

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
Jim Ryun for Congress

ADDRESS (number and street) PO Box 826
 Check if different than previously reported. (ACC)
Topeka KS 66601

2. **FEC IDENTIFICATION NUMBER** C00320077
CITY STATE ZIP CODE STATE DISTRICT
KS 2

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 11 07 2006 in the State of KS

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 01 2006 through 07 12 2006

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 Stephen R Iliff

Signature of Treasurer Electronically Filed by Stephen R Iliff Date 01 10 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

Jim Ryun for Congress

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
1	2

Y	Y	Y	Y
2	0	0	6

	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)).....	210362.54	595542.54
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	4100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	210362.54	591442.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	41469.58	322181.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	371.00	3971.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41098.58	318210.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	421896.71	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Jim Ryun for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
1	2

Y	Y	Y	Y
2	0	0	6

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).....

61081.00

213276.00

(ii) Unitemized.....

12664.00

51707.26

(iii) TOTAL of contributions

73745.00

264983.26

from individuals..... ▶

3735.20

4323.20

(b) Political Party Committees.....

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

132882.34

326236.08

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

210362.54

595542.54

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

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

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

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

371.00

3971.07

15. OTHER RECEIPTS

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

2813.53

7747.03

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

213547.07

607260.64

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41469.58	322181.78
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	4100.00
(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	4100.00
21. OTHER DISBURSEMENTS.....	2000.00	15000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	43469.58	341281.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	251819.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	213547.07
25. SUBTOTAL (add Line 23 and Line 24).....	465366.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43469.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	421896.71

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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Maynard C. Ahner, II

Mailing Address 13919 Bond St

City State Zip Code
Overland Park KS 66221-2801

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

Name of Employer Occupation
Midland Loan Services Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: 60707.C7589

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 401 Wilshire Blvd Ste 700

City State Zip Code
Santa Monica CA 90401-1452

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

Name of Employer Occupation
The Macerich Company Vice Chairman of the Board

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 6

Transaction ID: 60413.C7499

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 401 Wilshire Blvd Ste 700

City State Zip Code
Santa Monica CA 90401-1452

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

Name of Employer Occupation
The Macerich Company Vice Chairman of the Board

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: 60707.C7864

Amount of Each Receipt this Period
25.00

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

SUBTOTAL of Receipts This Page (optional)	525.00
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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Susan B Anthony List Candidate

Mailing Address 1420 King Street Ste 550

City State Zip Code
Alexandria VA 22314

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) Other

Election Cycle-to-Date 1744.44

Date of Receipt
MM / DD / YYYY
06 / 29 / 2006

Transaction ID: CM54660707.C7864

Amount of Each Receipt this Period
25.00

Memo - Conduit memo total
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Earmarked Memo - Conduit total

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

Mailing Address 420 SW Whitehall Ln.

City State Zip Code
Topeka KS 66606

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

Name of Employer Self Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7639

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address P.O. Box 643

City State Zip Code
Pittsburg KS 66762

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

Name of Employer NPC Intl Occupation Businessman

Receipt For: 2006
 Primary General
 Other (specify)

Election Cycle-to-Date 2100.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2006

Transaction ID: 60707.C7682

Amount of Each Receipt this Period
100.00

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

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

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 144
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Gene Bicknell

Mailing Address P.O. Box 643

City State Zip Code
Pittsburg KS 66762

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

Name of Employer Occupation
NPC Intl Businessman

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2100.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2006

Transaction ID: 61021.C8972

Amount of Each Receipt this Period
1900.00

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

Presumptive Redesignation

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

Mailing Address 8997 Commerce Dr

City State Zip Code
De Soto KS 66018-8428

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

Name of Employer Occupation
Mr. Goodcents President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2006

Transaction ID: 60707.C7584

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 701 SW Park Lane

City State Zip Code
Topeka KS 66606-1735

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

Name of Employer Occupation
Information Requested Disabled Veteran

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2006

Transaction ID: 60707.C7816

Amount of Each Receipt this Period
51.00

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

SUBTOTAL of Receipts This Page (optional) ► 2201.00

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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Bradford

Mailing Address 3920 Royal Oak Dr

City Birmingham State AL Zip Code 35243-5930

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

Name of Employer Bradford & Co, Inc Occupation Food Broker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 6

Transaction ID: 60707.C7557

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 19040 Red Top Rd.

City Wamego State KS Zip Code 66547-9557

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: 60707.C7808

Amount of Each Receipt this Period
50.00

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

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

Mailing Address 2327 Mayfair Place

City Topeka State KS Zip Code 66611-2090

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

Name of Employer The Fidelity Bank Occupation Chairman of the Board

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

750.00

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

Transaction ID: 60707.C7712

Amount of Each Receipt this Period
250.00

Receipt
 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: (check only one)	PAGE 9 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Melinda Clark

Mailing Address 519 Oakbrook Dr

City State Zip Code
Lansing KS 66043-1438

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

Name of Employer None Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 6

Transaction ID: 60411.C7468

Amount of Each Receipt this Period
100.00

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

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

Mailing Address PO Box 183

City State Zip Code
Valley Falls KS 66088

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

Name of Employer Kendall State Bank 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
0 6 / 0 6 / 2 0 0 6

Transaction ID: 60707.C7710

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 6564 Valleybrook Dr.

City State Zip Code
Dallas TX 75254

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

Name of Employer Cooper Clinic Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 6

Transaction ID: 60707.C7553

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Harry Craig

Mailing Address 1737 Sw 42nd. St., PO Box 1698

City State Zip Code
Topeka KS 66601

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

Name of Employer Occupation
Martin Tractor CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7631

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1737 Sw 42nd. St., PO Box 1698

City State Zip Code
Topeka KS 66601

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

Name of Employer Occupation
Martin Tractor CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7632

Amount of Each Receipt this Period
900.00

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

C. Full Name (Last, First, Middle Initial)
Richard B. Cray

Mailing Address 800 W 47th St

City State Zip Code
Kansas City MO 64112-1251

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

Name of Employer Occupation
Cray Foundations Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2006

Transaction ID: 60707.C7590

Amount of Each Receipt this Period
1000.00

Receipt
 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: <input 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)
Jim Ryun for Congress

<p>A. Full Name (Last, First, Middle Initial) Kenneth L Daniel</p> <p>Mailing Address 5630 SW Fairlawn Rd</p> <p>City State Zip Code Topeka KS 66610</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Midway Wholesale Executive</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6</p> <p>Transaction ID: 60707.C7622</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Ann Dickinson</p> <p>Mailing Address 1100 Main St Ste 350</p> <p>City State Zip Code Kansas City MO 64105-5114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Dickinson Financial Chairman</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6</p> <p>Transaction ID: 60707.C7573</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) John B Dicus</p> <p>Mailing Address 3149 SW 15th St</p> <p>City State Zip Code Topeka KS 66604-2515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Capitol Federal Savings Financial Executive</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6</p> <p>Transaction ID: 60707.C7627</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>4000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 144
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
James B. Dodd

Mailing Address 2208 W 97th St

City State Zip Code
Leawood KS 66206-2304

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

Name of Employer
Chemidex

Occupation
Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2006

Transaction ID: 60707.C7588

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2721 W 6th St Ste A

City State Zip Code
Lawrence KS 66049

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

Name of Employer
Self/Ezell Ent

Occupation
Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2006

Transaction ID: 60707.C7659

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 3320 Spring Creek Place

City State Zip Code
Topeka KS 66614

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

Name of Employer
Commerce Bank

Occupation
President-Bank

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2150.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2006

Transaction ID: 60719.C8064

Amount of Each Receipt this Period
150.00

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

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Duane Fager

Mailing Address 3320 Spring Creek Place

City State Zip Code
Topeka KS 66614

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

Name of Employer Occupation
Commerce Bank President-Bank

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2006

Transaction ID: 60707.C7707

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1203 SW 29th.

City State Zip Code
Topeka KS 66611

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

Name of Employer Occupation
Commerce Bank Banking

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2006

Transaction ID: 60718.C8031

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 1313 N Webb Rd
Suite 240

City State Zip Code
Wichita KS 67206

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

Name of Employer Occupation
Retired retired/general surgeo

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 06 / 2006

Transaction ID: 60711.C7941

Amount of Each Receipt this Period
200.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Dean Ferrell

Mailing Address 5035 SW Brentwood Rd

City State Zip Code
Topeka KS 66606-2209

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

Name of Employer Occupation
Ferrel Construction President/General Contractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7624

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Douglas C Fincher

Mailing Address PO Box 757

City State Zip Code
Rossville KS 66533-0757

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

Name of Employer Occupation
Woner, Glenn, Reeder, Girard, Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7618

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 534 S Kansas Ave, Suite 805

City State Zip Code
Topeka KS 66603

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

Name of Employer Occupation
Freedom Family Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
04 / 25 / 2006

Transaction ID: 60707.C7559

Amount of Each Receipt this Period
2000.00

Receipt
 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:	PAGE 15 / 144
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Brent S Franzel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2 Springer Ct		Transaction ID: 60707.C7644
City State Zip Code Bethesda MD 20817-5545	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Letter Sent Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Francis B Freeman Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address PO Box 19307		Transaction ID: 60707.C7669
City State Zip Code Topeka KS 66619-0307	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Freeman Holding LLC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CFO Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Marguerite Fyler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 300 SW Yorkshire Rd		Transaction ID: 60707.C7672
City State Zip Code Topeka KS 66606-2260	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	2025.00
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 16 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Marguerite Fyler

Mailing Address 300 SW Yorkshire Rd

City State Zip Code
Topeka KS 66606-2260

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

Name of Employer Retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: 60707.C7727

Amount of Each Receipt this Period
50.00

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

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

Mailing Address 11520 SW 57th St

City State Zip Code
Topeka KS 66610-9647

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

Name of Employer Self Occupation Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1100.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7620

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 10 Strawberry Cove

City State Zip Code
Gloucester MA 01930

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

Name of Employer Self Occupation Sales

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2006

Transaction ID: 60707.C7912

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	650.00
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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial) Eric Haar Mailing Address 1413 Marilee Dr City State Zip Code Lawrence KS 66049-5815 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2006 Transaction ID: 60707.C7723 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Federal Home Loan Bank Occupation Lobbyist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		

B. Full Name (Last, First, Middle Initial) Eric Haar Mailing Address 1413 Marilee Dr City State Zip Code Lawrence KS 66049-5815 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006 Transaction ID: 60707.C7910 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Federal Home Loan Bank Occupation Lobbyist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Douglas H. Hall Mailing Address 11407 Fontana Ct City State Zip Code Leawood KS 66211 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2006 Transaction ID: 60707.C7577 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Musselman and Hall Const- ructi Occupation Owner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
N Rodney Hamm

Mailing Address 4604 Nicklaus Dr

City State Zip Code
Lawrence KS 66047-1981

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

Name of Employer Hamm Companies Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 19 / 2006

Transaction ID: 60707.C7519

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 10900 W 164th St

City State Zip Code
Overland Park KS 66062

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

Name of Employer Harmon Construction Occupation 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 Y
04 / 27 / 2006

Transaction ID: 60707.C7583

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 100 Fall Creek Rd

City State Zip Code
Lawrence KS 66049

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

Name of Employer None 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
04 / 26 / 2006

Transaction ID: 60707.C7564

Amount of Each Receipt this Period
1000.00

Receipt
 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 19 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Hayden

Mailing Address 7532 NW HWY 75

City State Zip Code
Topeka KS 66618

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

Name of Employer Occupation
Hayden Tower S President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2006

Transaction ID: 60707.C7674

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 6729 Sw Sherwood Ct.

City State Zip Code
Topeka KS 66614

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

Name of Employer Occupation
Hein Law Firm, Chartered Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2006

Transaction ID: 60707.C7628

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 6729 Sw Sherwood Court

City State Zip Code
Topeka KS 66614

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

Name of Employer Occupation
Hein & Weir Attorney/Lobby

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2006

Transaction ID: 60707.C7629

Amount of Each Receipt this Period
500.00

Receipt
 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 20 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Lloyd Hill

Mailing Address 6165 W 167th St

City State Zip Code
Stilwell KS 66085-9234

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

Name of Employer Occupation
Applebees International Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2006

Transaction ID: 60707.C7576

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 21405 West 73rd Terrace

City State Zip Code
Shawnee KS 66218

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

Name of Employer Occupation
Hodgdon Powder Co. Inc. Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2006

Transaction ID: 60707.C7592

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1715 Thomas Circle

City State Zip Code
Manhattan KS 66502

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

Name of Employer Occupation
Charlson & Wilson Ins. Agency Insurance Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2006

Transaction ID: 60707.C7621

Amount of Each Receipt this Period
500.00

Receipt
 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 21 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
David M Howard

Mailing Address 6238 SW 38th Pl

City State Zip Code
Topeka KS 66610

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

Name of Employer Occupation
Koss Construction Company President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2006

Transaction ID: 60707.C7713

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 4812 Johnson Dr

City State Zip Code
Mission KS 66205-2901

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2006

Transaction ID: 60707.C7578

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 5800 SW 45th St

City State Zip Code
Topeka KS 66610-1261

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

Name of Employer Occupation
Dynamic Computer Solutions Computer Networking Sales Mgr

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 61006.C8632

Amount of Each Receipt this Period
500.00

Receipt
 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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Hugh B Jacks

Mailing Address 510 Carnoustie South

City Shoal Creek State AL Zip Code 35242

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

Name of Employer Self Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2006

Transaction ID: 60707.C7753

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 5421 SW Quail Run Dr.

City Topeka State KS Zip Code 66610-1612

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

Name of Employer David A Kensinger & Assoc, Inc Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7630

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2104 Kasold Dr

City Lawrence State KS Zip Code 66047-2104

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

Name of Employer Self Occupation Dentist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2006

Transaction ID: 60707.C7604

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Paul Kincaid

Mailing Address 2104 Kasold Dr

City State Zip Code
Lawrence KS 66047-2104

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

Name of Employer Self Occupation Dentist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2006

Transaction ID: 60711.C7930

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Robert W. Kirkpatrick, Jr.

Mailing Address 28817 Oxford Rd

City State Zip Code
Louisburg KS 66053-6110

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

Name of Employer Retired Occupation Retired

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
07 / 06 / 2006

Transaction ID: 60711.C7974

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 7765 Killarney Place

City State Zip Code
Wichita KS 67206

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

Name of Employer Self Occupation Physician

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
06 / 27 / 2006

Transaction ID: 60707.C7797

Amount of Each Receipt this Period
150.00

Receipt
 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) ►

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 24 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Carl Koupal

Mailing Address 3768 SW Clarion Park Dr

City State Zip Code
Topeka KS 66610-1279

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

Name of Employer Western Resources Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 60707.C7636

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 755 E. 1550 Rd.

City State Zip Code
Baldwin City KS 66006-7343

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

Name of Employer Pennys Concrete Occupation Project Market

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 290.00

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

Transaction ID: 60707.C7599

Amount of Each Receipt this Period
40.00

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

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

Mailing Address 755 E. 1550 Rd.

City State Zip Code
Baldwin City KS 66006-7343

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

Name of Employer Pennys Concrete Occupation Project Market

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 6

Transaction ID: 60711.C7934

Amount of Each Receipt this Period
40.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1080.00
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 25 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Mary Lair

Mailing Address 1349 Xylan Rd

City Piqua State KS Zip Code 66761

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

Name of Employer Self Occupation Housewife

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
06 / 09 / 2006

Transaction ID: 60707.C7726

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1349 Xylan Rd

City Piqua State KS Zip Code 66761

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

Name of Employer Bank of Commer Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
06 / 09 / 2006

Transaction ID: 60707.C7725

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1916 SW Sieben Ct.

City Topeka State KS Zip Code 66611-1656

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

Name of Employer KS Assn of Broadcasters Occupation President/Executive Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
05 / 09 / 2006

Transaction ID: 60707.C7651

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► 2250.00

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 26 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Winnie Laughlin

Mailing Address 210 S Dean
PO Box 293

City State Zip Code
Mount Hope KS 67108

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

Name of Employer Self Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2006

Transaction ID: 60707.C7790

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Raymond J Lauring

Mailing Address 23 Brigham Road

City State Zip Code
Worcester MA 01609

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2006

Transaction ID: 60707.C7843

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
. Susan B Anthony List Candidate

Mailing Address 1420 King Street Ste 550

City State Zip Code
Alexandria VA 22314

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2754.44

Date of Receipt
MM / DD / YYYY
06 / 29 / 2006

Transaction ID: CM56060707.C7843

Amount of Each Receipt this Period
250.00

Memo - Conduit memo total
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Earmarked Memo - Conduit total

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:	PAGE 27 / 144
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Gregg P. Lewis

Mailing Address 1640 Oak Dr

City Osawatomie State KS Zip Code 66064

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

Name of Employer First Option Bank Occupation Banker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2006

Transaction ID: 60707.C7899

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Carl L. McCaffree

Mailing Address 11525 Juniper Dr

City Leawood State KS Zip Code 66211-1794

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

Name of Employer Columbian Financial Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2006

Transaction ID: 60707.C7585

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1545 SW Stratford Rd

City Topeka State KS Zip Code 66604-2554

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

Name of Employer Michael T McCoy, MD Occupation Orthopedic Surgeon

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7635

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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 28 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Craig A Meader

Mailing Address Box 91

City State Zip Code
Waverly KS 66871

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

Name of Employer
First National Bank of Kansas
Occupation
President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2006

Transaction ID: 60707.C7711

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 9727 W 145th Ter

City State Zip Code
Overland Park KS 66221-2544

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

Name of Employer
JMA Information Technology
Occupation
CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2006

Transaction ID: 60707.C7586

Amount of Each Receipt this Period
500.00

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

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

Mailing Address PO Box 1201

City State Zip Code
Lawrence KS 66044-8201

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

Name of Employer
Little & Miller, Chtd
Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2006

Transaction ID: 60707.C7646

Amount of Each Receipt this Period
250.00

Receipt
 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 29 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Chris Miller

Mailing Address PO Box 1201

City State Zip Code
Lawrence KS 66044-8201

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

Name of Employer Occupation
Little & Miller, Chtd Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2006

Transaction ID: 60707.C7645

Amount of Each Receipt this Period
250.00

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

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

Mailing Address Route 7, 1920 SW West Union Rd.

City State Zip Code
Topeka KS 66615-9714

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7625

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1441 Wakarusa Dr

City State Zip Code
Lawrence KS 66049-3832

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

Name of Employer Occupation
Self Developer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
04 / 12 / 2006

Transaction ID: 60413.C7509

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
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 30 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
William P. Moore

Mailing Address 10801 Mastin St Ste 920

City State Zip Code
Overland Park KS 66210-1673

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

Name of Employer Occupation
Continental Coal Owner

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

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	0	6

Transaction ID: 60707.C7587

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Ronald R. Mostero

Mailing Address 505 Chiswick Rd

City State Zip Code
Palos Verdes Pen CA 90274

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

Name of Employer Occupation
Retired Retired

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

300.00

Date of Receipt

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

Transaction ID: 60719.C8068

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
. Susan B Anthony List Candidate

Mailing Address 1420 King Street Ste 550

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
Information Requested Information Requested

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

3838.44

Date of Receipt

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

Transaction ID: CM60760719.C8068

Amount of Each Receipt this Period
300.00

Memo - Conduit memo total
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Earmarked Memo - Conduit total

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 31 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Mullin

Mailing Address 1305 Sharingbrook Drive

City State Zip Code
Manhattan KS 66503

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

Name of Employer Occupation
Steel & Pipe Supply Co. Executive (President)

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2006

Transaction ID: 60707.C7722

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 3021 Rimrock Dr

City State Zip Code
Lawrence KS 66047-2716

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

Name of Employer Occupation
H.R. Hamm Contractor, Inc. Civil Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 26 / 2006

Transaction ID: 60707.C7563

Amount of Each Receipt this Period
250.00

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

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

Mailing Address Po Box 782196

City State Zip Code
Wichita KS 67278

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

Name of Employer Occupation
Home Oil Co Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2006

Transaction ID: 60707.C7803

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 32 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Kent Needham

Mailing Address 400 Bury PO Box 219

City State Zip Code
Tonganoxie KS 66086

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

Name of Employer Occupation
First State Bank & Trust Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2006

Transaction ID: 60707.C7709

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 5616 SW 38th St

City State Zip Code
Topeka KS 66606

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2006

Transaction ID: 60707.C7633

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1612 Prestwick Dr

City State Zip Code
Lawrence KS 66047

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

Name of Employer Occupation
Noller Automotive Group Auto Dealer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2006

Transaction ID: 60707.C7596

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1350.00
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 33 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Laird Noller

Mailing Address 1612 Prestwick Dr

City State Zip Code
Lawrence KS 66047

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

Name of Employer
Noller Automotive Group

Occupation
Auto Dealer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	4	/	2	0	0	6

Transaction ID: 60707.C7683

Amount of Each Receipt this Period
400.00

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

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

Mailing Address 1103 Greymoor Rd

City State Zip Code
Birmingham AL 35242-7214

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

Name of Employer
Terex Corp

Occupation
Truck Mfg

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	6

Transaction ID: 60707.C7550

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 28558 Lanthrup Blvd

City State Zip Code
Lathrup Villag MI 48076

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

Name of Employer
BBDO - Detroit

Occupation
Writer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: 60707.C7754

Amount of Each Receipt this Period
500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Junius Penny

Mailing Address 2425 Orchard Lane

City State Zip Code
Lawrence KS 66049

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

Name of Employer None Occupation Retired

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
0 5 / 0 9 / 2 0 0 6

Transaction ID: 60707.C7647

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Mary Lou Penny

Mailing Address 2425 Orchard Lane

City State Zip Code
Lawrence KS 66049

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

Name of Employer None Occupation Retired

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
0 5 / 0 9 / 2 0 0 6

Transaction ID: 60707.C7768

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 304 W 9th St

City State Zip Code
Fort Scott KS 66701

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

Name of Employer Key Industries Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 60707.C7605

Amount of Each Receipt this Period
1000.00

Receipt
 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 35 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
A Scott Ritchie

Mailing Address 10 Lynwood
PO Box 783188

City State Zip Code
Wichita KS 67207

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

Name of Employer Occupation
Ritchie Explorations Oil Producer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2006

Transaction ID: 60711.C7945

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1305 Northwestern

City State Zip Code
Iola KS 66749

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

Name of Employer Occupation
Retired Retired

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
07 / 06 / 2006

Transaction ID: 60711.C7981

Amount of Each Receipt this Period
50.00

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

C. Full Name (Last, First, Middle Initial)
Deryl K Schuster

Mailing Address 27931 W 87th St S

City State Zip Code
Viola KS 67149

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

Name of Employer Occupation
Business Loan Express Commercial Lender

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 10 / 2006

Transaction ID: 60411.C7483

Amount of Each Receipt this Period
100.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Deryl K Schuster

Mailing Address 27931 W 87th St S

City State Zip Code
Viola KS 67149

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

Name of Employer Business Loan Express
Occupation Commercial Lender

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
07 / 06 / 2006

Transaction ID: 60711.C7947

Amount of Each Receipt this Period
100.00

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

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

Mailing Address Potato Hill, 20073 266th Rd

City State Zip Code
Atchison KS 66002

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

Name of Employer Travel Center of Atchison
Occupation Travel Agent

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
05 / 08 / 2006

Transaction ID: 60707.C7637

Amount of Each Receipt this Period
1100.00

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

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

Mailing Address Potato Hill, 20073 266th Rd

City State Zip Code
Atchison KS 66002

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

Name of Employer Midwest Grain
Occupation Manager

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
05 / 08 / 2006

Transaction ID: 60707.C7638

Amount of Each Receipt this Period
100.00

Receipt
 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 37 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Robert & Carol Sharp

Mailing Address 748 Michigan Ave

City Leavenworth State KS Zip Code 66048-3721

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

Name of Employer Sharp Data Solutions, Inc. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2006

Transaction ID: 60707.C7900

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 12205 Long St

City Overland State KS Zip Code 66213

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

Name of Employer Self Occupation Developer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7634

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 123 NE 82nd St

City Topeka State KS Zip Code 66617-2209

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

Name of Employer Self Occupation Farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2006

Transaction ID: 60711.C7971

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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 38 / 144
	<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)
Jim Ryun for Congress

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

Mailing Address 2855 SW Macvicar Ave

City State Zip Code
Topeka KS 66611

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

Name of Employer Retired Occupation Retired

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
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60707.C7673

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
W.S. Stimpson

Mailing Address PO Box 1663

City State Zip Code
Mobile AL 36633

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

Name of Employer Gulf Lumber Occupation CFO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: 60707.C7692

Amount of Each Receipt this Period
250.00

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

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

Mailing Address PO Box 528

City State Zip Code
El Dorado KS 67042

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

Name of Employer Retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: 60707.C7823

Amount of Each Receipt this Period
100.00

Receipt
 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 39 / 144
	<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)
Jim Ryun for Congress

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

Mailing Address 45 Carriage House Circle Rd

City State Zip Code
Alexandria VA 22304

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

Name of Employer Information Requested Occupation Information Requested

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
0 4 / 2 5 / 2 0 0 6

Transaction ID: 60707.C7560

Amount of Each Receipt this Period
500.00

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

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

Mailing Address PO Box 1602

City State Zip Code
Lawrence KS 66044-8602

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

Transaction ID: 60707.C7562

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 2006 Kasold Rd

City State Zip Code
Lawrence KS 66047-2102

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 0 6

Transaction ID: 60707.C7529

Amount of Each Receipt this Period
1000.00

Receipt
 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 40 / 144
	<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)
Jim Ryun for Congress

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

Mailing Address 2006 Kasold Rd

City State Zip Code
Lawrence KS 66047-2102

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

Name of Employer Retired Occupation Teacher - Coach

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
04 / 19 / 2006

Transaction ID: 60707.C7528

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1020 E 19th

City State Zip Code
Wichita KS 67214

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

Name of Employer Tramco Inc Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2006

Transaction ID: 60411.C7482

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1935 SW Indian Woods Ln

City State Zip Code
Topeka KS 66611-1678

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

Name of Employer KS Grain & Feed Assn. Occupation Assn. Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2006

Transaction ID: 60707.C7619

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2100.00

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 41 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
David Upchurch

Mailing Address 3700 Clinton Pkwy Apt 1305

City Lawrence State KS Zip Code 66047-2152

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

Name of Employer USD 330 Occupation Teacher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: 60707.C7720

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
James O Walker

Mailing Address 172 Cahaba Valley Pkwy

City Pelham State AL Zip Code 35124-1143

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

Name of Employer AmerisourceBergen Occupation Consultant

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
0 4 / 2 5 / 2 0 0 6

Transaction ID: 60707.C7556

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Thomas S Ward

Mailing Address 4900 Oak

City Kansas City State MO Zip Code 64112

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

Name of Employer Russell Stover Candies Occupation President

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
0 4 / 2 7 / 2 0 0 6

Transaction ID: 60707.C7593

Amount of Each Receipt this Period
1100.00

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

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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 42 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Thomas S Ward

Mailing Address 4900 Oak

City State Zip Code
Kansas City MO 64112

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

Name of Employer Occupation
Russell Stover Candies President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2006

Transaction ID: 60707.C7594

Amount of Each Receipt this Period
900.00

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

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

Mailing Address 2015 Grandview Dr

City State Zip Code
Manhattan KS 66502

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

Name of Employer Occupation
Housewife Housewife

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2006

Transaction ID: 60707.C7801

Amount of Each Receipt this Period
150.00

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

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

Mailing Address 216 Headwaters Rd

City State Zip Code
Fredericksburg TX 78624

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

Name of Employer Occupation
MCM/Headquarter Ranch Business Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2006

Transaction ID: 60413.C7505

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1550.00
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 43 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Edgar Welden

Mailing Address 1029 22nd St S

City Birmingham State AL Zip Code 35205-2811

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

Name of Employer Retired Occupation Retired

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
0 4 / 1 8 / 2 0 0 6

Transaction ID: 60707.C7537

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Glen R Willie

Mailing Address 2807 Deer Meadow Denison

City Denison State TX Zip Code 75020

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

Name of Employer Requested Occupation Requested

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
0 6 / 2 9 / 2 0 0 6

Transaction ID: 60707.C7879

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
. Susan B Anthony List Candidate

Mailing Address 1420 King Street Ste 550

City Alexandria State VA Zip Code 22314

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2254.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: CM55160707.C7879

Amount of Each Receipt this Period
500.00

Memo - Conduit memo total
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Earmarked Memo - Conduit total

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 44 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Walter Wulf, Jr.

Mailing Address 700 Wulf Drive

City Humboldt State KS Zip Code 66748-1989

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

Name of Employer Monarch Cement Occupation President

Receipt For: 2006
 Primary General
 Other (specify) Primary

Election Cycle-to-Date 150.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 12 / 2006

Transaction ID: 60413.C7503

Amount of Each Receipt this Period
 100.00

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

B. Full Name (Last, First, Middle Initial)
Walter Wulf, Jr.

Mailing Address 700 Wulf Drive

City Humboldt State KS Zip Code 66748-1989

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

Name of Employer Monarch Cement Occupation 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
 07 / 06 / 2006

Transaction ID: 60711.C7948

Amount of Each Receipt this Period
 100.00

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

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

Mailing Address 3409 Dickens Ave.

City Manhattan State KS Zip Code 66503

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

Name of Employer K-State Student Health Occupation Medical Technologist

Receipt For: 2006
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2006

Transaction ID: 60707.C7835

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	61081.00

**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 45 / 144
	<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. AICPA PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2006	
Mailing Address Harborside Financial Center 201 Plaza Three		Transaction ID: 60707.C7591	
City Jersey City State NJ Zip Code 07311-3881		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00077321		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation		Election Cycle-to-Date 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. AICPA PAC		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address Harborside Financial Center 201 Plaza Three		Transaction ID: 60707.C7641	
City Jersey City State NJ Zip Code 07311-3881		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00077321		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation		Election Cycle-to-Date 3500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. AICPA PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2006	
Mailing Address Harborside Financial Center 201 Plaza Three		Transaction ID: 60901.C8176	
City Jersey City State NJ Zip Code 07311-3881		Amount of Each Receipt this Period 110.00	
FEC ID number of contributing federal political committee. C C00077321		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation		Election Cycle-to-Date 3610.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	3610.00
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 46 / 144
	<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. AICPA PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2006	
Mailing Address Harborside Financial Center 201 Plaza Three		Transaction ID: 60718.C8059	
City Jersey City State NJ Zip Code 07311-3881	Amount of Each Receipt this Period 1390.00		
FEC ID number of contributing federal political committee. C C00077321		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date 5000.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Americas Community Bankers COMPAC		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 900 19th Street, NW, Suite 400		Transaction ID: 60707.C7664	
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00001875		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date 5193.29		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. American Academy of Audiology Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 11730 Plaza America Dr Ste 300		Transaction ID: 60707.C7697	
City Reston State VA Zip Code 20190	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00342972		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date 7000.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	3390.00
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 47 / 144
	<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. American Academy of Audiology Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 11730 Plaza America Dr Ste 300		Transaction ID: 60707.C7905
City Reston State VA Zip Code 20190	FEC ID number of contributing federal political committee. C C00342972	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8000.00	

Full Name (Last, First, Middle Initial) B. American Bankers Assoc PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 1120 Connecticut Avenue NW		Transaction ID: 60707.C7706
City Washington State DC Zip Code 20036	FEC ID number of contributing federal political committee. C C00004275	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8000.00	

Full Name (Last, First, Middle Initial) C. American Bankers Assoc PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address 1120 Connecticut Avenue NW		Transaction ID: 60707.C7760
City Washington State DC Zip Code 20036	FEC ID number of contributing federal political committee. C C00004275	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 9000.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 144
	<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. American Century PAC Federal		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 4500 Main Street		Transaction ID: 60707.C7569
City Kansas City	State MO	Zip Code 64111
FEC ID number of contributing federal political committee. C C00338012		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. American Medical Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 1101 Vermont Ave NW		Transaction ID: 60718.C8032
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00000422		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. American Sugarbeet Growers PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 1156 15th Street NW, Suite 1101		Transaction ID: 60707.C7667
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00167684		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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 49 / 144
	<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. American Veterinary Medical Assoc PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 6	
Mailing Address 1101 Vermont Ave NW Ste 710		Transaction ID: 60707.C7765	
City State Zip Code Washington DC 20005-3521	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00114132		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. AMO Voluntary PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 6	
Mailing Address 2 W Dixie HWY		Transaction ID: 60707.C7766	
City State Zip Code Dania FL 33004	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00320077		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ash Grove Cement PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6	
Mailing Address PO Box 25900		Transaction ID: 60707.C7570	
City State Zip Code Shawnee Mission KS 66225	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00102517		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
AT&T, Inc. Federal PAC

Mailing Address 175 E Houston St Rm 7-A-50

City San Antonio State TX Zip Code 78205-2255

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 9 / 2 0 0 6

Transaction ID: 60707.C7517

Amount of Each Receipt this Period
 2000.00

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

B. Full Name (Last, First, Middle Initial)
AT&T, Inc. Federal PAC

Mailing Address 175 E Houston St Rm 7-A-50

City San Antonio State TX Zip Code 78205-2255

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 3 / 2 0 0 6

Transaction ID: 60707.C7677

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Back Americas Conservatives PAC

Mailing Address 616 E Street NW Suite 802

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00377028

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
 0 7 / 0 6 / 2 0 0 6

Transaction ID: 60711.C7998

Amount of Each Receipt this Period
 1000.00

Receipt
 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: PAGE 51 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Black & Veatch Good Government Fund

Mailing Address 11401 Lamar Ave

City State Zip Code
Shawnee Mission KS 66211-1508

FEC ID number of contributing federal political committee. **C** C00012310

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: 60707.C7694

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
Blue Cross & Blue Shield of KS PAC

Mailing Address 1133 SW Topeka Blvd

City State Zip Code
Topeka KS 66629-0001

FEC ID number of contributing federal political committee. **C** C00197202

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 Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 60707.C7658

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 700 13th Street, NW Suite 220

City State Zip Code
Washington DC 20005-5915

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

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

Transaction ID: 60707.C7764

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Build PAC of the Natl Assoc of Home Bld

Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

Transaction ID: 60707.C7613

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Caterpillar Employees PAC

Mailing Address 100 NE Adams St

City Peoria State IL Zip Code 61629-1430

FEC ID number of contributing federal political committee. **C** C00148031

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 Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: 60707.C7701

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1101 Pennsylvania Ave NW Ste 1000

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00008474

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 Y
0 5 / 1 6 / 2 0 0 6

Transaction ID: 60707.C7670

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 144
	<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Conservative Victory Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 15245		Transaction ID: 60707.C7678
City State Zip Code Washington DC 20003-0245		Amount of Each Receipt this Period 226.25
FEC ID number of contributing federal political committee. C C00009704		In-Kind <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 ▼ 1100.45	

Full Name (Last, First, Middle Initial) B. Conservative Victory Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address PO Box 15245		Transaction ID: 60707.C7684
City State Zip Code Washington DC 20003-0245		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C C00009704		Receipt <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 ▼ 1350.45	

Full Name (Last, First, Middle Initial) C. Conservative Victory Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 15245		Transaction ID: 60707.C7779
City State Zip Code Washington DC 20003-0245		Amount of Each Receipt this Period 448.65
FEC ID number of contributing federal political committee. C C00009704		In-Kind <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 ▼ 1799.10	

SUBTOTAL of Receipts This Page (optional)	924.90
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 54 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
CPC-PAC

Mailing Address PO Box 65314

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00328468

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2006

Transaction ID: 60718.C8004

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee

Mailing Address of the National Automobile Dealers
8400 Westpark Drive

City Mc Lean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 08 / 2006

Transaction ID: 60707.C7642

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
Deloitte & Touche Federal PAC

Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 24 / 2006

Transaction ID: 60707.C7686

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial) Deloitte & Touche Federal PAC Mailing Address PO Box 365 City Washington State DC Zip Code 20044-0365 FEC ID number of contributing federal political committee. C C00211318 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5500.00		Date of Receipt <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>5</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60707.C7687 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	4		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	4		2	0	0	6														
500.00																							

B. Full Name (Last, First, Middle Initial) DTE Energy Company PAC Mailing Address 2000 Second Ave City Detroit State MI Zip Code 48226 FEC ID number of contributing federal political committee. C C00081547 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 ▼ 2000.00		Date of Receipt <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>5</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60707.C7665 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	9		2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	9		2	0	0	6														
1000.00																							

C. Full Name (Last, First, Middle Initial) Eastman Kodak Company PAC Mailing Address 343 State St City Rochester State NY Zip Code 14650-0001 FEC ID number of contributing federal political committee. C C00297085 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 ▼ 1000.00		Date of Receipt <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>5</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60707.C7660 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	9		2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	9		2	0	0	6														
1000.00																							

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:	PAGE 56 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1225 Connecticut Avenue , N.W.

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2704.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2006

Transaction ID: 60901.C8180

Amount of Each Receipt this Period
204.00

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

B. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1225 Connecticut Avenue , N.W.

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4204.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 27 / 2006

Transaction ID: 60707.C7785

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1225 Connecticut Avenue , N.W.

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5204.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 27 / 2006

Transaction ID: 60707.C7786

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2704.00
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 57 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Every Republican is Crucial (ERIC PAC)
Mailing Address 4914 Fitzhugh Ave Suite 200
City Richmond State VA Zip Code 23230
FEC ID number of contributing federal political committee. **C** C00384701
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2006
Transaction ID: 60718.C8005
Amount of Each Receipt this Period
5000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Federal Home Loan Bank of Topeka PAC
Mailing Address PO Box 176
City Topeka State KS Zip Code 66601
FEC ID number of contributing federal political committee. **C** C00410720
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 23 / 2006
Transaction ID: 60707.C7676
Amount of Each Receipt this Period
500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Federal National Mortgage Assoc PAC
Mailing Address 3900 Wisconsin Avenue NW
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C** C00393520
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 02 / 2006
Transaction ID: 60707.C7610
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6500.00**
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 58 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Federal National Mortgage Assoc PAC

Mailing Address 3900 Wisconsin Avenue NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00393520

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

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

Transaction ID: 60707.C7611

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Friends of Phil Gramm PAC

Mailing Address PO Box 963

City Helotes State TX Zip Code 78023

FEC ID number of contributing federal political committee. **C** C00253971

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

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

Transaction ID: 60707.C7721

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Gary Miller for Congress

Mailing Address 721 Brea Canyon Rd Ste 7

City Diamond Bar State CA Zip Code 91789

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

Name of Employer Self Occupation Congressman

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
0 5 / 0 9 / 2 0 0 6

Transaction ID: 60707.C7663

Amount of Each Receipt this Period
1000.00

Receipt
 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: PAGE 59 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Gary Miller for Congress

Mailing Address 721 Brea Canyon Rd Ste 7

City State Zip Code
Diamond Bar CA 91789

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

Name of Employer Self Occupation Congressman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 60707.C7662

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
General Aviation Manufacturers Assoc PAC

Mailing Address 1400 K Street, N.W. Suite 801

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00014878

Name of Employer Occupation

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
 0 6 / 2 1 / 2 0 0 6

Transaction ID: 60707.C7756

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave. NW Suite 11

City State Zip Code
Washington DC 20004-2407

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 3 / 2 0 0 6

Transaction ID: 60707.C7514

Amount of Each Receipt this Period
1000.00

Receipt
 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:	PAGE 60 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave. NW Suite 11

City Washington State DC Zip Code 20004-2407

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 06 / 2006

Transaction ID: 60711.C8000

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
Goodyear Good Government Fund

Mailing Address 1144 E Market St

City Akron State OH Zip Code 44316-0001

FEC ID number of contributing federal political committee. **C** C00100131

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2006

Transaction ID: 60707.C7671

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Goodyear Good Government Fund

Mailing Address 1144 E Market St

City Akron State OH Zip Code 44316-0001

FEC ID number of contributing federal political committee. **C** C00100131

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2006

Transaction ID: 60707.C7782

Amount of Each Receipt this Period
 1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 61 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Grant Thornton PAC

Mailing Address 175 West Backson Blvd

City State Zip Code
Chicago IL 60604

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID: 60707.C7755

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
Growth & Prosperity PAC

Mailing Address 2610 Ridge Road Dr.

City State Zip Code
Alexandria VA 22302

FEC ID number of contributing federal political committee. **C** C00388793

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	6

Transaction ID: 60707.C7617

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
H & R Block PAC

Mailing Address 700 Thirteenth Street, NW

City State Zip Code
Washington DC 20005-5922

FEC ID number of contributing federal political committee. **C** C00188177

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
0	4	/	1	9	/	2	0	0	6

Transaction ID: 60707.C7516

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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 62 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Heartland Community Bankers Assn. PAC
Mailing Address 700 S Kansas Ave Ste.512
City State Zip Code
Topeka KS 66603
FEC ID number of contributing federal political committee. **C** C00016097
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
0 5 / 0 8 / 2 0 0 6
Transaction ID: 60707.C7640
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Independent Community Bankers PAC
Mailing Address One Thomas Circle NW Suite 400
City State Zip Code
Washington DC 20005
FEC ID number of contributing federal political committee. **C** C00032698
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
9000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 6
Transaction ID: 60707.C7608
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Independent Community Bankers PAC
Mailing Address One Thomas Circle NW Suite 400
City State Zip Code
Washington DC 20005
FEC ID number of contributing federal political committee. **C** C00032698
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 6
Transaction ID: 60707.C7728
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Independent Insurance Agents of Amer PAC

Mailing Address 412 First St SE Suite 300

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 06 / 2006

Transaction ID: 60711.C7997

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
Kansas Farm Bureau Vote FBF Fund

Mailing Address 2627 KFB Plaza

City Manhattan State KS Zip Code 66502

FEC ID number of contributing federal political committee. **C** C00285783

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 08 / 2006

Transaction ID: 60707.C7623

Amount of Each Receipt this Period
 2000.00

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

C. Full Name (Last, First, Middle Initial)
KCP&L Power PAC

Mailing Address PO Box 418679

City Kansas City State MO Zip Code 64141-9679

FEC ID number of contributing federal political committee. **C** C00111310

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 Y
 04 / 12 / 2006

Transaction ID: 60413.C7513

Amount of Each Receipt this Period
 1000.00

Receipt
 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:	PAGE 64 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Keep Our Majority PAC

Mailing Address PO Box 20209

City State Zip Code
Alexandria VA 22320

FEC ID number of contributing federal political committee. **C** C00307405

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 29 / 2006

Transaction ID: 60707.C7896

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
Koch Industries Pac

Mailing Address 655 15th St., NW, Suite 445

City State Zip Code
Washington DC 20005-2001

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 10 / 2006

Transaction ID: 60411.C7484

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Koch Industries Pac

Mailing Address 655 15th St., NW, Suite 445

City State Zip Code
Washington DC 20005-2001

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 12 / 2006

Transaction ID: 60413.C7511

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	7000.00
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 65 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Koch Industries Pac

Mailing Address 655 15th St., NW, Suite 445

City Washington State DC Zip Code 20005-2001

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

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

Transaction ID: 60707.C7763

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
KPMG Partners/Principals & Empl PAC

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036-9998

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: 60707.C7837

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
KPMG Partners/Principals & Empl PAC

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036-9998

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: 60707.C7783

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	5000.00
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 66 / 144
	(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)
Jim Ryun for Congress

A. Leadership PAC

Full Name (Last, First, Middle Initial)
Mailing Address 675 N Washington St #410

City State Zip Code
Alexandria VA 22314-1934

FEC ID number of contributing federal political committee. **C** C00314641

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 21 / 2006

Transaction ID: 60707.C7762

Amount of Each Receipt this Period
5000.00

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

B. Lockheed Martin PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1550 Crystal Drive
Crystal Square Two, Suite 300

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 25 / 2006

Transaction ID: 60707.C7545

Amount of Each Receipt this Period
1000.00

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

C. Moran For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 280

City State Zip Code
La Crosse KS 67548

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 Y
06 / 21 / 2006

Transaction ID: 60707.C7757

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	7000.00
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 67 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Morgan Stanley PAC

Mailing Address 401 9th Street NW Ste 650

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00337626

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 Y
 05 / 09 / 2006

Transaction ID: 60707.C7666

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Mortgage Bankers Association of Amer PAC

Mailing Address 1919 Pennsylvania Avenue NW

City State Zip Code
Washington DC 20006-3438

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 06 / 2006

Transaction ID: 60711.C7996

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Natl Assoc for Uniformed Services -PAC

Mailing Address 5535 Hempstead Way

City State Zip Code
Springfield VA 22151

FEC ID number of contributing federal political committee. **C** C00086348

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 02 / 2006

Transaction ID: 60707.C7609

Amount of Each Receipt this Period
500.00

Receipt
 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 68 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial) Natl Assoc for Uniformed Services -PAC Mailing Address 5535 Hempstead Way City Springfield State VA Zip Code 22151 FEC ID number of contributing federal political committee. C C00086348 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 ▼ 3000.00		Date of Receipt <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>5</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60707.C7693 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	3	0	/	2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	3	0	/	2	0	0	6														
1000.00																							

B. Full Name (Last, First, Middle Initial) National Assoc of Ins & Financial AdvPAC Mailing Address 2901 Telestar Court City Falls Church State VA Zip Code 22042 FEC ID number of contributing federal political committee. C C00005249 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 ▼ 4000.00		Date of Receipt <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>6</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60707.C7758 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	1	/	2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6	/	2	1	/	2	0	0	6														
1000.00																							

C. Full Name (Last, First, Middle Initial) National Cattlemans Beef Assoc. PAC Mailing Address 9110 E. Nichols Ave City Centennial State CO Zip Code 80112 FEC ID number of contributing federal political committee. C C00028787 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 ▼ 2000.00		Date of Receipt <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>5</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60707.C7685 Amount of Each Receipt this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	4	/	2	0	0	6	2000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	2	4	/	2	0	0	6														
2000.00																							

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:	PAGE 69 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
National Federation of Independent Bus.
Mailing Address 1201 F Street NW Suite 200

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 6

Transaction ID: 60707.C7661

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
National Rifle Assoc Pol Victory FundPAC
Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030-7400

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 60901.C8094

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
National Venture Capital Assn. PAC
Mailing Address 1655 North Fort Myer Dr., STE 850

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: 60707.C7691

Amount of Each Receipt this Period
1500.00

Receipt
 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:	PAGE 70 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Payless Shoesource Inc PAC

Mailing Address 3231 SE 6th Street

City State Zip Code
Topeka KS 66607-2260

FEC ID number of contributing federal political committee. **C** C00319368

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2006

Transaction ID: 60707.C7643

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 2600 South River Rd

City State Zip Code
Des Plaines IL 60018-3203

FEC ID number of contributing federal political committee. **C** C00066472

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
05 / 02 / 2006

Transaction ID: 60707.C7612

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2600 South River Rd

City State Zip Code
Des Plaines IL 60018-3203

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2006

Transaction ID: 60707.C7759

Amount of Each Receipt this Period
1000.00

Receipt
 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: PAGE 71 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Pricewaterhouse Coopers PAC

Mailing Address 1301 K Street NW, Suite 700 West

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

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
 0 5 / 2 4 / 2 0 0 6

Transaction ID: 60707.C7688

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
Pricewaterhouse Coopers PAC

Mailing Address 1301 K Street NW, Suite 700 West

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 0 6 / 2 0 0 6

Transaction ID: 60711.C8001

Amount of Each Receipt this Period
 1500.00

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

C. Full Name (Last, First, Middle Initial)
Prosperity Helps Inspire Liberty PAC

Mailing Address PO Box 26366

City State Zip Code
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C** C00375246

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
 0 7 / 0 6 / 2 0 0 6

Transaction ID: 60718.C8003

Amount of Each Receipt this Period
 2500.00

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

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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 72 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Raytheon Company PAC

Mailing Address 1100 Wilson Blvd Suite 1500

City State Zip Code
Arlington VA 22209-2297

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

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

Transaction ID: 60707.C7606

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Raytheon Company PAC

Mailing Address 1100 Wilson Blvd Suite 1500

City State Zip Code
Arlington VA 22209-2297

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: 60707.C7698

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Raytheon Company PAC

Mailing Address 1100 Wilson Blvd Suite 1500

City State Zip Code
Arlington VA 22209-2297

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: 60707.C7699

Amount of Each Receipt this Period
500.00

Receipt
 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:	PAGE 73 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Raytheon Company PAC

Mailing Address 1100 Wilson Blvd Suite 1500

City State Zip Code
Arlington VA 22209-2297

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 29 / 2006

Transaction ID: 60707.C7906

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
SBG Inc. Federal PAC

Mailing Address One Security Benefit Place

City State Zip Code
Topeka KS 66636

FEC ID number of contributing federal political committee. **C** C00216358

Name of Employer Occupation

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
05 / 09 / 2006

Transaction ID: 60707.C7650

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Susan B Anthony List Candidate Fund

Mailing Address 1420 King Street Ste 550

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1230.10

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 22 / 2006

Transaction ID: 60707.C7780

Amount of Each Receipt this Period
1230.10

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

Solicitation

SUBTOTAL of Receipts This Page (optional)	2730.10
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 74 / 144
	<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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Susan B Anthony List Candidate Fund

Mailing Address 1420 King Street Ste 550

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1253.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: 60901.C8175

Amount of Each Receipt this Period
23.34

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

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

Mailing Address 1650 Arch Street 22nd Fl

City State Zip Code
Philadelphia PA 19103-2097

FEC ID number of contributing federal political committee. **C** C00162719

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 Y
0 6 / 2 2 / 2 0 0 6

Transaction ID: 60707.C7784

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Texas Freedom Fund

Mailing Address 104 East Hume Ave

City State Zip Code
Alexandria VA 22301

FEC ID number of contributing federal political committee. **C** C00340661

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: 60707.C7903

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional)	6023.34
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 75 / 144
	<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Title Industry PAC of the American Land		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address 1828 L Street N.W., Suite 705		Transaction ID: 60413.C7512
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00012914		Receipt <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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. TOM PAC Federal		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 16488		Transaction ID: 60707.C7904
City State Zip Code Arlington VA 22215	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00364174		Receipt <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 ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. United Technologies Corp PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 1401 Eye St NW Suite 600		Transaction ID: 60707.C7700
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00035683		Receipt <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 ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 / 144
	(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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
USAA Employee Group PAC

Mailing Address USAA Building D-3-W

City San Antonio State TX Zip Code 78288

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2006

Transaction ID: 60707.C7761

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Washington Mutual PAC

Mailing Address 1215 Fourth Avenue
FCB 1620

City Seattle State WA Zip Code 98161

FEC ID number of contributing federal political committee. **C** C00129833

Name of Employer Occupation

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 / 06 / 2006

Transaction ID: 60718.C8006

Amount of Each Receipt this Period
1000.00

Receipt
 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)	▶	132882.34

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

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

FOR LINE NUMBER: PAGE 77 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Natl Republican Congressional Comm.
Mailing Address 320 First Street, SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 607.60

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6
Transaction ID: 60707.C7777
Amount of Each Receipt this Period
19.60
In-Kind
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Blast Fax

B. Full Name (Last, First, Middle Initial)
Natl Republican Congressional Comm.
Mailing Address 320 First Street, SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 627.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 6
Transaction ID: 60707.C7774
Amount of Each Receipt this Period
19.60
In-Kind
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Blast Fax

C. Full Name (Last, First, Middle Initial)
Natl Republican Congressional Comm.
Mailing Address 320 First Street, SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 725.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6
Transaction ID: 60707.C7775
Amount of Each Receipt this Period
98.00
In-Kind
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Blast Fax

SUBTOTAL of Receipts This Page (optional) ► 137.20
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 78 / 144
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input 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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Natl Republican Congressional Comm.

Mailing Address 320 First Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
823.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	5	/	2	0	0	6

Transaction ID: 60901.C8182

Amount of Each Receipt this Period
98.00

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

Blast Fax

B. Full Name (Last, First, Middle Initial)
Natl Republican Congressional Comm.

Mailing Address 320 First Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4323.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	2	/	2	0	0	6

Transaction ID: 60929.C8458

Amount of Each Receipt this Period
3500.00

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

SUBTOTAL of Receipts This Page (optional)	3598.00
TOTAL This Period (last page this line number only)	3735.20

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 79 / 144	
	(check only one)			
<input 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 checked="" 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) Jim Ryun for Congress
--

Full Name (Last, First, Middle Initial) A. Continental Western Group	
Mailing Address PO Box 1594	
City Des Moines	State IA
Zip Code 50306-1594	
FEC ID number of contributing federal political committee. C	
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 ▼ 371.00

Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2006
Transaction ID: 60707.C7781
Amount of Each Receipt this Period 371.00
Offsets to Operating Expenditure <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	371.00
TOTAL This Period (last page this line number only)	▶	371.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 / 144
	(check only one)	
<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Commerce Bank & Trust		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2006
Mailing Address PO Box 5049 3035 S Topeka		Transaction ID: 60707.C7616
City Topeka State KS Zip Code 66611-	Amount of Each Receipt this Period 408.68	
FEC ID number of contributing federal political committee. C		Other Receipt <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 ▼ 3732.43	

Full Name (Last, First, Middle Initial) B. Commerce Bank & Trust		Date of Receipt M M / D D / Y Y Y Y Y 05 / 31 / 2006
Mailing Address PO Box 5049 3035 S Topeka		Transaction ID: 60707.C7770
City Topeka State KS Zip Code 66611-	Amount of Each Receipt this Period 700.39	
FEC ID number of contributing federal political committee. C		Other Receipt <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 ▼ 4432.82	

Full Name (Last, First, Middle Initial) C. Commerce Bank & Trust		Date of Receipt M M / D D / Y Y Y Y Y 06 / 27 / 2006
Mailing Address PO Box 5049 3035 S Topeka		Transaction ID: 60711.C8002
City Topeka State KS Zip Code 66611-	Amount of Each Receipt this Period 357.80	
FEC ID number of contributing federal political committee. C		Other Receipt <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 ▼ 4790.62	

SUBTOTAL of Receipts This Page (optional) ▶	1466.87
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 81 / 144
	<input 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 checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Commerce Bank & Trust		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2006	
Mailing Address PO Box 5049 3035 S Topeka		Transaction ID: 60707.C7902	
City Topeka State KS Zip Code 66611-	Amount of Each Receipt this Period 475.93		
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 5266.55		

Full Name (Last, First, Middle Initial) B. Heritage Bank		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2006	
Mailing Address 3024 SW Wanamaker		Transaction ID: 60707.C7771	
City Topeka State KS Zip Code 66667-	Amount of Each Receipt this Period 271.31		
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2037.99		

Full Name (Last, First, Middle Initial) C. Heritage Bank		Date of Receipt M M / D D / Y Y Y Y Y 05 / 31 / 2006	
Mailing Address 3024 SW Wanamaker		Transaction ID: 60707.C7772	
City Topeka State KS Zip Code 66667-	Amount of Each Receipt this Period 301.45		
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2339.44		

SUBTOTAL of Receipts This Page (optional) ▶	1048.69
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 82 / 144
	(check only one)	
<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial)
Heritage Bank

Mailing Address 3024 SW Wanamaker

City State Zip Code
Topeka KS 66667-

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2637.41

Date of Receipt

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

Transaction ID: 60707.C7909

Amount of Each Receipt this Period
297.97

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

SUBTOTAL of Receipts This Page (optional)	▶	297.97
TOTAL This Period (last page this line number only)	▶	2813.53

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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. AICPA PAC		Transaction ID: 60901.C8176IK Date of Disbursement 06 / 20 / 2006
Mailing Address Harborside Financial Center 201 Plaza Three		Amount of Each Disbursement this Period 110.00
City Jersey City	State NJ Zip Code 07311-3881	
Purpose of Disbursement	Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IN KIND:
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. AT&T		Transaction ID: 60707.E4110 Date of Disbursement 05 / 03 / 2006
Mailing Address PO Box 930170		Amount of Each Disbursement this Period 87.01
City Dallas	State TX Zip Code 75393-0170	
Purpose of Disbursement CAMPAIGN TELEPHONE	Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN TELEPHONE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. AT&T		Transaction ID: 60707.E4127 Date of Disbursement 05 / 19 / 2006
Mailing Address PO Box 930170		Amount of Each Disbursement this Period 77.44
City Dallas	State TX Zip Code 75393-0170	
Purpose of Disbursement CAMPAIGN PHONE	Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN PHONE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	274.45
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)
Jim Ryun for Congress

A. AT&T Full Name (Last, First, Middle Initial) Mailing Address PO Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4128 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 86.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN PHONE
--	--	--

B. AT&T Full Name (Last, First, Middle Initial) Mailing Address PO Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4139 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 77.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN PHONE
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C. AT&T Full Name (Last, First, Middle Initial) Mailing Address PO Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E4326 Date of Disbursement: M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 86.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN PHONE
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SUBTOTAL of Disbursements This Page (optional) ▶	251.21
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)
Jim Ryun for Congress

A. Jeffrey Black Full Name (Last, First, Middle Initial) Jeffrey Black Mailing Address 428 Hutton Cir City Lawrence State KS Zip Code 66049-4845 Purpose of Disbursement TOLL MILEAGE & LINCOLN DAY TICKET Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4100 Date of Disbursement 04 / 03 / 2006 Amount of Each Disbursement this Period 79.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TOLL MILEAGE & LINCOLN DAY TICKET
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B. Jeffrey Black Full Name (Last, First, Middle Initial) Jeffrey Black Mailing Address 428 Hutton Cir City Lawrence State KS Zip Code 66049-4845 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4091 Date of Disbursement 04 / 25 / 2006 Amount of Each Disbursement this Period 44.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
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C. Jeffrey Black Full Name (Last, First, Middle Initial) Jeffrey Black Mailing Address 428 Hutton Cir City Lawrence State KS Zip Code 66049-4845 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4131 Date of Disbursement 05 / 11 / 2006 Amount of Each Disbursement this Period 47.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE SUPPLIES
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SUBTOTAL of Disbursements This Page (optional) ▶	170.54
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)

<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Jeffrey Black		Transaction ID: 60707.E4132 Date of Disbursement 05 / 23 / 2006	
Mailing Address 428 Hutton Cir		Amount of Each Disbursement this Period 13.71	
City Lawrence State KS Zip Code 66049-4845	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE	

Full Name (Last, First, Middle Initial) B. Jeffrey Black		Transaction ID: 60707.E4278 Date of Disbursement 06 / 26 / 2006	
Mailing Address 428 Hutton Cir		Amount of Each Disbursement this Period 38.93	
City Lawrence State KS Zip Code 66049-4845	Purpose of Disbursement POSTAGE/DELIVERY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE/DELIVERY	

Full Name (Last, First, Middle Initial) C. Jeffrey Black		Transaction ID: 60718.E4329 Date of Disbursement 07 / 10 / 2006	
Mailing Address 428 Hutton Cir		Amount of Each Disbursement this Period 131.20	
City Lawrence State KS Zip Code 66049-4845	Purpose of Disbursement REIMBURSE FOR PERSONAL CELL PHONE U	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSE FOR PERSONAL CELL PHONE U	

SUBTOTAL of Disbursements This Page (optional) ▶	183.84
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Don Brent		Transaction ID: 60707.E4280 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 1820 NW Fredith Ln		Amount of Each Disbursement this Period 775.00
City Topeka State KS Zip Code 66618-1545	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN PHOTOS		CAMPAIGN PHOTOS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Capital Plaza Hotel		Transaction ID: 60707.E4134 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 1717 SW Topeka Blvd		Amount of Each Disbursement this Period 1555.33
City Topeka State KS Zip Code 66612-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement JOHN BOEHNER FUNDRAISER		JOHN BOEHNER FUNDRAISER
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Capital Plaza Hotel		Transaction ID: 60707.E4133 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 1717 SW Topeka Blvd		Amount of Each Disbursement this Period 214.05
City Topeka State KS Zip Code 66612-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement JOHN BOEHNER FUNDRAISER		JOHN BOEHNER FUNDRAISER
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2544.38
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Childrens Miracle Network		Transaction ID: 60707.E4142 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 3626 SW Wanamaker Rd		Amount of Each Disbursement this Period 350.00
City Topeka State KS Zip Code 66614-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SPONSORSHIP	Category/ Type	SPONSORSHIP
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: 60707.E4140 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 2321 N University		Amount of Each Disbursement this Period 231.61
City Lubbock State TX Zip Code 79415-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN PHONE	Category/ Type	CAMPAIGN PHONE
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Cingular Wireless		Transaction ID: 60707.E4141 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 2321 N University		Amount of Each Disbursement this Period 217.96
City Lubbock State TX Zip Code 79415-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN PHONE	Category/ Type	CAMPAIGN PHONE
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	799.57
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Code Factory LLC		Transaction ID: 60707.E4151 Date of Disbursement 05 / 26 / 2006
Mailing Address PO Box 121		Amount of Each Disbursement this Period 240.00
City Forest State VA Zip Code 24551-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement WEBSITE Candidate Name	Category/Type	WEBSITE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Commerce Bank & Trust		Transaction ID: 60707.E4115 Date of Disbursement 04 / 04 / 2006
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 0.98
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BANK FEES Candidate Name	Category/Type	BANK FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Commerce Bank & Trust		Transaction ID: 60707.E4119 Date of Disbursement 04 / 10 / 2006
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 45.59
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BANK FEES Candidate Name	Category/Type	BANK FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	286.57
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Commerce Bank & Trust		Transaction ID: 60707.E4116 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 60.60
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUTA TAX	Candidate Name	FUTA TAX
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Commerce Bank & Trust		Transaction ID: 60707.E4118 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 203.00
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FICA TAXES	Candidate Name	FICA TAXES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Commerce Bank & Trust		Transaction ID: 60707.E4275 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 1.53
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BANK FEES	Candidate Name	BANK FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	265.13
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Commerce Bank & Trust		Transaction ID: 60707.E4276 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 33.18
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BANK FEES	Candidate Name	BANK FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Commerce Bank & Trust		Transaction ID: 60707.E4126 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 203.00
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FICA TAXES	Candidate Name	FICA TAXES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Commerce Bank & Trust		Transaction ID: 60707.E4296 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 1.87
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BANK FEES	Candidate Name	BANK FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	238.05
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Commerce Bank & Trust		Transaction ID: 60707.E4297 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 30.25
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BANK FEES	Candidate Name	BANK FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Commerce Bank & Trust		Transaction ID: 60707.E4166 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 555.04
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cingular Wireless		Transaction ID: 60707.E4168 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2321 N University		Amount of Each Disbursement this Period 107.29
City Lubbock State TX Zip Code 79415-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement NEW PHONE	Candidate Name	[MEMO ITEM] MEMO: NEW PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	585.29
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Cingular Wireless		Transaction ID: 60707.E4167 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address 2321 N University		Amount of Each Disbursement this Period 321.85
City Lubbock State TX Zip Code 79415-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement NEW PHONE	Category/ Type	[MEMO ITEM] MEMO: NEW PHONE
Candidate Name	Disbursement For: <input 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:		

Full Name (Last, First, Middle Initial) B. Commerce Bank & Trust		Transaction ID: 60707.E4293 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address PO Box 5049 3035 S Topeka		Amount of Each Disbursement this Period 203.00
City Topeka State KS Zip Code 66611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FED W/H & FICA	Category/ Type	FED W/H & FICA
Candidate Name	Disbursement For: <input 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:		

Full Name (Last, First, Middle Initial) C. Conservative Victory Fund		Transaction ID: 60707.C76781K Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 15245		Amount of Each Disbursement this Period 226.25
City Washington State DC Zip Code 20003-0245	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ANNOUNCEMENTS	Category/ Type	IN KIND: ANNOUNCEMENTS
Candidate Name	Disbursement For: <input 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) ▶	429.25
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Conservative Victory Fund		Transaction ID: 60707.C7779IK Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 15245		Amount of Each Disbursement this Period 448.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-0245	IN KIND: CREATE & FAX ANNOUNCEMENTS	
Purpose of Disbursement CREATE & FAX ANNOUNCEMENTS Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Continental Western Group		Transaction ID: 60707.E4150 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address PO Box 1594		Amount of Each Disbursement this Period 371.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Des Moines State IA Zip Code 50306-1594	INSURANCE	
Purpose of Disbursement INSURANCE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Continental Western Group		Transaction ID: 60707.E4152 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address PO Box 1594		Amount of Each Disbursement this Period 371.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Des Moines State IA Zip Code 50306-1594	INSURANCE	
Purpose of Disbursement INSURANCE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1190.65
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)
Jim Ryun for Congress

A. Dublin Group Full Name (Last, First, Middle Initial) Mailing Address 6800 W 107th St Ste 100 City Overland Park State KS Zip Code 66212-1830 Purpose of Disbursement JO CO FUNDRAISER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4107 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period 2098.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 JO CO FUNDRAISER
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B. Ernst & Young PAC Full Name (Last, First, Middle Initial) Mailing Address 1225 Connecticut Avenue , N.W. City Washington State DC Zip Code 20036- Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60901.C8180IK Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 204.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IN KIND:
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C. H T Paul Company Inc Full Name (Last, First, Middle Initial) Mailing Address PO Box 5318 City Topeka State KS Zip Code 66605- Purpose of Disbursement RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60411.E4061 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT
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SUBTOTAL of Disbursements This Page (optional) ▶	2502.27
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. H T Paul Company Inc		Transaction ID: 60707.E4106 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address PO Box 5318		Amount of Each Disbursement this Period 200.00
City Topeka State KS Zip Code 66605-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT Candidate Name	Category/Type	RENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. H T Paul Company Inc		Transaction ID: 60707.E4148 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address PO Box 5318		Amount of Each Disbursement this Period 200.00
City Topeka State KS Zip Code 66605-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT Candidate Name	Category/Type	RENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. H T Paul Company Inc		Transaction ID: 60707.E4277 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address PO Box 5318		Amount of Each Disbursement this Period 200.00
City Topeka State KS Zip Code 66605-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT Candidate Name	Category/Type	RENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
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)
Jim Ryun for Congress

A. Hy-Vee Full Name (Last, First, Middle Initial) Mailing Address 4000 West 6th Ave City Lawrence State KS Zip Code 66049-		Transaction ID: 60707.E4090 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Purpose of Disbursement FUNDRAISING EVENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 300.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING EVENT
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

B. Stephen R Iliff Full Name (Last, First, Middle Initial) Mailing Address 3500 SW 6th Ave City Topeka State KS Zip Code 66606-		Transaction ID: 60707.E4109 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Purpose of Disbursement ACCOUNTING & COMPLIANCE STAFF Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 973.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ACCOUNTING & COMPLIANCE STAFF
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

C. Stephen R Iliff Full Name (Last, First, Middle Initial) Mailing Address 3500 SW 6th Ave City Topeka State KS Zip Code 66606-		Transaction ID: 60707.E4129 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Purpose of Disbursement ACCOUNTING & COMPLIANCE STAFF Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 1364.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ACCOUNTING & COMPLIANCE STAFF
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

SUBTOTAL of Disbursements This Page (optional) ▶	2637.56
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Jim Ryun for Congress

A. Stephen R Iliff Full Name (Last, First, Middle Initial) Mailing Address 3500 SW 6th Ave City Topeka State KS Zip Code 66606-		Transaction ID: 60707.E4130 Date of Disbursement 06 / 15 / 2006 Amount of Each Disbursement this Period 2022.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ACCOUNTING & COMPLIANCE STAFF
Purpose of Disbursement: ACCOUNTING & COMPLIANCE STAFF Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type: _____ ACCOUNTING & COMPLIANCE STAFF

B. Indian Delivery Full Name (Last, First, Middle Initial) Mailing Address 2828 SW Arrowhead Rd City Topeka State KS Zip Code 66614-2447		Transaction ID: 60707.E4102 Date of Disbursement 04 / 10 / 2006 Amount of Each Disbursement this Period 10.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DELIVERY
Purpose of Disbursement: DELIVERY Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type: _____ DELIVERY

C. Indian Delivery Full Name (Last, First, Middle Initial) Mailing Address 2828 SW Arrowhead Rd City Topeka State KS Zip Code 66614-2447		Transaction ID: 60707.E4147 Date of Disbursement 05 / 24 / 2006 Amount of Each Disbursement this Period 30.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DELIVERY
Purpose of Disbursement: DELIVERY Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type: _____ DELIVERY

SUBTOTAL of Disbursements This Page (optional) ▶	2062.98
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Indian Delivery		Transaction ID: 60707.E4149 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 2828 SW Arrowhead Rd		Amount of Each Disbursement this Period 15.11
City Topeka State KS Zip Code 66614-2447	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DELIVERY Candidate Name	Category/Type	DELIVERY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kansas Dept of Revenue		Transaction ID: 60707.E4120 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address 915 SW Harrison		Amount of Each Disbursement this Period 20.00
City Topeka State KS Zip Code 66625-1000	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement STATE W/H Candidate Name	Category/Type	STATE W/H
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kansas Dept of Revenue		Transaction ID: 60707.E4161 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 915 SW Harrison		Amount of Each Disbursement this Period 20.00
City Topeka State KS Zip Code 66625-1000	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement STATE W/H Candidate Name	Category/Type	STATE W/H
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	55.11
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Kansas Dept of Revenue		Transaction ID: 60707.E4294 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 915 SW Harrison		Amount of Each Disbursement this Period 20.00
City Topeka State KS Zip Code 66625-1000		
Purpose of Disbursement STATE W/H		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	STATE W/H
State: District:		

Full Name (Last, First, Middle Initial) B. Kansas Employment Security Fund		Transaction ID: 60707.E4121 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO Box 400		Amount of Each Disbursement this Period 334.82
City Topeka State KS Zip Code 66601-0400		
Purpose of Disbursement STATE UNEMPLOYMENT		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	STATE UNEMPLOYMENT
State: District:		

Full Name (Last, First, Middle Initial) C. Lindemuth Inc		Transaction ID: 60707.E4159 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 605 S Kansas Ave		Amount of Each Disbursement this Period 500.00
City Topeka State KS Zip Code 66603-		
Purpose of Disbursement 1/2 JUNE RENT		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1/2 JUNE RENT
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	854.82
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
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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)
Jim Ryun for Congress

A. Lindemuth Inc Full Name (Last, First, Middle Initial) Mailing Address 605 S Kansas Ave City Topeka State KS Zip Code 66603- Purpose of Disbursement JULY RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E4311 Date of Disbursement 07 / 07 / 2006 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 JULY RENT
---	--	--

B. MBNA Full Name (Last, First, Middle Initial) Mailing Address PO Box 15019 City Wilmington State DE Zip Code 19886-5019 Purpose of Disbursement SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4094 Date of Disbursement 05 / 09 / 2006 Amount of Each Disbursement this Period 1581.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
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C. America Online Full Name (Last, First, Middle Initial) Mailing Address PO Box 10810 City Herndon State VA Zip Code 20170- Purpose of Disbursement ISP Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4213 Date of Disbursement 05 / 09 / 2006 Amount of Each Disbursement this Period 56.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: ISP
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SUBTOTAL of Disbursements This Page (optional) ▶	2581.31
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Applebees		Transaction ID: 60707.E4184 Date of Disbursement 05 / 09 / 2006	
Mailing Address 5928 SW 17th		Amount of Each Disbursement this Period 69.15	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement DONOR MEALS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: DONOR MEALS	

Full Name (Last, First, Middle Initial) B. Arbys		Transaction ID: 60707.E4192 Date of Disbursement 05 / 09 / 2006	
Mailing Address 1187 Gage Blvd		Amount of Each Disbursement this Period 12.09	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN MEALS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN MEALS	

Full Name (Last, First, Middle Initial) C. Cato Travel		Transaction ID: 60707.E4203 Date of Disbursement 05 / 09 / 2006	
Mailing Address B222 LHOB		Amount of Each Disbursement this Period 20.00	
City Washington State DC Zip Code 20515-	Purpose of Disbursement TRAVEL FEES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: TRAVEL FEES	

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

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

Use separate schedule(s)
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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. FTD.com		Transaction ID: 60707.E4200 Date of Disbursement 05 / 09 / 2006	
Mailing Address 3113 Woodcreek Dr		Amount of Each Disbursement this Period 32.19	
City Downers Grove State IL Zip Code 60515-	Purpose of Disbursement DONOR GIFT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: DONOR GIFT	

Full Name (Last, First, Middle Initial) B. HMSHOST		Transaction ID: 60707.E4193 Date of Disbursement 05 / 09 / 2006	
Mailing Address 6000 N Terminal Pkwy		Amount of Each Disbursement this Period 9.25	
City Atlanta State GA Zip Code 30320-	Purpose of Disbursement CAMPAIGN TRAVEL MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL	

Full Name (Last, First, Middle Initial) C. HMSHOST		Transaction ID: 60707.E4204 Date of Disbursement 05 / 09 / 2006	
Mailing Address 6000 N Terminal Pkwy		Amount of Each Disbursement this Period 6.82	
City Atlanta State GA Zip Code 30320-	Purpose of Disbursement CAMPAIGN TRAVEL MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Hereford House		Transaction ID: 60707.E4186 Date of Disbursement 05 / 09 / 2006	
Mailing Address 4931 W 6th Street		Amount of Each Disbursement this Period 38.47	
City Lawrence State KS Zip Code 66049-	Purpose of Disbursement CAMPAIGN MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN MEAL	

Full Name (Last, First, Middle Initial) B. Hy-Vee		Transaction ID: 60707.E4191 Date of Disbursement 05 / 09 / 2006	
Mailing Address 4000 West 6th Ave		Amount of Each Disbursement this Period 29.11	
City Lawrence State KS Zip Code 66049-	Purpose of Disbursement DONOR BIRTHDAY CAKE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: DONOR BIRTHDAY CAKE	

Full Name (Last, First, Middle Initial) C. McDonalds		Transaction ID: 60707.E4212 Date of Disbursement 05 / 09 / 2006	
Mailing Address 2001 N Topeka		Amount of Each Disbursement this Period 9.03	
City Topeka State KS Zip Code 66608-	Purpose of Disbursement CAMPAIGN TRAVEL MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. McDonalds		Transaction ID: 60707.E4205 Date of Disbursement 05 / 09 / 2006	
Mailing Address 2001 N Topeka		Amount of Each Disbursement this Period 5.00	
City Topeka State KS Zip Code 66608-	Purpose of Disbursement CAMPAIGN TRAVEL MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL	

Full Name (Last, First, Middle Initial) B. McDonalds		Transaction ID: 60707.E4208 Date of Disbursement 05 / 09 / 2006	
Mailing Address 2001 N Topeka		Amount of Each Disbursement this Period 10.36	
City Topeka State KS Zip Code 66608-	Purpose of Disbursement CAMPAIGN TRAVEL MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL	

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: 60707.E4190 Date of Disbursement 05 / 09 / 2006	
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 39.00	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. US Postmaster		Transaction ID: 60707.E4201 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 3.55
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. US Postmaster		Transaction ID: 60707.E4211 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 6.36
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Southwest Air		Transaction ID: 60707.E4189 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 514.20
City Dallas State TX Zip Code 75235-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN TRAVEL	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Subway		Transaction ID: 60707.E4202 Date of Disbursement 05 / 09 / 2006
Mailing Address 406 1st Street Se		Amount of Each Disbursement this Period 9.64
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEALS FOR PHONE CALL DAY	Candidate Name	[MEMO ITEM] MEMO: MEALS FOR PHONE CALL DAY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Subway		Transaction ID: 60707.E4198 Date of Disbursement 05 / 09 / 2006
Mailing Address 406 1st Street Se		Amount of Each Disbursement this Period 14.01
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN LUNCH	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN LUNCH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Taco Bell		Transaction ID: 60707.E4206 Date of Disbursement 05 / 09 / 2006
Mailing Address 1560 SW Wanamaker Rd		Amount of Each Disbursement this Period 12.67
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN TRAVEL MEAL	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Tortilla Coast		Transaction ID: 60707.E4214 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 400 First Street SE		Amount of Each Disbursement this Period 35.64
City Washington State DC Zip Code 20016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DONOR MEAL	Candidate Name	[MEMO ITEM] MEMO: DONOR MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tortilla Coast		Transaction ID: 60707.E4194 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 400 First Street SE		Amount of Each Disbursement this Period 253.00
City Washington State DC Zip Code 20016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PHONE CALLS LUNCH	Candidate Name	[MEMO ITEM] MEMO: PHONE CALLS LUNCH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tuesday Morning		Transaction ID: 60707.E4185 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 222 Walnut Street		Amount of Each Disbursement this Period 22.89
City Fort Collins State CO Zip Code 80524-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN GIFT	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN GIFT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. US House of Representatives		Transaction ID: 60707.E4196 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address B-217 Longworth Bldg		Amount of Each Disbursement this Period 24.01
City Washington State DC Zip Code 20515-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN LUNCH	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN LUNCH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MBNA		Transaction ID: 60707.E4164 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 15019		Amount of Each Disbursement this Period 5731.45
City Wilmington State DE Zip Code 19886-5019	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. America Online		Transaction ID: 60707.E4225 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 56.36
City Herndon State VA Zip Code 20170-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ISP	Candidate Name	[MEMO ITEM] MEMO: ISP
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5731.45
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Amazon.com		Transaction ID: 60707.E4222 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 2654 N Highway 169		Amount of Each Disbursement this Period 250.25	
City Coffeyville State KS Zip Code 67337-	Purpose of Disbursement BOOKS FOR B-DAY FUNDRAISER	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: BOOKS FOR B-DAY FUNDRAISER	

Full Name (Last, First, Middle Initial) B. Applebees		Transaction ID: 60707.E4224 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 5928 SW 17th		Amount of Each Disbursement this Period 16.00	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN TRAVEL MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL	

Full Name (Last, First, Middle Initial) C. Applebees		Transaction ID: 60707.E4223 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 5928 SW 17th		Amount of Each Disbursement this Period 17.00	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN TRAVEL MEAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Arbys		Transaction ID: 60707.E4268 Date of Disbursement 05 / 18 / 2006
Mailing Address 1187 Gage Blvd		Amount of Each Disbursement this Period 5.05
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN MEAL	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cafe Recess		Transaction ID: 60707.E4243 Date of Disbursement 05 / 18 / 2006
Mailing Address 209 Pennsylvania Ave		Amount of Each Disbursement this Period 19.39
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DONOR MEAL	Candidate Name	[MEMO ITEM] MEMO: DONOR MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Capital Grille		Transaction ID: 60707.E4270 Date of Disbursement 05 / 18 / 2006
Mailing Address 601 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1620.08
City Washington State DC Zip Code 20001-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement B-DAY EVENT FOOD	Candidate Name	[MEMO ITEM] MEMO: B-DAY EVENT FOOD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Transaction ID: 60707.E4258 Date of Disbursement 05 / 18 / 2006
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 31.80
City Washington State DC Zip Code 20007-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement JIM & ANNS LUNCH FOR EISENHOWER LU		[MEMO ITEM] MEMO: JIM & ANNS LUNCH FOR EISENHOWER LU
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Chilis		Transaction ID: 60707.E4262 Date of Disbursement 05 / 18 / 2006
Mailing Address 2319 Iowa		Amount of Each Disbursement this Period 24.94
City Lawrence State KS Zip Code 66046-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN MEAL		[MEMO ITEM] MEMO: CAMPAIGN MEAL
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Code Factory LLC		Transaction ID: 60707.E4240 Date of Disbursement 05 / 18 / 2006
Mailing Address PO Box 121		Amount of Each Disbursement this Period 716.00
City Forest State VA Zip Code 24551-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement WEBSITE		[MEMO ITEM] MEMO: WEBSITE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

A. Dillons Full Name (Last, First, Middle Initial) Mailing Address 300 SW 29th City Topeka State KS Zip Code 66611- Purpose of Disbursement KS RELAYS SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4273 Date of Disbursement 05 / 18 / 2006 Amount of Each Disbursement this Period 5.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: KS RELAYS SUPPLIES
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B. FTD.com Full Name (Last, First, Middle Initial) Mailing Address 3113 Woodcreek Dr City Downers Grove State IL Zip Code 60515- Purpose of Disbursement DONOR GIFT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4242 Date of Disbursement 05 / 18 / 2006 Amount of Each Disbursement this Period 45.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: DONOR GIFT
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C. HMSHOST Full Name (Last, First, Middle Initial) Mailing Address 6000 N Terminal Pkwy City Atlanta State GA Zip Code 30320- Purpose of Disbursement CAMPAIGN TRAVEL MEAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4252 Date of Disbursement 05 / 18 / 2006 Amount of Each Disbursement this Period 28.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

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

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Detailed Summary Page

FOR LINE NUMBER:
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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. HMSHOST		Transaction ID: 60707.E4253 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 6000 N Terminal Pkwy		Amount of Each Disbursement this Period 18.51
City Atlanta State GA Zip Code 30320-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN TRAVEL MEAL	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hereford House		Transaction ID: 60707.E4272 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4931 W 6th Street		Amount of Each Disbursement this Period 27.61
City Lawrence State KS Zip Code 66049-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN MEALS	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN MEALS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lowes		Transaction ID: 60707.E4260 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 6750 Richmond Hwy		Amount of Each Disbursement this Period 81.31
City Alexandria State VA Zip Code 22306-6701	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Lowes		Transaction ID: 60707.E4261 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 6750 Richmond Hwy		Amount of Each Disbursement this Period 15.73
City Alexandria State VA Zip Code 22306-6701	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MBNA		Transaction ID: 60707.E4255 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 15019		Amount of Each Disbursement this Period 64.28
City Wilmington State DE Zip Code 19886-5019	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LATE FEE & FINANCE CHARGES	Candidate Name	[MEMO ITEM] MEMO: LATE FEE & FINANCE CHARGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Midwest Express		Transaction ID: 60707.E4251 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 6744 South Howell Ave		Amount of Each Disbursement this Period 297.60
City Oak Creek State WI Zip Code 53154-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN TRAVEL	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: 60707.E4263 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1930 SW Wanamaker		Amount of Each Disbursement this Period 24.67
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Outback Steakhouse		Transaction ID: 60707.E4265 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 5826 W 21st St		Amount of Each Disbursement this Period 21.18
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN MEAL	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN MEAL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: 60707.E4226 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 6.90
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. US Postmaster		Transaction ID: 60707.E4235 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 11.98	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE	

Full Name (Last, First, Middle Initial) B. US Postmaster		Transaction ID: 60707.E4227 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 78.00	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE	

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: 60707.E4229 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 23.25	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE	

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

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: 60707.E4254 Date of Disbursement 05 / 18 / 2006	
Mailing Address 3301 Jefferson Davis Hwy		Amount of Each Disbursement this Period 51.01	
City Alexandria State VA Zip Code 22314-	Purpose of Disbursement OFFICE SUPPLIES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: OFFICE SUPPLIES	

Full Name (Last, First, Middle Initial) B. Subway		Transaction ID: 60707.E4271 Date of Disbursement 05 / 18 / 2006	
Mailing Address 406 1st Street Se		Amount of Each Disbursement this Period 7.33	
City Washington State DC Zip Code 20003-	Purpose of Disbursement MEALS FOR PHONE CALL DAY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: MEALS FOR PHONE CALL DAY	

Full Name (Last, First, Middle Initial) C. Subway		Transaction ID: 60707.E4245 Date of Disbursement 05 / 18 / 2006	
Mailing Address 406 1st Street Se		Amount of Each Disbursement this Period 8.34	
City Washington State DC Zip Code 20003-	Purpose of Disbursement MEALS FOR PHONE CALL DAY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: MEALS FOR PHONE CALL DAY	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

A. Subway Full Name (Last, First, Middle Initial) Mailing Address 406 1st Street Se City Washington State DC Zip Code 20003- Purpose of Disbursement MEALS FOR PHONE CALL DAY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4244 Date of Disbursement 05 / 18 / 2006 Amount of Each Disbursement this Period 11.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEALS FOR PHONE CALL DAY
--	--	--

B. Taco Bell Full Name (Last, First, Middle Initial) Mailing Address 1560 SW Wanamaker Rd City Topeka State KS Zip Code 66604- Purpose of Disbursement CAMPAIGN MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4249 Date of Disbursement 05 / 18 / 2006 Amount of Each Disbursement this Period 21.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAMPAIGN MEALS
--	--	--

C. Tortilla Coast Full Name (Last, First, Middle Initial) Mailing Address 400 First Street SE City Washington State DC Zip Code 20016- Purpose of Disbursement LUNCH FOR WORKERS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4239 Date of Disbursement 05 / 18 / 2006 Amount of Each Disbursement this Period 50.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: LUNCH FOR WORKERS
---	--	---

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. US House of Representatives		Transaction ID: 60707.E4231 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address B-217 Longworth Bldg		Amount of Each Disbursement this Period 179.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20515-	Purpose of Disbursement CAMPAIGN GIFTS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN GIFTS

Full Name (Last, First, Middle Initial) B. US House of Representatives		Transaction ID: 60707.E4230 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address B-217 Longworth Bldg		Amount of Each Disbursement this Period 99.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20515-	Purpose of Disbursement CAMPAIGN GIFTS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN GIFTS

Full Name (Last, First, Middle Initial) C. Wal-Mart		Transaction ID: 60707.E4237 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address US Hwy 75		Amount of Each Disbursement this Period 31.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN SUPPLIES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN SUPPLIES

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Wal-Mart		Transaction ID: 60707.E4236 Date of Disbursement 05 / 18 / 2006	
Mailing Address US Hwy 75		Amount of Each Disbursement this Period 31.25	
City Topeka	State KS	Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement KS RELAYS SUPPLIES	Category/Type		
Candidate Name	Disbursement For: <input 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:		

[MEMO ITEM]
MEMO: KS RELAYS SUPPLIES

Full Name (Last, First, Middle Initial) B. Wal-Mart		Transaction ID: 60707.E4238 Date of Disbursement 05 / 18 / 2006	
Mailing Address US Hwy 75		Amount of Each Disbursement this Period 14.07	
City Topeka	State KS	Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement DONOR FOOD	Category/Type		
Candidate Name	Disbursement For: <input 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:		

[MEMO ITEM]
MEMO: DONOR FOOD

Full Name (Last, First, Middle Initial) C. Morgan, Meredith, & Associates		Transaction ID: 60707.E4098 Date of Disbursement 04 / 05 / 2006	
Mailing Address 2875 Towerview Rd		Amount of Each Disbursement this Period 275.00	
City Herndon	State VA	Zip Code 20171-5403	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement DRAWING OF JIM RYUN BY MARK GUTIERR	Category/Type		
Candidate Name	Disbursement For: <input 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:		

DRAWING OF JIM RYUN BY MA-RK GUTIERR

SUBTOTAL of Disbursements This Page (optional)	275.00
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Natl Republican Congressional Comm.		Transaction ID: 60707.C7777IK Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 19.60	
City Washington State DC Zip Code 20003-	Purpose of Disbursement BLAST FAX Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		IN KIND: BLAST FAX	
State: District:			

Full Name (Last, First, Middle Initial) B. Natl Republican Congressional Comm.		Transaction ID: 60707.C7774IK Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 19.60	
City Washington State DC Zip Code 20003-	Purpose of Disbursement BLAST FAX Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		IN KIND: BLAST FAX	
State: District:			

Full Name (Last, First, Middle Initial) C. Natl Republican Congressional Comm.		Transaction ID: 60707.C7775IK Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 98.00	
City Washington State DC Zip Code 20003-	Purpose of Disbursement BLAST FAX Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		IN KIND: BLAST FAX	
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	137.20
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Natl Republican Congressional Comm.		Transaction ID: 60901.C8182IK Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 98.00
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BLAST FAX	Candidate Name	IN KIND: BLAST FAX
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Natl Republican Congressional Comm.		Transaction ID: 60929.C8458IK Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 3500.00
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	IN KIND:
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) C. Office Max		Transaction ID: 60707.E4095 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 15315 W 119th Street		Amount of Each Disbursement this Period 23.61
City Olathe State KS Zip Code 66062-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3621.61
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. US Postmaster		Transaction ID: 60707.E4101 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 200.00
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE		CAMPAIGN POSTAGE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. US Postmaster		Transaction ID: 60707.E4097 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 468.00
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE		CAMPAIGN POSTAGE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: 60707.E4096 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 24.36
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE		CAMPAIGN POSTAGE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	692.36
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. US Postmaster		Transaction ID: 60707.E4146 Date of Disbursement 06 / 01 / 2006	
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 39.00	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAMPAIGN POSTAGE	

Full Name (Last, First, Middle Initial) B. US Postmaster		Transaction ID: 60707.E4145 Date of Disbursement 06 / 20 / 2006	
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 1260.81	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement CAMPAIGN POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAMPAIGN POSTAGE	

Full Name (Last, First, Middle Initial) C. Pro-Print		Transaction ID: 60707.E4157 Date of Disbursement 06 / 15 / 2006	
Mailing Address 2028 SW Gage		Amount of Each Disbursement this Period 1144.34	
City Topeka State KS Zip Code 66604-	Purpose of Disbursement BUMBER STICKERS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	BUMBER STICKERS	

SUBTOTAL of Disbursements This Page (optional) ▶	2444.15
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)
Jim Ryun for Congress

A. Pro-Print Full Name (Last, First, Middle Initial) Mailing Address 2028 SW Gage City Topeka State KS Zip Code 66604- Purpose of Disbursement LETTERHEAD ENVELOPES & LABELS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4281 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 647.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LETTERHEAD ENVELOPES & LABELS
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B. Republican Party of Kansas Full Name (Last, First, Middle Initial) Mailing Address 2025 SW Gage Blvd City Topeka State KS Zip Code 66604- Purpose of Disbursement AD IN THE HANDBOOK Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E4328 Date of Disbursement: M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 275.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 AD IN THE HANDBOOK
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C. Jim Ryun Full Name (Last, First, Middle Initial) Mailing Address 16718 Thirteenth City Lawrence State KS Zip Code 66044- Purpose of Disbursement SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4092 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 708.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
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SUBTOTAL of Disbursements This Page (optional) ▶	1630.94
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Transaction ID: 60707.E4093 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address PO Box 930170		Amount of Each Disbursement this Period 57.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75393-0170	Purpose of Disbursement CAMPAIGN PHONE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN PHONE

Full Name (Last, First, Middle Initial) B. COSTCO Wholesale		Transaction ID: 60901.E4439 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1200 S Fern		Amount of Each Disbursement this Period 6.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Arlington State VA Zip Code 22202-	Purpose of Disbursement CAMPAIGN PHOTOS Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN PHOTOS

Full Name (Last, First, Middle Initial) C. COSTCO Wholesale		Transaction ID: 60901.E4440 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1200 S Fern		Amount of Each Disbursement this Period 41.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Arlington State VA Zip Code 22202-	Purpose of Disbursement CAMPAIGN SUPPLIES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN SUPPLIES

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Destiny Image Inc		Transaction ID: 60707.E4114 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address PO Box 310 167 Walnut Bottom Rd		Amount of Each Disbursement this Period 162.00
City Shippensburg State PA Zip Code 17257-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN BOOKS	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN BOOKS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MCI		Transaction ID: 60901.E4441 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address PO Box 52251		Amount of Each Disbursement this Period 14.14
City Phoenix State AZ Zip Code 85072-2251	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN PHONE	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: 60901.E4436 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 5.15
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Jim Ryun for Congress

A. Jim Ryun Full Name (Last, First, Middle Initial) Mailing Address 16718 Thirteenth City Lawrence State KS Zip Code 66044-		Transaction ID: 60901.E4438 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Purpose of Disbursement REIMBURSE FOR PARKING/TOLLS/MILEAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 300.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: REIMBURSE FOR PARKING/TOLLS/MILEAGE
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

B. Sams Club Full Name (Last, First, Middle Initial) Mailing Address 1404 SW Wanamaker Rd City Topeka State KS Zip Code 66604-		Transaction ID: 60707.E4113 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Purpose of Disbursement CAMPAIGN SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 42.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAMPAIGN SUPPLIES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

C. US House of Representatives Full Name (Last, First, Middle Initial) Mailing Address B-217 Longworth Bldg City Washington State DC Zip Code 20515-		Transaction ID: 60901.E4437 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Purpose of Disbursement CAMPAIGN SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 18.36 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAMPAIGN SUPPLIES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Jim Ryun for Congress

A. Verizon Full Name (Last, First, Middle Initial) Mailing Address 10740 Nall Ave City Overland State KS Zip Code 66211- Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4111 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 33.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAMPAIGN PHONE
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B. Jim Ryun Full Name (Last, First, Middle Initial) Mailing Address 16718 Thirteenth City Lawrence State KS Zip Code 66044- Purpose of Disbursement SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4135 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 Amount of Each Disbursement this Period 528.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
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C. AT&T Full Name (Last, First, Middle Initial) Mailing Address PO Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4217 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 Amount of Each Disbursement this Period 67.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAMPAIGN PHONE
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SUBTOTAL of Disbursements This Page (optional) ▶	528.89
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)

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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)
Jim Ryun for Congress

<p>A. MCI</p> <p>Full Name (Last, First, Middle Initial) Mailing Address PO Box 52251</p> <p>City Phoenix State AZ Zip Code 85072-2251</p> <p>Purpose of Disbursement CAMPAIGN PHONE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 60707.E4218 Date of Disbursement 05 / 11 / 2006</p> <p>Amount of Each Disbursement this Period 15.08</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: CAMPAIGN PHONE</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Jim Ryun</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 16718 Thirteenth</p> <p>City Lawrence State KS Zip Code 66044-</p> <p>Purpose of Disbursement REIMBURSEMENT FOR PARKING/TOLLS/MIL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 60707.E4216 Date of Disbursement 05 / 11 / 2006</p> <p>Amount of Each Disbursement this Period 332.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: REIMBURSEMENT FOR PARKING/TOLLS/MIL</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Sams Club</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 1404 SW Wanamaker Rd</p> <p>City Topeka State KS Zip Code 66604-</p> <p>Purpose of Disbursement KS RELAYS EVENT SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 60707.E4219 Date of Disbursement 05 / 11 / 2006</p> <p>Amount of Each Disbursement this Period 65.80</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: KS RELAYS EVENT SUPPLIES</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) **0.00**

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: 60707.E4221 Date of Disbursement 05 / 11 / 2006	
Mailing Address 10740 Nall Ave		Amount of Each Disbursement this Period 20.56	
City Overland State KS Zip Code 66211-	Purpose of Disbursement CAMPAIGN PHONE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN PHONE	

Full Name (Last, First, Middle Initial) B. Jim Ryun		Transaction ID: 60707.E4136 Date of Disbursement 05 / 24 / 2006	
Mailing Address 16718 Thirteenth		Amount of Each Disbursement this Period 418.35	
City Lawrence State KS Zip Code 66044-	Purpose of Disbursement SEE BELOW	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW	

Full Name (Last, First, Middle Initial) C. Congressional Club		Transaction ID: 60707.E4174 Date of Disbursement 05 / 24 / 2006	
Mailing Address 2001 New Hampshire Ave NW		Amount of Each Disbursement this Period 253.80	
City Washington State DC Zip Code 20009-	Purpose of Disbursement CAMPAIGN GIFTS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN GIFTS	

SUBTOTAL of Disbursements This Page (optional) ▶	418.35
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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial) Jim Ryun		Transaction ID: 60707.E4172 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 16718 Thirteenth		Amount of Each Disbursement this Period 141.92
City Lawrence State KS Zip Code 66044-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSE FOR PARKING/TOLLS Candidate Name		[MEMO ITEM] MEMO: REIMBURSE FOR PARKING/TOLLS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Jim Ryun		Transaction ID: 60707.E4137 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 16718 Thirteenth		Amount of Each Disbursement this Period 228.28
City Lawrence State KS Zip Code 66044-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW Candidate Name		SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) AT&T		Transaction ID: 60707.E4181 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address PO Box 930170		Amount of Each Disbursement this Period 70.23
City Dallas State TX Zip Code 75393-0170	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN PHONE Candidate Name		[MEMO ITEM] MEMO: CAMPAIGN PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	228.28
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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. COSTCO Wholesale		Transaction ID: 60707.E4177 Date of Disbursement 06 / 15 / 2006
Mailing Address 1200 S Fern		Amount of Each Disbursement this Period 78.53
City Arlington State VA Zip Code 22202-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN SUPPLIES	Category/Type	[MEMO ITEM] MEMO: CAMPAIGN SUPPLIES
Candidate Name	Disbursement For: <input 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:		

Full Name (Last, First, Middle Initial) B. MCI		Transaction ID: 60707.E4180 Date of Disbursement 06 / 15 / 2006
Mailing Address PO Box 52251		Amount of Each Disbursement this Period 16.15
City Phoenix State AZ Zip Code 85072-2251	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN PHONE	Category/Type	[MEMO ITEM] MEMO: CAMPAIGN PHONE
Candidate Name	Disbursement For: <input 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:		

Full Name (Last, First, Middle Initial) C. McDonalds		Transaction ID: 60707.E4176 Date of Disbursement 06 / 15 / 2006
Mailing Address 2001 N Topeka		Amount of Each Disbursement this Period 5.65
City Topeka State KS Zip Code 66608-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN MEALS	Category/Type	[MEMO ITEM] MEMO: CAMPAIGN MEALS
Candidate Name	Disbursement For: <input 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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. US Postmaster		Transaction ID: 60707.E4182 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 1430 SW Woodhull St.		Amount of Each Disbursement this Period 5.00
City Topeka State KS Zip Code 66604-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN POSTAGE	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jim Ryun		Transaction ID: 60707.E4175 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 16718 Thirteenth		Amount of Each Disbursement this Period 10.00
City Lawrence State KS Zip Code 66044-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSE FOR PARKING/TOLLS	Candidate Name	[MEMO ITEM] MEMO: REIMBURSE FOR PARKING/TOLLS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: 60707.E4178 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 10740 Nall Ave		Amount of Each Disbursement this Period 25.72
City Overland State KS Zip Code 66211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN PHONE	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

A. Full Name (Last, First, Middle Initial) Jim Ryun		Transaction ID: 60707.E4282 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 16718 Thirteenth		Amount of Each Disbursement this Period 550.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lawrence State KS Zip Code 66044-	SEE BELOW	
Purpose of Disbursement SEE BELOW Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) AT&T		Transaction ID: 60707.E4283 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address PO Box 930170		Amount of Each Disbursement this Period 62.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75393-0170	[MEMO ITEM] MEMO: CAMPAIGN PHONE	
Purpose of Disbursement CAMPAIGN PHONE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Hereford House		Transaction ID: 60707.E4290 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 4931 W 6th Street		Amount of Each Disbursement this Period 27.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lawrence State KS Zip Code 66049-	[MEMO ITEM] MEMO: CAMPAIGN MEAL	
Purpose of Disbursement CAMPAIGN MEAL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	550.54
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)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Old Hickory Golf Club		Transaction ID: 60707.E4285 Date of Disbursement 06 / 26 / 2006
Mailing Address 4600 Asdee Ln		Amount of Each Disbursement this Period 91.25
City Woodbridge State VA Zip Code 22192-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LUNCH FOR GOLF EVENT	<input type="checkbox"/> Category/Type	[MEMO ITEM] MEMO: LUNCH FOR GOLF EVENT
Candidate Name	Disbursement For: <input 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:	

Full Name (Last, First, Middle Initial) B. Jim Ryun		Transaction ID: 60707.E4291 Date of Disbursement 06 / 26 / 2006
Mailing Address 16718 Thirteenth		Amount of Each Disbursement this Period 14.00
City Lawrence State KS Zip Code 66044-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSE FOR CAB TIPS	<input type="checkbox"/> Category/Type	[MEMO ITEM] MEMO: REIMBURSE FOR CAB TIPS
Candidate Name	Disbursement For: <input 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:	

Full Name (Last, First, Middle Initial) C. Jim Ryun		Transaction ID: 60707.E4286 Date of Disbursement 06 / 26 / 2006
Mailing Address 16718 Thirteenth		Amount of Each Disbursement this Period 49.84
City Lawrence State KS Zip Code 66044-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSE FOR MILEAGE (GOLF EVENT)	<input type="checkbox"/> Category/Type	[MEMO ITEM] MEMO: REIMBURSE FOR MILEAGE (GOLF EVENT)
Candidate Name	Disbursement For: <input 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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. White House Mess Unit Fund		Transaction ID: 60707.E4288 Date of Disbursement 06 / 26 / 2006	
Mailing Address 1600 Pennsylvania		Amount of Each Disbursement this Period 210.00	
City Washington State DC Zip Code 20502-	Purpose of Disbursement CAMPAIGN GIFT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN GIFT	

Full Name (Last, First, Middle Initial) B. Ned Ryun		Transaction ID: 60707.E4122 Date of Disbursement 04 / 25 / 2006	
Mailing Address 132 D Street SE		Amount of Each Disbursement this Period 853.50	
City Washington State DC Zip Code 20003-	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL	

Full Name (Last, First, Middle Initial) C. Ned Ryun		Transaction ID: 60707.E4163 Date of Disbursement 05 / 26 / 2006	
Mailing Address 132 D Street SE		Amount of Each Disbursement this Period 853.50	
City Washington State DC Zip Code 20003-	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL	

SUBTOTAL of Disbursements This Page (optional) ▶	1707.00
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)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Ned Ryun		Transaction ID: 60707.E4292 Date of Disbursement 06 / 26 / 2006
Mailing Address 132 D Street SE		Amount of Each Disbursement this Period 853.50
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL	Category/ Type	PAYROLL
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Susan B Anthony List Candidate Fund		Transaction ID: 60707.C7780IK Date of Disbursement 05 / 22 / 2006
Mailing Address 1420 King Street Ste 550		Amount of Each Disbursement this Period 1230.10
City Alexandria State VA Zip Code 22314-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SOLICITATION	Category/ Type	IN KIND: SOLICITATION
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Susan B Anthony List Candidate Fund		Transaction ID: 60901.C8175IK Date of Disbursement 05 / 30 / 2006
Mailing Address 1420 King Street Ste 550		Amount of Each Disbursement this Period 23.34
City Alexandria State VA Zip Code 22314-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement	Category/ Type	IN KIND:
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2106.94
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)
Jim Ryun for Congress

A. SBC Full Name (Last, First, Middle Initial) Mailing Address 12851 Manchester Rd, 2nd floor City Saint Louis State MO Zip Code 63131- Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4099 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6 Amount of Each Disbursement this Period 86.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN PHONE
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B. SBC Full Name (Last, First, Middle Initial) Mailing Address 12851 Manchester Rd, 2nd floor City Saint Louis State MO Zip Code 63131- Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4104 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 77.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN PHONE
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C. Secretary of State Full Name (Last, First, Middle Initial) Mailing Address 120 SW 10TH AVE Memorial Hall City Topeka State KS Zip Code 66612- Purpose of Disbursement FILLING FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4165 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 1641.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FILLING FEES
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SUBTOTAL of Disbursements This Page (optional) ▶	1805.33
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)
Jim Ryun for Congress

A. Target Full Name (Last, First, Middle Initial) Mailing Address 2120 SW Wanamaker City Topeka State KS Zip Code 66614- Purpose of Disbursement OFFICE/CLEANING SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4279 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 88.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE/CLEANING SUPPLIES
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B. Heather Tiffany Full Name (Last, First, Middle Initial) Mailing Address 7399 Luke Ave #b City Elmendorf Afb State AK Zip Code 99506- Purpose of Disbursement REIMBURSEMENT FOR TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4153 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 368.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 REIMBURSEMENT FOR TRAVEL
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C. Verizon Full Name (Last, First, Middle Initial) Mailing Address 10740 Nall Ave City Overland State KS Zip Code 66211- Purpose of Disbursement CAMPAIGN PHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60707.E4105 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 71.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN PHONE
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SUBTOTAL of Disbursements This Page (optional) ▶	528.12
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 10740 Nall Ave

City Overland State KS Zip Code 66211-

Purpose of Disbursement
CAMPAIGN PHONE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 60707.E4138

Date of Disbursement

05 / 19 / 2006

Amount of Each Disbursement this Period

126.52

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

CAMPAIGN PHONE

SUBTOTAL of Disbursements This Page (optional)

126.52

TOTAL This Period (last page this line number only)

41045.66

**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 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Friends of Nick Reid		Transaction ID: 60707.E4156 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address PO BOX 446		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Superior State WI Zip Code 54880-	Purpose of Disbursement CONTRIBUTION FOR GENERAL 06 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. Friends of Nick Reid		Transaction ID: 60707.E4155 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address PO BOX 446		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Superior State WI Zip Code 54880-	Purpose of Disbursement CONTRIBUTION TO PRIMARY 06 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) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	2000.00