction ID: A-C12390

Amount of Each Receipt this Period 4000.00

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

B. Full Name (Last, First, Middle Initial)
Alltel Corporation Pac (APAC)

Mailing Address 601 Pennsylvania Avenue NW
Suite 720

City State Zip Code
Washington DC 20004-2601

FEC ID number of contributing federal political committee. C C00216556

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2008

Transaction ID: A-C12564

Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL POLITICAL ACTION CMTE.

Mailing Address 1111 14th Street NW
Suite 1100

City State Zip Code
Washington DC 20005-5627

FEC ID number of contributing federal political committee. C C00000729

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 05 / 05 / 2008

Transaction ID: A-C12298

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) 6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address 220 Leigh Farm Road

City State Zip Code
Durham NC 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 8

Transaction ID: A-C12324

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
American Meat Institute Political Action Committee

Mailing Address 1150 Connecticut Avenue NW
Suite 1200

City State Zip Code
Washington DC 20036-4126

FEC ID number of contributing federal political committee. **C** C00024281

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 8

Transaction ID: A-C12325

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
American Optometric Association PAC

Mailing Address 1505 Prince Street
Suite 300

City State Zip Code
Alexandria VA 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: A-C12534

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN VETERINARY MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1910 Sunderland Place NW
Suite 710

City State Zip Code
Washington DC 20036-1608

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	8

Transaction ID: A-C12329

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Anheuser Busch Companies Inc. Political Action Committee

Mailing Address 1 Busch Place
202-5

City State Zip Code
Saint Louis MO 63118-1849

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	8

Transaction ID: A-C12377

Amount of Each Receipt this Period
2500.00

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

C. Full Name (Last, First, Middle Initial)
Arnold Stuthman Campaign Fund

Mailing Address 24160 310th St

City State Zip Code
Platte Center NE 68653

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: A-C12447

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► 3750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 76
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Associated Builders & Contractors

Mailing Address 4250 Fairfax Drive

City Arlington State VA Zip Code 22203-1665

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: A-C12552

Amount of Each Receipt this Period: 5000.00

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

B. Full Name (Last, First, Middle Initial)
CASE NEW HOLLAND INC. EXCELLENCE IN GOVERNMENT COMMITTEE

Mailing Address 1001 G Street NW Suite 100

City Washington State DC Zip Code 20001-4545

FEC ID number of contributing federal political committee. **C** C00326629

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 05 / 13 / 2008
Transaction ID: A-C12344

Amount of Each Receipt this Period: 5000.00

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

C. Full Name (Last, First, Middle Initial)
Darden Restaurants, Inc. Employees Good Government Fund PAC

Mailing Address 5900 Lake Ellenor Drive

City Orlando State FL Zip Code 32809-4634

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 12 / 2008
Transaction ID: A-C12328

Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 76
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
DEAN FOODS COMPANY PAC

Mailing Address 2111 Wilson Boulevard
Suite 700

City Arlington State VA Zip Code 22201-3052

FEC ID number of contributing federal political committee. **C** C00340083

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 05 / 12 / 2008
Transaction ID: A-C12327

Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
Directv Group, Inc. PAC

Mailing Address 444 N Capitol Street NW
Suite 728

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 05 / 12 / 2008
Transaction ID: A-C12331

Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
Directv Group, Inc. PAC

Mailing Address 444 N Capitol Street NW
Suite 728

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 05 / 19 / 2008
Transaction ID: A-C12361

Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 33 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
ELECTRICAL CONSTRUCTION PAC-NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION, INC (ECCAC)
 Mailing Address 3 Bethesda Metro Center
Suite 1100
 City State Zip Code
Bethesda MD 20814-6302
 Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 8
Transaction ID: A-C12395
 Amount of Each Receipt this Period
1000.00
 FEC ID number of contributing federal political committee. **C** C00113811
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION-MOBIL POLITICAL ACTION COMMITTEE
 Mailing Address 5959 Las Colinas Boulevard
 City State Zip Code
Irving TX 75039-4202
 Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 0 8
Transaction ID: A-C12343
 Amount of Each Receipt this Period
1000.00
 FEC ID number of contributing federal political committee. **C** C00095406
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE
 Mailing Address 50 F Street NW
Suite 900
 City State Zip Code
Washington DC 20001-1530
 Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 0 8
Transaction ID: A-C12362
 Amount of Each Receipt this Period
1000.00
 FEC ID number of contributing federal political committee. **C** C00193631
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
4000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Freshmen PAC Committee

Mailing Address PO Box 25121

City Washington State DC Zip Code 20027-8121

FEC ID number of contributing federal political committee. **C** C00383901

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: 06 / 27 / 2008
Transaction ID: A-C12550
 Amount of Each Receipt this Period: 2500.00

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

B. Full Name (Last, First, Middle Initial)
Hanger Orthopedic Group Inc. PAC

Mailing Address 2 Bethesda Metro Center Suite 1200

City Bethesda State MD Zip Code 20814-6320

FEC ID number of contributing federal political committee. **C** C00430397

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 06 / 23 / 2008
Transaction ID: A-C12449
 Amount of Each Receipt this Period: 3000.00

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

C. Full Name (Last, First, Middle Initial)
Kline For Congress

Mailing Address 101 W Burnsville Parkway Suite 104

City Burnsville State MN Zip Code 55337-2571

FEC ID number of contributing federal political committee. **C** C00326629

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 868.25

Date of Receipt: 06 / 30 / 2008
Transaction ID: A-I12556
 Amount of Each Receipt this Period: 868.25

Inkind: Lodging and Airfare for Dismal R
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **6368.25**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)
Mailing Address 9110 E Nichols Avenue

City State Zip Code
Centennial CO 80112-3450

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5274.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	8

Transaction ID: A-C12330
 Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)
Mailing Address 9110 E Nichols Avenue

City State Zip Code
Centennial CO 80112-3450

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5274.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: A-C12599
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND
Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030-7400

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2150.00

Date of Receipt

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

Transaction ID: A-I12686
 Amount of Each Receipt this Period 150.00
 Inkind: Room Rental

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

SUBTOTAL of Receipts This Page (optional) ► **2150.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL STONE SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 1605 King Street

City State Zip Code
Alexandria VA 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: A-C12385

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
NAWG WHEATPAC

Mailing Address 415 2nd Street NE Suite 300

City State Zip Code
Washington DC 20002-4900

FEC ID number of contributing federal political committee. **C** C00139964

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 8

Transaction ID: A-C12321

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
NELNET INC PAC (NELNET PAC)

Mailing Address 1726 M Street NW Suite 701

City State Zip Code
Washington DC 20036-4524

FEC ID number of contributing federal political committee. **C** C00370015

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: A-C12446

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Physical Therapy Political Action Committee PT-PAC
Mailing Address 1111 N Fairfax Street
City State Zip Code
Alexandria VA 22314-1484
FEC ID number of contributing federal political committee. **C** C00012880
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 8
Transaction ID: A-C12326
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
PINNACLE BANCORP INC PAC
Mailing Address 1401 N Street
City State Zip Code
Lincoln NE 68508-1816
FEC ID number of contributing federal political committee. **C** C00427427
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 8
Transaction ID: A-C12391
Amount of Each Receipt this Period
2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Professionals Political Action Committee, HDR
Mailing Address 8404 Indian Hills Drive
City State Zip Code
Omaha NE 68114-4049
FEC ID number of contributing federal political committee. **C** C00103903
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8
Transaction ID: A-C12459
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 76
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial) USA Rice PAC		Date of Receipt MM / DD / YYYY 05 / 30 / 2008
Mailing Address 4301 Fairfax Drive Suite 425		Transaction ID: A-C12375
City Arlington	State VA	Zip Code 22203-1653
FEC ID number of contributing federal political committee. C C00308478		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B.

Full Name (Last, First, Middle Initial) Valero Political Action Committee		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address PO Box 696000		Transaction ID: A-C12563
City San Antonio	State TX	Zip Code 78269-6000
FEC ID number of contributing federal political committee. C C00109546		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	48268.25

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

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

FOR LINE NUMBER: PAGE 39 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Kenneth Alderman

Mailing Address 220 Long Lake Drive

City State Zip Code
Miramar Beach FL 32550-8244

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

Name of Employer Occupation
Air National Guard Officer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1.91

Date of Receipt

M M / D D / Y Y Y Y
06 / 06 / 2008

Transaction ID: A-T12406

Amount of Each Receipt this Period

1.91

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

Earmarked through Slatecard.com PAC. Conduit received 5/15/2008

B.

Full Name (Last, First, Middle Initial)
Slatecard.com PAC

Mailing Address 228 S Washington Street
Suite 115

City State Zip Code
Alexandria VA 22314-5404

FEC ID number of contributing federal political committee. **C** C00438549

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1.91

Date of Receipt

M M / D D / Y Y Y Y
05 / 15 / 2008

Transaction ID: A-T12406.e

Amount of Each Receipt this Period

1.91

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

[MEMO ITEM]
Earmarked Contribution -- Original Receipt Details. Total Earmarked via this conduit: \$1.91

SUBTOTAL of Receipts This Page (optional)

1.91

TOTAL This Period (last page this line number only)

1.91

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

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

Mailing Address 1212 Circle Drive

City State Zip Code
Scottsbluff NE 69361-2790

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
702.93

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: A-M12349

Amount of Each Receipt this Period
33.77

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

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

Mailing Address 1212 Circle Drive

City State Zip Code
Scottsbluff NE 69361-2790

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
702.93

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

Transaction ID: A-M12539

Amount of Each Receipt this Period
36.30

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

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

Mailing Address 1212 Circle Drive

City State Zip Code
Scottsbluff NE 69361-2790

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
702.93

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: A-M12595

Amount of Each Receipt this Period
34.72

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

SUBTOTAL of Receipts This Page (optional) ► **104.79**

TOTAL This Period (last page this line number only) ► **104.79**

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Capitol Hill Club

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement
Fundraising Planning
Candidate Name

003
Category/
Type

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

Transaction ID: B-S-11842
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

75.94

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

[MEMO ITEM]

Subitemization of Citi Cards(05/22/08)

B.

Full Name (Last, First, Middle Initial)
Capitol Hill Club

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement
Fundraising Planning
Candidate Name

003
Category/
Type

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

Transaction ID: B-S-11866
Date of Disbursement

05 / 14 / 2008

Amount of Each Disbursement this Period

119.19

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

C.

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

Mailing Address PO Box 1605

City Alexandria State VA Zip Code 22313-1605

Purpose of Disbursement
Fundraising: Fundraising Services
Candidate Name

003
Category/
Type

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

Transaction ID: B-E-12320
Date of Disbursement

05 / 13 / 2008

Amount of Each Disbursement this Period

300.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

300.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Capitol Strategies D.C.</p> <p>Mailing Address PO Box 1605</p> <p>City Alexandria State VA Zip Code 22313-1605</p> <p>Purpose of Disbursement Fundraising: Fundraising Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12412</p> <p>Date of Disbursement 06 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 1335.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Churchill Strategies, LLC.</p> <p>Mailing Address 23 N Front Street</p> <p>City Harrisburg State PA Zip Code 17101-1640</p> <p>Purpose of Disbursement Advertising: Design of Website</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12290</p> <p>Date of Disbursement 05 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 4100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Citi Cards</p> <p>Mailing Address PO Box 688903</p> <p>City Des Moines State IA Zip Code 50368-8903</p> <p>Purpose of Disbursement Other: Credit Card</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12369</p> <p>Date of Disbursement 05 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 2723.15</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Original vendors exceeding reporting threshold itemized as memo transactions.</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8158.56

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 43 / 76

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) Citi Cards Mailing Address PO Box 688903 City Des Moines State IA Zip Code 50368-8903 Purpose of Disbursement Other Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12557 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 8
	Amount of Each Disbursement this Period 1224.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Original vendors exceeding reporting threshold itemized as memo transactions.
	Category/ Type 001

B. Full Name (Last, First, Middle Initial) Complete Campaigns Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Campaign Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12354 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type 001
	Category/ Type 001

C. Full Name (Last, First, Middle Initial) Complete Campaigns Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Campaign Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12355 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type 001
	Category/ Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	2224.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial) Adrian Smith for Congress</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: Electronic Credit Card Process</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12338</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 370.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial) Adrian Smith for Congress</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: Electronic Credit Card Process</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12364</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 1.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial) Adrian Smith for Congress</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: Electronic Credit Card Process</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12365</p> <p>Date of Disbursement 05 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 132.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

503.95

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial) Adrian Smith for Congress</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Fundraising: Fee for Blast Email</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12541</p> <p>Date of Disbursement 05 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 13.07</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Other: Electronic Credit Card Process</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12417</p> <p>Date of Disbursement 06 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Campaign Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12597</p> <p>Date of Disbursement 06 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

523.07

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Complete Campaigns	Full Name (Last, First, Middle Initial) Complete Campaigns	Transaction ID: B-E-12416 Date of Disbursement 06 / 09 / 2008
	Mailing Address 610 Gateway Center Way Suite K	Amount of Each Disbursement this Period 5.00
	City San Diego State CA Zip Code 92102-4548	
	Purpose of Disbursement Other: Electronic Credit Card Process	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

B. Complete Campaigns	Full Name (Last, First, Middle Initial) Complete Campaigns	Transaction ID: B-E-12598 Date of Disbursement 06 / 19 / 2008
	Mailing Address 610 Gateway Center Way Suite K	Amount of Each Disbursement this Period 54.96
	City San Diego State CA Zip Code 92102-4548	
	Purpose of Disbursement Other: Electronic Processing Fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

C. Complete Campaigns	Full Name (Last, First, Middle Initial) Complete Campaigns	Transaction ID: B-E-12576 Date of Disbursement 06 / 24 / 2008
	Mailing Address 610 Gateway Center Way Suite K	Amount of Each Disbursement this Period 25.00
	City San Diego State CA Zip Code 92102-4548	
	Purpose of Disbursement Other: Electronic Processing Fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	84.96
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Complete Campaigns

Full Name (Last, First, Middle Initial)
Adrian Smith for Congress

Mailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement
Other: Electronic Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: B-E-12600
Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

18.00

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

B. Complete Campaigns

Full Name (Last, First, Middle Initial)
Adrian Smith for Congress

Mailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement
Other: Electronic Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: B-E-12601
Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

0.60

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

C. Complete Campaigns

Full Name (Last, First, Middle Initial)
Greg Davis for Congress

Mailing Address 5779 Getwell Road
Bldg. D1

City Southaven State MS Zip Code 38672-6351

Purpose of Disbursement
Contribution to Candidate

Candidate Name
Greg Davis for Congress

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: B-E-12314
Date of Disbursement

05 / 12 / 2008

Amount of Each Disbursement this Period

2000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2018.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Heartland Campaign Management	Transaction ID: B-E-12313 Date of Disbursement 05 / 08 / 2008
	Mailing Address PO Box 241142	Amount of Each Disbursement this Period 14326.97
	City Omaha State NE Zip Code 68124-5142	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Fundraising: Fundraising Services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 003
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Heartland Campaign Management	Transaction ID: B-E-12542 Date of Disbursement 06 / 26 / 2008
	Mailing Address PO Box 241142	Amount of Each Disbursement this Period 1488.12
	City Omaha State NE Zip Code 68124-5142	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Fundraising: Fundraising Planning Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type 003
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kline For Congress	Transaction ID: B-I-12556 Date of Disbursement 06 / 30 / 2008
	Mailing Address 101 W Burnsville Parkway Suite 104	Amount of Each Disbursement this Period 868.25
	City Burnsville State MN Zip Code 55337-2571	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement Inkind: Lodging and Airfare for Dismal Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	16683.34
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Mail Marketing, Inc.</p> <p>Mailing Address 10913 E Circle</p> <p>City Omaha State NE Zip Code 68137-1223</p> <p>Purpose of Disbursement Fundraising: June Mail Piece</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12388</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1351.41"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Mail Solutions</p> <p>Mailing Address 4610 S 133rd Street Suite 104</p> <p>City Omaha State NE Zip Code 68137-1133</p> <p>Purpose of Disbursement Invitations for Columbus Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11897</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="347.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(06/24/08)</p>
<p>C. Full Name (Last, First, Middle Initial) Meridian Central</p> <p>Mailing Address 2937 S 120th Street</p> <p>City Omaha State NE Zip Code 68144-4310</p> <p>Purpose of Disbursement Newspaper Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11843</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1657.05"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(05/22/08)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Meridian Central

Mailing Address 2937 S 120th Street

City Omaha State NE Zip Code 68144-4310

Purpose of Disbursement
Advertising: Newspaper Ad
Candidate Name

004
Category/
Type

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

Transaction ID: B-E-12336
Date of Disbursement

05 / 13 / 2008

Amount of Each Disbursement this Period

1244.20

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

B.

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

Mailing Address 1212 Circle Drive

City Scottsbluff State NE Zip Code 69361-2790

Purpose of Disbursement
Payroll Taxes
Candidate Name

001
Category/
Type

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

Transaction ID: B-E-12363
Date of Disbursement

05 / 15 / 2008

Amount of Each Disbursement this Period

195.74

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

C.

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

Mailing Address 1212 Circle Drive

City Scottsbluff State NE Zip Code 69361-2790

Purpose of Disbursement
Payroll Taxes
Candidate Name

001
Category/
Type

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

Transaction ID: B-E-12527
Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

433.22

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

SUBTOTAL of Disbursements This Page (optional) ▶

1873.16

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Securenet</p> <p>Mailing Address 6011 Executive Boulevard Suite 201</p> <p>City Rockville State MD Zip Code 20852-3805</p> <p>Purpose of Disbursement Other: Electronic Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12353</p> <p>Date of Disbursement 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 29.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Securenet</p> <p>Mailing Address 6011 Executive Boulevard Suite 201</p> <p>City Rockville State MD Zip Code 20852-3805</p> <p>Purpose of Disbursement Other: Electronic Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12540</p> <p>Date of Disbursement 05 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 29.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Securenet</p> <p>Mailing Address 6011 Executive Boulevard Suite 201</p> <p>City Rockville State MD Zip Code 20852-3805</p> <p>Purpose of Disbursement Other: Electronic Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12596</p> <p>Date of Disbursement 06 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 29.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	89.85
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Staples Mailing Address 1711 Frontage Road City State Zip Code Scottsbluff NE 69361-2780 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11837 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>54.22</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	4	/	2	0	0	8	54.22
M	M	/	D	D	/	Y	Y	Y	Y														
0	4	/	0	4	/	2	0	0	8														
54.22																							
B.	Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City State Zip Code Dallas TX 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11840 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>30.54</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	0	/	2	0	0	8	30.54
M	M	/	D	D	/	Y	Y	Y	Y														
0	4	/	1	0	/	2	0	0	8														
30.54																							
C.	Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City State Zip Code Dallas TX 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11841 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.68</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	0	/	2	0	0	8	25.68
M	M	/	D	D	/	Y	Y	Y	Y														
0	4	/	1	0	/	2	0	0	8														
25.68																							

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) United Parcel Service <hr/> Mailing Address PO Box 660650 <hr/> City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11844 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 140.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)

B. Full Name (Last, First, Middle Initial) United Parcel Service <hr/> Mailing Address PO Box 660650 <hr/> City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11847 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 12.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)

C. Full Name (Last, First, Middle Initial) United Parcel Service <hr/> Mailing Address PO Box 660650 <hr/> City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11848 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 17.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11849
Date of Disbursement

04 / 26 / 2008

Amount of Each Disbursement this Period

30.54

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

[MEMO ITEM]

Subitemization of Citi Cards(05/22/08)

B.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11850
Date of Disbursement

04 / 27 / 2008

Amount of Each Disbursement this Period

8.07

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

[MEMO ITEM]

Subitemization of Citi Cards(05/22/08)

C.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11852
Date of Disbursement

05 / 01 / 2008

Amount of Each Disbursement this Period

12.43

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

[MEMO ITEM]

Subitemization of Citi Cards(05/22/08)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11854
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	8

Amount of Each Disbursement this Period

18.72

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

[MEMO ITEM]

Subitemization of Citi Cards(05/22/08)

B.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11855
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	8

Amount of Each Disbursement this Period

12.61

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

C.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11856
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	8

Amount of Each Disbursement this Period

14.04

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11857 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="15.57"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11858 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="17.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11859 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="17.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11860 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="14.47"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11861 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="15.57"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11862 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="15.57"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11863
Date of Disbursement

05 / 09 / 2008

Amount of Each Disbursement this Period

15.57

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

B.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11869
Date of Disbursement

05 / 23 / 2008

Amount of Each Disbursement this Period

12.01

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

C.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11870
Date of Disbursement

05 / 23 / 2008

Amount of Each Disbursement this Period

12.01

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11871 Date of Disbursement 05 / 23 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 12.91
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11872 Date of Disbursement 05 / 23 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 13.34
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11873 Date of Disbursement 05 / 23 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 13.34
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11874 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="14.98"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11875 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="14.98"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11876 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="15.87"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
05/23/08

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11877
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

Amount of Each Disbursement this Period

15.87

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

B.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11878
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

Amount of Each Disbursement this Period

15.87

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

C.

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

Mailing Address PO Box 660650

City Dallas State TX Zip Code 75266-0650

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: B-S-11879
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	0	8

Amount of Each Disbursement this Period

26.75

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11880 Date of Disbursement 05 / 25 / 2008 Amount of Each Disbursement this Period 7.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Category/Type	Category/Type

B. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11881 Date of Disbursement 05 / 25 / 2008 Amount of Each Disbursement this Period 11.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Category/Type	Category/Type

C. Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address PO Box 660650 City Dallas State TX Zip Code 75266-0650 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11882 Date of Disbursement 05 / 25 / 2008 Amount of Each Disbursement this Period 11.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Category/Type	Category/Type

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11883 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11884 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11885 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11886</p> <p>Date of Disbursement 05 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 11.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(06/24/08)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11887</p> <p>Date of Disbursement 05 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 11.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(06/24/08)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 660650</p> <p>City Dallas State TX Zip Code 75266-0650</p> <p>Purpose of Disbursement shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-S-11888</p> <p>Date of Disbursement 05 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 11.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Subitemization of Citi Cards(06/24/08)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11889 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11890 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11891 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11892 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11893 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11894 Date of Disbursement 05 / 25 / 2008
	Mailing Address PO Box 660650	Amount of Each Disbursement this Period 11.65
	City Dallas State TX Zip Code 75266-0650	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: B-S-11895 Date of Disbursement
	Mailing Address PO Box 660650	<input type="text" value="05"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75266-0650	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="11.92"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(06/24/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: B-S-11838 Date of Disbursement
	Mailing Address 201 2nd St	<input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Melbeta State NE Zip Code 69355	Amount of Each Disbursement this Period
	Purpose of Disbursement Stamps and Shipping	<input type="text" value="209.20"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(05/22/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: B-S-11839 Date of Disbursement
	Mailing Address 201 2nd St	<input type="text" value="04"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Melbeta State NE Zip Code 69355	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="25.10"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Citi Cards(05/22/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address 201 2nd St City Melbeta State NE Zip Code 69355 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11845 Date of Disbursement 04 / 24 / 2008 Amount of Each Disbursement this Period 9.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)
	Category/Type	Category/Type

B. Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address 201 2nd St City Melbeta State NE Zip Code 69355 Purpose of Disbursement Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11846 Date of Disbursement 04 / 24 / 2008 Amount of Each Disbursement this Period 124.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)
	Category/Type	Category/Type

C. Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address 201 2nd St City Melbeta State NE Zip Code 69355 Purpose of Disbursement Stamps and Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-11851 Date of Disbursement 04 / 30 / 2008 Amount of Each Disbursement this Period 41.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Citi Cards(05/22/08)
	Category/Type	Category/Type

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 201 2nd St

City Melbeta State NE Zip Code 69355

Purpose of Disbursement

Stamps

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-S-11864

Date of Disbursement

05 / 09 / 2008

Amount of Each Disbursement this Period

82.00

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

[MEMO ITEM]

Subitemization of Citi Ca-
rds(06/24/08)

B.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 201 2nd St

City Melbeta State NE Zip Code 69355

Purpose of Disbursement

Shipping

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-S-11867

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

10.65

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

[MEMO ITEM]

Subitemization of Citi Ca-
rds(06/24/08)

C.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 201 2nd St

City Melbeta State NE Zip Code 69355

Purpose of Disbursement

Other: Stamps for June Mail Piece

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-12389

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

767.53

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

SUBTOTAL of Disbursements This Page (optional)

767.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 201 2nd St

City Melbeta State NE Zip Code 69355

Purpose of Disbursement
BRE Fee for direct mail
Candidate Name

001
Category/
Type

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

Transaction ID: B-E-12530
Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

250.00

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

B.

Full Name (Last, First, Middle Initial)
Wal-Mart

Mailing Address 3322 Avenue I

City Scottsbluff State NE Zip Code 69361-4589

Purpose of Disbursement
Food and Beverage for Voluntee
Candidate Name

Category/
Type

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

Transaction ID: B-S-11865
Date of Disbursement

05 / 13 / 2008

Amount of Each Disbursement this Period

153.54

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

C.

Full Name (Last, First, Middle Initial)
Wal-Mart

Mailing Address 3322 Avenue I

City Scottsbluff State NE Zip Code 69361-4589

Purpose of Disbursement
Office Supplies
Candidate Name

001
Category/
Type

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

Transaction ID: B-S-11868
Date of Disbursement

05 / 22 / 2008

Amount of Each Disbursement this Period

17.09

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

[MEMO ITEM]

Subitemization of Citi Cards(06/24/08)

SUBTOTAL of Disbursements This Page (optional) ▶

250.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) Mr. Casper Brixius <hr/> Mailing Address 20237 County Road 13 <hr/> City Mitchell State NE Zip Code 69357-2527 Purpose of Disbursement Campaign Staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12291 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 200.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Full Name (Last, First, Middle Initial) Mr. Casper Brixius <hr/> Mailing Address 20237 County Road 13 <hr/> City Mitchell State NE Zip Code 69357-2527 Purpose of Disbursement Campaign Staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12341 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 300.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. Full Name (Last, First, Middle Initial) Mr. Casper Brixius <hr/> Mailing Address 20237 County Road 13 <hr/> City Mitchell State NE Zip Code 69357-2527 Purpose of Disbursement Campaign Staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12381 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 214.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	715.66
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Anthony Dworak

Mailing Address 3805 22nd Street

City Columbus State NE Zip Code 68601-2911

Purpose of Disbursement
Inkind: Food and Beverages

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-I-12560
Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

493.75

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

B.

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

Mailing Address 220 Madison Avenue

City Morrill State NE Zip Code 69358-5021

Purpose of Disbursement
Report Preparation

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-12292
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

210.87

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

C.

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

Mailing Address 220 Madison Avenue

City Morrill State NE Zip Code 69358-5021

Purpose of Disbursement
Report Preparation

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-12340
Date of Disbursement

05 / 14 / 2008

Amount of Each Disbursement this Period

893.50

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

SUBTOTAL of Disbursements This Page (optional)

1598.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Lenora S Gompert Mailing Address 220 Madison Avenue City Morrill State NE Zip Code 69358-5021 Purpose of Disbursement Report Preparation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12342 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8	Amount of Each Disbursement this Period 210.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Mrs. Lenora S Gompert Mailing Address 220 Madison Avenue City Morrill State NE Zip Code 69358-5021 Purpose of Disbursement Report Preparation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12382 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8	Amount of Each Disbursement this Period 210.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mrs. Lenora S Gompert Mailing Address 220 Madison Avenue City Morrill State NE Zip Code 69358-5021 Purpose of Disbursement Report Preparation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12528 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8	Amount of Each Disbursement this Period 210.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

632.61

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A. Full Name (Last, First, Middle Initial) Mrs. Lenora S Gompert</p> <p>Mailing Address 220 Madison Avenue</p> <p>City Morrill State NE Zip Code 69358-5021</p> <p>Purpose of Disbursement Report Preparation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12559</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 210.87</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. John R Hoehne</p> <p>Mailing Address 3221 Sunset Drive</p> <p>City North Platte State NE Zip Code 69101-6330</p> <p>Purpose of Disbursement Fundraising: Fundraising Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12410</p> <p>Date of Disbursement 06 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. John R Hoehne</p> <p>Mailing Address 3221 Sunset Drive</p> <p>City North Platte State NE Zip Code 69101-6330</p> <p>Purpose of Disbursement Other: Reimbursement of phone charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12531</p> <p>Date of Disbursement 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 142.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1353.63

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mrs. Melissa Mosher</p> <p>Mailing Address 1750 12th Street</p> <p>City Gering State NE Zip Code 69341-4106</p> <p>Purpose of Disbursement Campaign Staff Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12339</p> <p>Date of Disbursement 05 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 54.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mrs. Melissa Mosher</p> <p>Mailing Address 1750 12th Street</p> <p>City Gering State NE Zip Code 69341-4106</p> <p>Purpose of Disbursement Campaign Staff Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12383</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 206.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mrs. Melissa Mosher</p> <p>Mailing Address 1750 12th Street</p> <p>City Gering State NE Zip Code 69341-4106</p> <p>Purpose of Disbursement Campaign Staff Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-12529</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 19.62</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

280.52

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Melissa Mosher Mailing Address 1750 12th Street City Gering State NE Zip Code 69341-4106 Purpose of Disbursement Campaign Staff Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12558 Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 75.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Congressma Adrian Smith Mailing Address 3321 Avenue I City Scottsbluff State NE Zip Code 69361-4586 Purpose of Disbursement Reimburse Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12315 Date of Disbursement 05 / 12 / 2008 Amount of Each Disbursement this Period 82.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Congressma Adrian Smith Mailing Address 3321 Avenue I City Scottsbluff State NE Zip Code 69361-4586 Purpose of Disbursement Other: Reimbursement of Mileage to Di Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-12413 Date of Disbursement 06 / 12 / 2008 Amount of Each Disbursement this Period 53.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	210.03
TOTAL This Period (last page this line number only)	39619.00