

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than 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  
Polsinelli Shughart PC PAC

ADDRESS (number and street) 1152 15th Street, NW  
Suite 800  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00445981  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 07 01 2009 through 09 30 2009

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 Mr. Julian Arredondo

Signature of Treasurer Electronically Filed by Mr. Julian Arredondo Date 10 07 2009

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

Office Use Only											<b>FEC FORM 3X</b> (Rev. 12/2004)
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A. Form/Schedule : **F3XN**  
Transaction ID :

per FEC request ... resubmitting amended statement of organization in it's entirety, rather than just portions of the report being amended

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Polsinelli Shughart PC PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		35333.02
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	10302.02									
(c) Total Receipts (from Line 19) .....	2293.42	21762.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	12595.44	57095.44								
7. Total Disbursements (from Line 31) .....	10250.00	54750.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2345.44	2345.44								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Polsinelli Shughart PC PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2167.00	21441.00
(ii) Unitemized .....	0.00	195.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2167.00	21636.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	126.42	126.42
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2293.42	21762.42
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2293.42	21762.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2293.42	21762.42

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	750.00	750.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	750.00	750.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	54000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10250.00	54750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10250.00	54750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2293.42	21762.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2293.42	21762.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	750.00	750.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	750.00	750.00

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

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

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)  
Polsinelli Shughart PC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Beth Blake		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 570 Lakeshore Dr W		<b>Transaction ID:</b> C2745251
	City Lake Quivira	State KS	Zip Code 66217-8527
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 800.00
	Name of Employer Polsinelli Shalton Flanigan Suelthaus	Occupation Attorney	* Payroll Deduction: \$200- /month thru 12/31/09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) William W. Mahood		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 11523 Hadley St		<b>Transaction ID:</b> C2745254
	City Overland Park	State KS	Zip Code 66210-2430
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 750.00
	Name of Employer Polsinelli Shalton Flanigan Suelthaus	Occupation Attorney	* Payroll Deduction: \$250- /month thru 12/31/09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) William E. Quick		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 10345 Cherokee Ln		<b>Transaction ID:</b> C2745247
	City Leawood	State KS	Zip Code 66206-2510
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 252.00
	Name of Employer Polsinelli Shalton Flanigan Suelthaus	Occupation Attorney	* Payroll Deduction: \$84- /month thru 12/31/09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1802.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

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

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NAME OF COMMITTEE (In Full)  
Polsinelli Shughart PC PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert J. Selsor

Mailing Address 39 Berkshire Dr

City State Zip Code  
Saint Louis MO 63117-1042

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

Name of Employer: Polsinelli Shalton Flanigan Suelthaus  
Occupation: Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID: C2745253**  
 Amount of Each Receipt this Period: 300.00  
 \* Payroll Deduction: \$100/-month thru 12/31/09

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

Mailing Address 2128 Heather Glen Dr

City State Zip Code  
Chesterfield MO 63017-5022

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

Name of Employer: Polsinelli Shalton Flanigan Suelthaus  
Occupation: Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
455.00

Date of Receipt: 07 / 31 / 2009  
**Transaction ID: C2690787**  
 Amount of Each Receipt this Period: 65.00  
 \* Payroll Deduction: \$65/-month thru 7/31/09

**SUBTOTAL** of Receipts This Page (optional) ..... ► **365.00**

**TOTAL** This Period (last page this line number only) ..... ► **2167.00**



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

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

FOR LINE NUMBER: PAGE 9 / 12  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Polsinelli Shughart PC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Shughart Thomson & Kilroy PC PAC

Mailing Address 120 W 12TH STREET SUITE 1800

City State Zip Code  
KANSAS CITY MO 64105

FEC ID number of contributing federal political committee. **C** C00367912

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
126.42

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 17 / 2009

Transaction ID: C2697332

Amount of Each Receipt this Period  
126.42

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	126.42
<b>TOTAL</b> This Period (last page this line number only) .....	▶	126.42

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Polsinelli Shughart PC PAC

A.

Full Name (Last, First, Middle Initial)  
NGP Software, Inc.

Transaction ID: D185162

Date of Disbursement

Mailing Address 1225 I St NW  
Ste 1225

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	0	9

City Washington State DC Zip Code 20005-5918

Amount of Each Disbursement this Period

750.00
--------

Purpose of Disbursement  
operating expense/NGP Jul-Sep 2009

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

750.00
--------

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

750.00
--------

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Polsinelli Shughart PC PAC

A.	Full Name (Last, First, Middle Initial) Cleaver for Congress	Transaction ID: D189121 Date of Disbursement 08 / 14 / 2009
	Mailing Address 4801 Main St Ste 1000	Amount of Each Disbursement this Period 1000.00
	City Kansas City State MO Zip Code 64112-2551	
	Purpose of Disbursement contribution to candidate committee	Category/Type
	Candidate Name Emanuel Cleaver	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Jim Oberstar	Transaction ID: D189120 Date of Disbursement 08 / 14 / 2009
	Mailing Address 1017 8th St NE	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement contribution to candidate committee	Category/Type
	Candidate Name Jim Oberstar	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Roy Blunt	Transaction ID: D190163 Date of Disbursement 08 / 28 / 2009
	Mailing Address PO Box 50100	Amount of Each Disbursement this Period 2000.00
	City Springfield State MO Zip Code 65805	
	Purpose of Disbursement contribution to candidate committee	Category/Type
	Candidate Name Roy Blunt	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Polsinelli Shughart PC PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Grassley Committee Inc. <hr/> Mailing Address PO Box 1000 <hr/> City Des Moines State IA Zip Code 50304-1000 <hr/> Purpose of Disbursement contribution to candidate committee Candidate Name Charles Grassley Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D189961 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Robin Carnahan for Senate <hr/> Mailing Address PO BOX 50378 <hr/> City ST LOUIS State MO Zip Code 63119 <hr/> Purpose of Disbursement contribution to candidate committee Candidate Name Robin Carnahan Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D190786 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00

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

4000.00

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

9500.00