

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
JERRY NOLTE 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)).... | 5417.00 | 40979.95 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 950.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 5417.00 | 40029.95 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 39137.63 | 78788.66 |
| (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))..... | 39137.63 | 78788.66 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 2371.78 | |
| 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)..... | 41000.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

JERRY NOLTE FOR CONGRESS

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

| 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)..... | 3800.00 | 24150.04 |
| (ii) Unitemized | 775.00 | 10279.48 |
| (iii) TOTAL of contributions from individuals | 4575.00 | 34429.52 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 550.00 | 1550.00 |
| (d) The Candidate | 292.00 | 5000.43 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 5417.00 | 40979.95 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 34500.00 | 41000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 34500.00 | 41000.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 0.00 | 130.49 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 39917.00 | 82110.44 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 39137.63 | 78788.66 |
| 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 | 950.00 |
| (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 | 950.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 39137.63 | 79738.66 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 1592.41 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 39917.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 41509.41 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 39137.63 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 2371.78 |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 21 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Bledsoe

Mailing Address 5840 NW Prairie View Road

City: Kansas City State: MO Zip Code: 64151

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

Name of Employer: Cripple Creek Rock Company Occupation: President/CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 28 / 2012

Transaction ID : SA11AI.4664

Amount of Each Receipt this Period: 500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mickey Finn

Mailing Address 4626 N Holly Court

City: Kansas City State: MO Zip Code: 64116

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

Name of Employer: Occupation:

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 08 / 19 / 2012

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period: 300.00

Contribution

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

Mailing Address 6300 Ward Parkway

City: Kansas City State: MO Zip Code:

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

Name of Employer: Top Innovations LLC Occupation: Chairman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 08 / 09 / 2012

Transaction ID : SA11AI.4702

Amount of Each Receipt this Period: 500.00

Debt Retirement

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

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

1300.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 21 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

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

Mailing Address 2101 Liberty Dr.

City State Zip Code
Liberty MO 64068

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

Name of Employer Occupation
Self Employed Business Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2012

Transaction ID : SA11Al.4631

Amount of Each Receipt this Period
2500.00

Debt Retirement

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

3800.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 21 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Clay County Republican Central Committee

Mailing Address PO Box 1239

City Liberty State MO Zip Code 64049

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2012

Transaction ID : SA11C.4654

Amount of Each Receipt this Period
 Contribution 200.00

B. Full Name (Last, First, Middle Initial)
Clay County Republican Central Committee

Mailing Address PO Box 1239

City Liberty State MO Zip Code 64049

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2012

Transaction ID : SA11C.4715

Amount of Each Receipt this Period
 Contribution 350.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period
 Contribution

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

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

550.00

550.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 21 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GERALD NOLTE

Mailing Address **PO BOX 10703**

City **GLADSTONE** State **MO** Zip Code **64188**

FEC ID number of contributing federal political committee. **C H2MO06186**

Name of Employer **State of Missouri** Occupation **State Representative**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
12094.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 19 / 2012

Transaction ID : SA11D.4700

Amount of Each Receipt this Period
292.00

In-kind - Printing Expense

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

292.00

292.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 21 |
| | <input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GERALD NOLTE

Mailing Address **PO BOX 10703**

City **GLADSTONE** State **MO** Zip Code **64188**

FEC ID number of contributing federal political committee. **C H2MO06186**

Name of Employer
State of Missouri

Occupation
State Representative

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
27094.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA13A.4610

Amount of Each Receipt this Period
15000.00

Loan made by Candidate

B. Full Name (Last, First, Middle Initial)
GERALD NOLTE

Mailing Address **PO BOX 10703**

City **GLADSTONE** State **MO** Zip Code **64188**

FEC ID number of contributing federal political committee. **C H2MO06186**

Name of Employer
State of Missouri

Occupation
State Representative

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
37094.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2012

Transaction ID : SA13A.4617

Amount of Each Receipt this Period
10000.00

Loan

C. Full Name (Last, First, Middle Initial)
GERALD NOLTE

Mailing Address **PO BOX 10703**

City **GLADSTONE** State **MO** Zip Code **64188**

FEC ID number of contributing federal political committee. **C H2MO06186**

Name of Employer
State of Missouri

Occupation
State Representative

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
44594.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 01 / 2012

Transaction ID : SA13A.4623

Amount of Each Receipt this Period
7500.00

Loan

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

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

32500.00

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 11 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Axiom Strategies | | Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012 |
| Mailing Address 1251 NW Briarcliff Parkway Suite 85 | | Amount of Each Disbursement this Period 1833.72 |
| City Kansas City State MO Zip Code 64116 | Purpose of Disbursement Auto Calls | |
| Candidate Name JERRY NOLTE FOR CONGRESS | | Transaction ID : SB17.4688 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO District: 06 | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Michael Billings | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012 |
| Mailing Address 50 SW 1971st Rd | | Amount of Each Disbursement this Period 500.00 |
| City Kingsville State MO Zip Code 64061 | Purpose of Disbursement IT Consulting | |
| Candidate Name JERRY NOLTE FOR CONGRESS | | Transaction ID : SB17.4693 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO District: 06 | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Candidate Command | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012 |
| Mailing Address 1831 NW Vivion Suite 101 | | Amount of Each Disbursement this Period 2000.00 |
| City Riverside State MO Zip Code 64150 | Purpose of Disbursement Direct Mail Expense | |
| Candidate Name JERRY NOLTE FOR CONGRESS | | Transaction ID : SB17.4690 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO District: 06 | Category/Type | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4333.72 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 21 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

A. Cumulus Radio

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 643654

City Cincinnati State OH Zip Code 45264

Purpose of Disbursement Media Purchase

Candidate Name **JERRY NOLTE FOR CONGRESS**

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: MO District: 06

Date of Disbursement: 08 / 29 / 2012

Amount of Each Disbursement this Period: 3740.00

Transaction ID : SB17.4672

B. EnterCom

Full Name (Last, First, Middle Initial)
Mailing Address 7000 Squibb Road
2nd Floor

City Missouri State KS Zip Code 66202

Purpose of Disbursement Media Purchase

Candidate Name **JERRY NOLTE FOR CONGRESS**

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: MO District: 06

Date of Disbursement: 08 / 23 / 2012

Amount of Each Disbursement this Period: 4662.00

Transaction ID : SB17.4670

C. KMMO

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 128

City Marshall State MO Zip Code 65340

Purpose of Disbursement Media Purchase

Candidate Name **JERRY NOLTE FOR CONGRESS**

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: MO District: 06

Date of Disbursement: 08 / 24 / 2012

Amount of Each Disbursement this Period: 840.00

Transaction ID : SB17.4674

SUBTOTAL of Disbursements This Page (optional) 9242.00

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) | | PAGE 13 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. KMMO | | Date of Disbursement MM / DD / YYYY 08 / 27 / 2012 |
| Mailing Address PO Box 128 | | Amount of Each Disbursement this Period 440.00 Transaction ID : SB17.4683 |
| City Marshall | State MO | |
| Zip Code 65340 | Purpose of Disbursement Media Purchase | Category/ Type |
| Candidate Name JERRY NOLTE FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: MO District: 06 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. KMZU | | Date of Disbursement MM / DD / YYYY 07 / 24 / 2012 |
| Mailing Address 102 N. Mason | | Amount of Each Disbursement this Period 828.00 Transaction ID : SB17.4676 |
| City Carrollton | State MO | |
| Zip Code 64633 | Purpose of Disbursement Media Purchase | Category/ Type |
| Candidate Name JERRY NOLTE FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: MO District: 06 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Niles Media Group | | Date of Disbursement MM / DD / YYYY 07 / 25 / 2012 |
| Mailing Address PO Box 10703 | | Amount of Each Disbursement this Period 4250.00 Transaction ID : SB17.4678 |
| City Gladstone | State MO | |
| Zip Code 64118 | Purpose of Disbursement Media purchase | Category/ Type |
| Candidate Name JERRY NOLTE FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: MO District: 06 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5518.00 |
| 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) | PAGE 14 OF 21 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
JERRY NOLTE FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. GERALD NOLTE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012 |
| Mailing Address PO BOX 10703 | | Amount of Each Disbursement this Period 292.00 |
| City GLADSTONE | State MO | |
| Zip Code 64188 | Purpose of Disbursement In-kind - Printing Expense | Transaction ID : SB17.4701 |
| Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO | District: 05 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Service Printing & Graphics Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2012 |
| Mailing Address 1146 Harrison St. | | Amount of Each Disbursement this Period 4703.69 |
| City Kansas City | State MO | |
| Zip Code 64106 | Purpose of Disbursement Printing Expense | Transaction ID : SB17.4680 |
| Candidate Name JERRY NOLTE FOR CONGRESS | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO | District: 06 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Service Printing & Graphics Inc. | | Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012 |
| Mailing Address 1146 Harrison St. | | Amount of Each Disbursement this Period 7020.85 |
| City Kansas City | State MO | |
| Zip Code 64106 | Purpose of Disbursement Printing Expense | Transaction ID : SB17.4685 |
| Candidate Name JERRY NOLTE FOR CONGRESS | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO | District: 06 | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 12016.54 |
| 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 15 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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)
JERRY NOLTE FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. the Bespoke Group | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012 |
| Mailing Address 140 Walnut Suite 202 | | Amount of Each Disbursement this Period 825.00 Transaction ID : SB17.4692 |
| City Kansas City State MO Zip Code 64106 | Purpose of Disbursement FEC Compliance | |
| Candidate Name JERRY NOLTE FOR CONGRESS | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO District: 06 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Time Warner Cable | | Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2012 |
| Mailing Address P.O. Box 849151 | | Amount of Each Disbursement this Period 5600.00 Transaction ID : SB17.4681 |
| City Dallas State TX Zip Code 75284 | Purpose of Disbursement Media Purchase | |
| Candidate Name JERRY NOLTE FOR CONGRESS | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO District: 06 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Dionne Vantuyl | | Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012 |
| Mailing Address 3537 N. Walrond Ave. | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4684 |
| City Kansas City State MO Zip Code 64117 | Purpose of Disbursement IT Support | |
| Candidate Name JERRY NOLTE FOR CONGRESS | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MO District: 06 | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 7425.00 |
| TOTAL This Period (last page this line number only)..... | 38535.26 |

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4234

JERRY NOLTE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

GERALD NOLTE

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 10703

City State ZIP Code
GLADSTONE MO 64188

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1500.00 0.00 1500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 16 / Y 2011 M M / D D / On Demand 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

SUBTOTALS This Period This Page (optional)..... ▶ 1500.00
TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4235

JERRY NOLTE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

GERALD NOLTE

Primary

General

Other (specify) ▼

Mailing Address
PO BOX 10703

City State ZIP Code
GLADSTONE MO 64188

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 30 D /

Y 2011 Y

M M /

D D /

On Demand

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4610

JERRY NOLTE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

GERALD NOLTE

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 10703

City State ZIP Code
GLADSTONE MO 64188

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
15000.00 0.00 15000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 24 / Y 2012 M M / D D / Y Y Y Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 15000.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **JERRY NOLTE FOR CONGRESS** Transaction ID : **SC/10.4617**

| | | |
|---|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) GERALD NOLTE | [PERSONAL FUNDS] | Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO BOX 10703 | | |

| | | |
|-----------|-------|----------|
| City | State | ZIP Code |
| GLADSTONE | MO | 64188 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 10000.00 | 0.00 | 10000.00 |

| | | | | | |
|--------------|------|---------------|---------------------|---------------|---|
| TERMS | | Date Incurred | Date Due | Interest Rate | Secured: |
| M 07 | D 27 | Y 2012 Y | M M / D D / Y Y Y Y | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | | |
|---|---|----------|
| SUBTOTALS This Period This Page (optional)..... | ▶ | 10000.00 |
| TOTALS This Period (last page in this line only)..... | ▶ | [] |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | | |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **JERRY NOLTE FOR CONGRESS** Transaction ID : **SC/10.4623**

LOAN SOURCE Full Name (Last, First, Middle Initial) **GERALD NOLTE** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 10703

City State ZIP Code
 GLADSTONE MO 64188

| | | |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan 7500.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 7500.00 |
|------------------------------------|------------------------------------|--|

TERMS

Date Incurred: M 08 / D 01 / Y 2012
 Date Due: M M / D D / Y Y Y Y OD
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

SUBTOTALS This Period This Page (optional)..... ▶ 7500.00

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **JERRY NOLTE FOR CONGRESS** Transaction ID : **SC/10.4706**

| | | |
|---|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) GERALD NOLTE | [PERSONAL FUNDS] | Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO BOX 10703 | | |

| | | |
|-----------|-------|----------|
| City | State | ZIP Code |
| GLADSTONE | MO | 64188 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 2000.00 | 0.00 | 2000.00 |

| | | | | | |
|------------------------|---------------------|---------------|----------|---------------|---|
| TERMS | | Date Incurred | Date Due | Interest Rate | Secured: |
| M 08 / D 05 / Y 2012 Y | M M / D D / Y Y Y Y | | | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|--|----------|
| SUBTOTALS This Period This Page (optional)..... | 2000.00 |
| TOTALS This Period (last page in this line only)..... | 41000.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.