

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Adrian Smith for Congress

ADDRESS (number and street) 3321 AVENUE I SUITE 6
 Check if different than previously reported. (ACC)
SCOTTSBLUFF NE 69361

2. **FEC IDENTIFICATION NUMBER** C00412890
CITY **STATE** **ZIP CODE**
STATE DISTRICT
3. **IS THIS REPORT** NEW (N) **OR** AMENDED (A)
NE

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 07 01 2005 through 09 30 2005

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

Signature of Treasurer Electronically Filed by TYLER MARSHALL Date 02 05 2007

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Adrian Smith for Congress

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	53828.70	53828.70
(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)).....	53828.70	53828.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	17252.63	17252.63
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	17252.63	17252.63
8. Cash on Hand at Close of Reporting Period (from Line 27).....	36579.54	
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).....	7756.76	

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 02/2003)

Write or Type Committee Name
Adrian Smith for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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).....

31138.60

31138.60

(ii) Unitemized.....

10265.55

10265.55

(iii) TOTAL of contributions

41404.15

41404.15

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

6750.00

6750.00

(d) The Candidate.....

5674.55

5674.55

(e) TOTAL CONTRIBUTIONS (other than loans)

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

53828.70

53828.70

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

0.00

0.00

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

0.00

15. OTHER RECEIPTS

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

3.47

3.47

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

53832.17

53832.17

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17252.63	17252.63
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	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	17252.63	17252.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	53832.17
25. SUBTOTAL (add Line 23 and Line 24).....	53832.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17252.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	36579.54

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 38
	<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	

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)
Scott Berryman

Mailing Address 901 Graham Dr

City State Zip Code
Papillion NE 68046-7043

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

Name of Employer
Self Employed

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2005

Transaction ID: A888E71BF9FA8447B953

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Matt Larsen

Mailing Address 1615 1st Ave

City State Zip Code
Scottsbluff NE 69361-3108

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

Name of Employer
Vistabeam

Occupation
Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2005

Transaction ID: A3C743BB7D926403089D

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
Robert Anderson

Mailing Address 1335 H St Ste 100

City State Zip Code
Lincoln NE 68508-3790

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

Name of Employer
Ne Agri-business Assn. In-c.

Occupation
President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2005

Transaction ID: A1EA336E152404CC799D

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 38
	<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)
Aaron Smith

Mailing Address 4200 S. Louise Ave
Ste 101

City State Zip Code
Sioux Falls SD 57106-3123

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

Name of Employer Self Employed
Occupation Insurance Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2005

Transaction ID: A022DBB063B614408A30

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
Jeff Coleman

Mailing Address 1617 E. Chocolate Ave

City State Zip Code
Hershey PA 17033-1120

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

Name of Employer Self Employed
Occupation Political Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2005

Transaction ID: AB06EBADC39B2465FA42

Amount of Each Receipt this Period
1000.00

In-kind: Consulting/Logo
Desi
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Hon. Jon Bruning

Mailing Address PO Box 83527

City State Zip Code
Lincoln NE 68501-3527

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

Name of Employer State Of Nebraska
Occupation Attorney General

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2005

Transaction ID: ADAF27564AC644C95AA5

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 38
	<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)
Sue Arganbright

Mailing Address PO Box 67

City State Zip Code
Valentine NE 69201-0067

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

Name of Employer Occupation
Arganbright Law Offices Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2005

Transaction ID: ADE3E34ACADDB4B6ABAC

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Liesa Ojeda

Mailing Address 7528 Whitlock Place

City State Zip Code
Lincoln NE 68516-5786

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

Name of Employer Occupation
Ameritas Business Analyst

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2005

Transaction ID: A2E9B56772EAD48BA859

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Terry Barton

Mailing Address 530 Southford Dr

City State Zip Code
Waukee IA 50263-9559

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

Name of Employer Occupation
State Farm Insurance Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2005

Transaction ID: A3B7FBC06E61646F59E9

Amount of Each Receipt this Period
250.00

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

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 38
	<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)
Walter Radcliffe

Mailing Address 625 S. 14th St
Ste 100, The Mayfair

City Lincoln State NE Zip Code 68508-2737

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

Name of Employer Radcliffe & Associates Occupation Government Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2005

Transaction ID: A9645290A2A414FB1B74

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Neal Smith

Mailing Address 3321 Ave I

City Scottsbluff State NE Zip Code 69361

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

Name of Employer Self Employed Occupation Insurance Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2005

Transaction ID: A0EEC0268717A42E986E

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 45 Carriage Horse Circle Rd

City Alexandria State VA Zip Code 22304

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

Name of Employer Capitol Impact, Llc Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2005

Transaction ID: AB5290FE1720E4EEBBBC

Amount of Each Receipt this Period
500.00

Check
 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 38
	<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)
Ronald Jensen

Mailing Address 625 S. 14th St
Ste A

City Lincoln State NE Zip Code 68508-2737

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

Name of Employer Ronald Jensen Occupation Government Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2005

Transaction ID: A233C5ACB551A4A09BCE

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Sen. Patrick Bourne

Mailing Address 5121 Erskine St

City Omaha State NE Zip Code 68124-4352

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

Name of Employer Blue Cross/blue Shield Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2005

Transaction ID: A178545B2529E42E48BA

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Sen. Kermit Brashear

Mailing Address 216 N. 117th St

City Omaha State NE Zip Code 68154-2204

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

Name of Employer Brashear & Ginn Occupation Lawyer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2005

Transaction ID: AE7B959D051664C69A10

Amount of Each Receipt this Period
1000.00

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

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 38
	<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)
Debora Carpenter

Mailing Address 2522 August St

City State Zip Code
Grand Island NE 68801-7532

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

Name of Employer Fab Subs, Ltd. Occupation Exec. Asst.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2005

Transaction ID: A9F8E72406A854374A30

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
Todd Carpenter

Mailing Address 2522 August St.

City State Zip Code
Grand Island NE 68801-7532

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

Name of Employer Grand Island Subs, Inc. Occupation Developer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2005

Transaction ID: A65BC2B47B41F4676A0C

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 1927 Lakeshore Dr

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: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2005

Transaction ID: AE9EF81FE558147C8B6A

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4450.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 38
	<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)
Charles Davis

Mailing Address 4085 Davis Rd

City State Zip Code
Southaven MS 38671-9620

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

Name of Employer City Of Southaven Occupation Mayor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2005

Transaction ID: AFB4602E541B04689886

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Kenneth Tharp

Mailing Address 6355 Perry Cir

City State Zip Code
Lincoln NE 68516-3958

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

Name of Employer Lincoln Christian School Occupation Tennis Coach

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2005

Transaction ID: A61168EBC6F43473BB6C

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 2002 Broadway

City State Zip Code
Scottsbluff NE 69361

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

Name of Employer First State Bank Occupation Banker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2005

Transaction ID: A0A1D50BB8D08490AA04

Amount of Each Receipt this Period
250.00

Check
 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 38
	<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)
Birdeen Zier

Mailing Address 1540 Park Terrace

City State Zip Code
Gering NE 69341-7114

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

Name of Employer N.A. Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: A44F0C1A8F58F436E89E

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Hon. Hal Daub

Mailing Address 314 N 97th Court

City State Zip Code
Omaha NE 68114

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

Name of Employer Blackwell Sanders Peper Martin Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: A6533F1F16B4347618D7

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Carol Bangertner

Mailing Address 2550 21st St Apt 205

City State Zip Code
Gering NE 69341-1941

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

Name of Employer N.A. Occupation Retired - Rancher/farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

333.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: A59AA0834A3E44151B9C

Amount of Each Receipt this Period
333.00

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

SUBTOTAL of Receipts This Page (optional) ► **1083.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 38
	<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)
Judith Smith

Mailing Address 2445 Valencia Dr

City State Zip Code
Gering NE 69341-1934

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

Name of Employer Occupation
Western Nebraska Community Col Learning Center Director

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: AF07BF4140E824594A70

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Brent Holliday

Mailing Address 2020 Kings Rd

City State Zip Code
Gering NE 69341-2000

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

Name of Employer Occupation
Nebraska Transport Co President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: A132BB0B99EDD4C6A91C

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mrs. Beverly Mohr

Mailing Address 506 S Beltline

City State Zip Code
Scottsbluff NE 69361

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

Name of Employer Occupation
N.A. Housewife

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: ACBF0C9E893524AEC8BF

Amount of Each Receipt this Period
1000.00

Check
 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 38
	<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

Full Name (Last, First, Middle Initial) A. Marvin Grove		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005	
Mailing Address 7090 Spencer St		Transaction ID: A72CCE913A1DF47DA9AF	
City Omaha	State NE	Amount of Each Receipt this Period 300.00	
Zip Code 68104-3141		Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Butterfields M-c Parts	Occupation Sales		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Josh Sand		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005	
Mailing Address 1300 Garret Ln		Transaction ID: A38B064974C564892B26	
City Lincoln	State NE	Amount of Each Receipt this Period 250.00	
Zip Code 68512-9330		Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Bancwise	Occupation Vice President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Patricia Logsdon		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005	
Mailing Address 6733 Park Crest Ct		Transaction ID: ACE545406246E4CDBA5E	
City Lincoln	State NE	Amount of Each Receipt this Period 250.00	
Zip Code 68506-2865		Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer University Of Nebraska	Occupation Assistant Athletic Director Fo		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 38
	<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)
Larry Ruth

Mailing Address 11500 Van Dorn

City State Zip Code
Walton NE 68461-9746

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

Name of Employer
Self Employed

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: AD112DAB0C13A424AB81

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Robert Logsdon

Mailing Address 6733 Park Crest Ct

City State Zip Code
Lincoln NE 68506-2865

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

Name of Employer
Cox Communications

Occupation
Director Of Regulatory Affairs

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: A541689E801E148B2B76

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Walter Radcliffe

Mailing Address 625 S. 14th St
Ste 100, The Mayfair

City State Zip Code
Lincoln NE 68508-2737

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

Name of Employer
Radcliffe & Associates

Occupation
Government Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1405.60

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: AC40D592980704B1EA97

Amount of Each Receipt this Period
1155.60

In-kind: Lincoln Fundraiser
9
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	1655.60
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 38
	<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)
Linda Rutz

Mailing Address 2831 S. 46th St

City Lincoln State NE Zip Code 68506-3333

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

Name of Employer Union Agency Inc. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2005

Transaction ID: A90EA43D2C67C4B83A86

Amount of Each Receipt this Period
400.00

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

B. Full Name (Last, First, Middle Initial)
Robert Moline

Mailing Address 7423 SW 70th St

City Lincoln State NE Zip Code 68339-3288

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

Name of Employer Home Services Of Nebraska Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2005

Transaction ID: A7274990E0105477AB3F

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Verlyn Dunlap

Mailing Address 802 Park Ave

City Milford State NE Zip Code 68405-9792

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

Name of Employer N.A. Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2005

Transaction ID: AEEB072566299447D985

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1900.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 38
	<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)
Stephanie Blehm

Mailing Address 7835 Red Oak Rd

City Lincoln State NE Zip Code 68516-6311

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

Name of Employer N.A. Occupation Stay At Home

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: A16124ECB99864F1B86E

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Michael Green

Mailing Address 7550 Brummond Dr

City Lincoln State NE Zip Code 68502-5826

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

Name of Employer Cline Williams Law Firm, Llp Occupation Paralegal

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: A038EABFE6C094B02B5C

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Ronald Jensen

Mailing Address 625 S. 14th St Ste A

City Lincoln State NE Zip Code 68508-2737

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

Name of Employer Ronald Jensen Occupation Government Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: A6FA3DB51E4A94399B6C

Amount of Each Receipt this Period
100.00

Check
 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 38
	<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)
Kim Robak

Mailing Address 2325 Marilynn Ave

City Lincoln State NE Zip Code 68502-5634

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
09 / 27 / 2005

Transaction ID: A95A60C851B194743B1A

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 2321 Wilderness Ridge Dr

City Lincoln State NE Zip Code 68512-9295

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

Name of Employer Home Real Estate Occupation Real Estate Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
09 / 27 / 2005

Transaction ID: A1591E7D26BAF4E1BBA6

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Hon. Jon Bruning

Mailing Address PO Box 83527

City Lincoln State NE Zip Code 68501-3527

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

Name of Employer State Of Nebraska Occupation Attorney General

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt
09 / 27 / 2005

Transaction ID: AEF63362FF6344D57B0D

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 38
	<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)
Richard Wolfe

Mailing Address 1300 Plum Ridge Rd

City Lincoln State NE Zip Code 68527-9469

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

Name of Employer Wolfe Electric Occupation Electrical Contractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: AAE0BB564D2D64C28B7B

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Deonne Bruning

Mailing Address 2901 Bonacum Dr

City Lincoln State NE Zip Code 68502-5725

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

Name of Employer Self - Deonne Bruning, P.-c., L Occupation Lawyer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: A9E682FAB406B4A979C4

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Percy Kirk

Mailing Address 19407 Howe Cir

City Omaha State NE Zip Code 68154-5015

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

Name of Employer Cox Communications Occupation VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2005

Transaction ID: AE3DFD4091A3A45DCA94

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **1000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 38
	<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)
Michael Riedmann

Mailing Address 13706 Parker Cir

City State Zip Code
Omaha NE 68154-3885

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

Name of Employer Np Dodge Real Estate Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2005

Transaction ID: A0CC8F0FDF4944300B2C

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Darlene Kovarik

Mailing Address 230946 Hwy 92

City State Zip Code
Gering NE 69341-5202

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

Name of Employer Century 21 Occupation Realtor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2005

Transaction ID: A94280DBF537D4463A76

Amount of Each Receipt this Period
400.00

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

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

Mailing Address 2213 4th Ave

City State Zip Code
Scottsbluff NE 69361-2038

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

Name of Employer Baker & Assoc. Occupation Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2005

Transaction ID: A0A10D8A9423F49CAA83

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1650.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 38
	<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)
Hod Kosman

Mailing Address 190498 County Rd G

City State Zip Code
Scottsbluff NE 69361

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

Name of Employer Occupation
Platte Valley National Bank President

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2005

Transaction ID: AA4CA332F1EC44DB8910

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Tonn M. Ostergard

Mailing Address 7001 Stevens Ridge Rd

City State Zip Code
Lincoln NE 68516-3743

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

Name of Employer Occupation
Crete Carrier Corp CEO

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2005

Transaction ID: A3C8BD3D5E8F14ADE86D

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Chuck Bosselman

Mailing Address 2605 Apache Rd

City State Zip Code
Grand Island NE 68801-7511

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

Name of Employer Occupation
Self Employed Bosselman Inc

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2005

Transaction ID: AE68BC693FFAC45AF816

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 38
	<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)
Elizabeth Gwin

Mailing Address 1260 M St

City State Zip Code
Gering NE 69341-2838

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

Name of Employer Occupation
Schlothauer & Van Nox Dental Hygienist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2005

Transaction ID: A6CC112A8871549A8B4E

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Lynne Rustad

Mailing Address 3400 S. 70th St

City State Zip Code
Lincoln NE 68516

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

Name of Employer Occupation
Self Employed Ellyne Bridal

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2005

Transaction ID: A0209D195DC934D2BBAF

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 4505 Yucca Dr

City State Zip Code
Kimball NE 69145-2082

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

Name of Employer Occupation
First Tier Bank Banker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2005

Transaction ID: A3055F9216602400A873

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 38
	<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)
Darlene Kovarik

Mailing Address 230946 Hwy 92

City State Zip Code
Gering NE 69341-5202

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

Name of Employer Occupation
Century 21 Realtor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2005

Transaction ID: A81349578AA5F438DACF

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Charles Davis

Mailing Address 4085 Davis Rd

City State Zip Code
Southaven MS 38671-9620

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

Name of Employer Occupation
City Of Southaven Mayor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2005

Transaction ID: AE51DBEB758E44989809

Amount of Each Receipt this Period
200.00

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

C. Full Name (Last, First, Middle Initial)
James Reinhardt

Mailing Address 190446 County Rd G

City State Zip Code
Scottsbluff NE 69361

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

Name of Employer Occupation
B & C Steel Company Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2005

Transaction ID: A13FC4F364DB24324A3A

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 24 / 38	
	(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
--

Full Name (Last, First, Middle Initial) A. William Siegel	
Mailing Address PO Box 320	
City Morrill	State Zip Code NE 69358-0320
FEC ID number of contributing federal political committee. C	
Name of Employer Jirdon Agrichemicals Inc	Occupation President
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY 09 / 30 / 2005
Transaction ID: AD5C7B6C815B6468B889
Amount of Each Receipt this Period 500.00
Check <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	31138.60

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 38
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Blue Cross And Blue Shield Of Nebraska P

Mailing Address 7261 Mercy Rd
Po Box 3248

City Omaha State NE Zip Code 68124

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 06 / 2005

Transaction ID: A5207E7ECB63E4A449DA

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
NEBRASKA BANKERS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 233 SOUTH 13TH STREET SUITE 700

City Lincoln State NE Zip Code 68508

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 24 / 2005

Transaction ID: A0ABFDE918EB84C8F809

Amount of Each Receipt this Period
200.00

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

C. Full Name (Last, First, Middle Initial)
Jon A. Camp For City Council

Mailing Address Po Box 82307

City Lincoln State NE Zip Code 68501

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2005

Transaction ID: AB7963A8E9B994B1E968

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2950.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 38
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Carol Hudkins Legislative Committee

Mailing Address 800 NW 112th St
Rt 1, Box 34

City State Zip Code
Malcolm NE 68402

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: A003980CAB72440D995F

Amount of Each Receipt this Period
200.00

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

B. Full Name (Last, First, Middle Initial)
Landis For Psc

Mailing Address 3400 Calvert St

City State Zip Code
Lincoln NE 68506-5722

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2005

Transaction ID: AB1AB1233E66E46DCB02

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
FIRST DATA CORPORATION EMPLOYEES FOR RESPONSIBLE GOVERNMENT

Mailing Address 6200 S Quebec St
Suite 350

City State Zip Code
Greenwood Village CO 80111

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2005

Transaction ID: A0CF037CFD3E944C3B1A

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 38
	(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)
FIRST NATIONAL OF NEBRASKA PAC

Mailing Address 1620 DODGE STREET
STOP 3395

City Omaha State NE Zip Code 68197

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2005

Transaction ID: A4F1E40DEAD5A4C97B40

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	6750.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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

Full Name (Last, First, Middle Initial) A. Adrian Smith		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2005	
Mailing Address 3321 Ave I		Transaction ID: A91EF85D992374FCB88D	
City Scottsbluff	State NE	Zip Code 69361	Amount of Each Receipt this Period 1839.92
FEC ID number of contributing federal political committee. C		In-kind: July Mileage <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1839.92		

Full Name (Last, First, Middle Initial) B. Adrian Smith		Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2005	
Mailing Address 3321 Ave I		Transaction ID: A91B2FECF8D9C480BA8D	
City Scottsbluff	State NE	Zip Code 69361	Amount of Each Receipt this Period 2149.74
FEC ID number of contributing federal political committee. C		In-kind: August Mileage <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3989.66		

Full Name (Last, First, Middle Initial) C. Adrian Smith		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2005	
Mailing Address 3321 Ave I		Transaction ID: AA97DF1AFDB3943DE8C4	
City Scottsbluff	State NE	Zip Code 69361	Amount of Each Receipt this Period 1684.89
FEC ID number of contributing federal political committee. C		In-kind: September Mileage <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5674.55		

SUBTOTAL of Receipts This Page (optional) ▶	5674.55
TOTAL This Period (last page this line number only) ▶	5674.55

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 38

<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

Full Name (Last, First, Middle Initial) A. Matt Larsen		Transaction ID: B3C743BB7D926403089D Date of Disbursement 07 / 01 / 2005
Mailing Address 1615 1st Ave		Amount of Each Disbursement this Period 300.00
City State Zip Code Scottsbluff NE 69361-3108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:Website Hosting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeff Coleman		Transaction ID: BB06EBADC39B2465FA42 Date of Disbursement 07 / 01 / 2005
Mailing Address 1617 E. Chocolate Ave		Amount of Each Disbursement this Period 1000.00
City State Zip Code Hershey PA 17033-1120	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:Consulting/Logo Desi	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mr. Neal Smith		Transaction ID: B0EEC0268717A42E986E Date of Disbursement 09 / 01 / 2005
Mailing Address 3321 Ave I		Amount of Each Disbursement this Period 100.00
City State Zip Code Scottsbluff NE 69361	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:Office Space	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

1400.00

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

Full Name (Last, First, Middle Initial) A. Walter Radcliffe		Transaction ID: BC40D592980704B1EA97 Date of Disbursement 09 / 27 / 2005
Mailing Address 625 S. 14th St Ste 100, The Mayfair		Amount of Each Disbursement this Period 1155.60
City Lincoln State NE Zip Code 68508-2737	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:Lincoln Fundraiser 9 Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adrian Smith		Transaction ID: B91EF85D992374FCB88D Date of Disbursement 07 / 31 / 2005
Mailing Address 3321 Ave I		Amount of Each Disbursement this Period 1839.92
City Scottsbluff State NE Zip Code 69361	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:July Mileage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Adrian Smith		Transaction ID: B91B2FECF8D9C480BA8D Date of Disbursement 08 / 31 / 2005
Mailing Address 3321 Ave I		Amount of Each Disbursement this Period 2149.74
City Scottsbluff State NE Zip Code 69361	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:August Mileage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5145.26
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. Adrian Smith</p> <p>Full Name (Last, First, Middle Initial) Adrian Smith</p> <p>Mailing Address 3321 Ave I</p> <p>City Scottsbluff State NE Zip Code 69361</p> <p>Purpose of Disbursement In-kind: September Mileage</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>Transaction ID: BA97DF1AFDB3943DE8C4</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1684.89"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Scottsbluff Screenprinting</p> <p>Full Name (Last, First, Middle Initial) Scottsbluff Screenprinting</p> <p>Mailing Address 1813 Broadway</p> <p>City Scottsbluff State NE Zip Code 69361</p> <p>Purpose of Disbursement T SHIRTS & POLO SHIRTS</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>Transaction ID: BDAC825E30CA54C8F88B</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="829.57"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Money Wi\$e, Inc</p> <p>Full Name (Last, First, Middle Initial) Money Wi\$e, Inc</p> <p>Mailing Address 1060 13th St</p> <p>City Gering State NE Zip Code 69341</p> <p>Purpose of Disbursement DIGITAL COPIER</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>Transaction ID: B340C4A14C2064925912</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="285.64"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2800.10"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

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<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

Full Name (Last, First, Middle Initial) A. On Your Marks		Transaction ID: B07732AEC19A6433EB8F Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 5
Mailing Address 8363 Katrina Ln		Amount of Each Disbursement this Period 560.82
City Lincoln State NE Zip Code 68512	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LAPEL STICKERS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cozy, Inc.		Transaction ID: B2DD56CB47F0C40DB985 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 5
Mailing Address 1836 7th St		Amount of Each Disbursement this Period 1340.00
City Gering State NE Zip Code 69341	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MAGNETIC SIGNS; TRAILER DECALS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tyson Larson		Transaction ID: BBC5532FB7C1148D6937 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 5
Mailing Address McCarthy 520 Box 579374		Amount of Each Disbursement this Period 350.00
City Washington State DC Zip Code 20057-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MILEAGE REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2250.82
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)

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<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) Mr. Neal Smith</p>		<p>Transaction ID: B1480FBC8267B48B4926</p> <p>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>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	1		2	0	0	5													
<p>Mailing Address 3321 Ave I</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>1985.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	1985.00																			
1985.00																						
<p>City State Zip Code Scottsbluff NE 69361</p>	<p>Purpose of Disbursement PAYROLL</p>																					
<p>Candidate Name</p>	<p>Category/ Type</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																				
<p>State: District:</p>	<p>Category/ Type</p>																					

<p>B. Full Name (Last, First, Middle Initial) Alltel</p>		<p>Transaction ID: B14764FF70CF5453B89A</p> <p>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>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	2		2	0	0	5													
<p>Mailing Address Po Box 94255</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>94.78</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	94.78																			
94.78																						
<p>City State Zip Code Palatine IL 60094-4255</p>	<p>Purpose of Disbursement CELLULAR PHONE BILL</p>																					
<p>Candidate Name</p>	<p>Category/ Type</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																				
<p>State: District:</p>	<p>Category/ Type</p>																					

<p>C. Full Name (Last, First, Middle Initial) United States Postal Service</p>		<p>Transaction ID: BF09CDDDDACDB4A2BB35</p> <p>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>9</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	0	5													
<p>Mailing Address 101 2nd St</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>74.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	74.00																			
74.00																						
<p>City State Zip Code Scottsbluff NE 69355-9700</p>	<p>Purpose of Disbursement POSTAGE STAMPS</p>																					
<p>Candidate Name</p>	<p>Category/ Type</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																				
<p>State: District:</p>	<p>Category/ Type</p>																					

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>2153.78</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<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. Mr. Neal Smith Full Name (Last, First, Middle Initial) Mailing Address 3321 Ave I City Scottsbluff State NE Zip Code 69361 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B7B9BE670BC5D4CE0B49 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 5 Amount of Each Disbursement this Period 992.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Scottsbluff Screenprinting Full Name (Last, First, Middle Initial) Mailing Address 1813 Broadway City Scottsbluff State NE Zip Code 69361 Purpose of Disbursement SHIRT EMBROIDERY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: BB6D7E912958B4B10AA3 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 5 Amount of Each Disbursement this Period 6.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Print Express Full Name (Last, First, Middle Initial) Mailing Address Po Box 770 City Scottsbluff State NE Zip Code 69363-0770 Purpose of Disbursement LETTERHEAD & ENVELOPES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B5786ACF2135E4BFE9B0 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 5 Amount of Each Disbursement this Period 630.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional)	1629.69
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 35 / 38

<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

Full Name (Last, First, Middle Initial) A. Alltel		Transaction ID: B4C7B2550B1D54DF0B3C Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 5	
Mailing Address Po Box 94255		Amount of Each Disbursement this Period 66.42	
City Palatine	State IL	Zip Code 60094-4255	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CELLULAR PHONE BILL		Category/ Type	
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

66.42

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

15446.07

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

(Use separate schedule(s) for each numbered line)	PAGE 36 / 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Western Plains Business Solutions	Nature of Debt (Purpose): PRINTING - DISPUTE WAS RE-SOLVED
Mailing Address 1012 W 36th St	
City State ZIP Code Scottsbluff NE 69361	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D163CC4783ED54DC3A30	
Amount Incurred This Period 241.28	Payment This Period 0.00	Outstanding Balance at Close of This Period 241.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Adrian Smith	Nature of Debt (Purpose): July other travel expenses
Mailing Address 3321 Ave I	
City State ZIP Code Scottsbluff NE 69361	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D81B12864E0014922A97	
Amount Incurred This Period 472.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 472.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Adrian Smith	Nature of Debt (Purpose): August Other Travel
Mailing Address 3321 Ave I	
City State ZIP Code Scottsbluff NE 69361	

Outstanding Balance Beginning This Period 0.00	Transaction ID: DB82718FA33B04320B90	
Amount Incurred This Period 54.81	Payment This Period 0.00	Outstanding Balance at Close of This Period 54.81

1) SUBTOTALS This Period This Page (optional).....	768.81
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

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

(Use separate schedule(s) for each numbered line)	PAGE 37 / 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Majority Communications, Inc.	Nature of Debt (Purpose): PRINTING
Mailing Address 274 Marconi Blvd Ste 260	
City State ZIP Code Columbus OH 43215	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: D8941304C9FFA4DE4926	
Amount Incurred This Period <input type="text" value="3340.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3340.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dell	Nature of Debt (Purpose): LAPTOP
Mailing Address Po Box 81577	
City State ZIP Code Austin TX 78708-1577	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: D388452D2E96A4BB7BD9	
Amount Incurred This Period <input type="text" value="1262.75"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1262.75"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Advanced Mailing Services, Llc	Nature of Debt (Purpose): MAILING
Mailing Address 14970 Farm Creek Dr	
City State ZIP Code Woodbridge VA 22191-3550	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: D478135BFF3784DDC93E	
Amount Incurred This Period <input type="text" value="1017.26"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1017.26"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="5620.01"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

(Use separate schedule(s) for each numbered line)	PAGE 38 / 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Adrian Smith	Nature of Debt (Purpose): Supplies and Rent Expense
Mailing Address 3321 Ave I	
City State ZIP Code Scottsbluff NE 69361	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D7BF027CB345C41649D5	
Amount Incurred This Period 835.85	Payment This Period 0.00	Outstanding Balance at Close of This Period 835.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Adrian Smith	Nature of Debt (Purpose): September Other Travel
Mailing Address 3321 Ave I	
City State ZIP Code Scottsbluff NE 69361	

Outstanding Balance Beginning This Period 0.00	Transaction ID: DAA0DACF50AA94EE9A4A	
Amount Incurred This Period 532.09	Payment This Period 0.00	Outstanding Balance at Close of This Period 532.09

1) SUBTOTALS This Period This Page (optional).....	▶	1367.94
2) TOTALS This Period (last page this line number only).....	▶	7756.76
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	