

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

STEVE RATHJE FOR CONGRESS

ADDRESS (number and street)

PO BOX 306

Check if different than previously reported. (ACC)

Marion

IA

52302

2. FEC IDENTIFICATION NUMBER ▼

C C00542316

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

IA

01

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 MM / DD / YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY 07 / 01 / 2013

through

MM / DD / YYYY 09 / 30 / 2013

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 Jennifer Newhard

Signature of Treasurer Jennifer Newhard

[Electronically Filed]

Date

MM / DD / YYYY 10 / 15 / 2013

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**STEVE RATHJE FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7658.51	111575.06
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7658.51	111575.06
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	16219.75	54693.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16219.75	54693.09
8. Cash on Hand at Close of Reporting Period (from Line 27).....	56889.71	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**STEVE RATHJE FOR CONGRESS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7200.00	109251.55
(ii) Unitemized.....	458.51	2323.51
(iii) TOTAL of contributions from individuals ▶	7658.51	111575.06
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7658.51	111575.06
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	7.74
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	7658.51	111582.80

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16219.75	54693.09
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	16219.75	54693.09

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	65450.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7658.51
25. SUBTOTAL (add Line 23 and Line 24).....	73109.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16219.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	56889.71

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

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

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jean Finnegan**

Mailing Address 3877 Green Castle Ave SW

City Oxford State IA Zip Code 52322

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

Name of Employer LL Pelling Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11AI.4336**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Gee**

Mailing Address 2397 Wright Brothers Blvd E

City Cedar Rapids State IA Zip Code 52404

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

Name of Employer G Asphalt Systems Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11AI.4401**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bernard Pattison**

Mailing Address 801 Wadena Rd

City Fayette State IA Zip Code 52142

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

Name of Employer Pattison Bros. Inc Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11AI.4324**

Amount of Each Receipt this Period  
 1000.00

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

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

4100.00

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

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

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lynda Schimberg**

Mailing Address 3111 Pinney Woods Lane SE

City Cedar Rapids State IA Zip Code 52403

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

Name of Employer housewife Occupation housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2013

**Transaction ID : SA11AI.4326**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Marvin Schumacher**

Mailing Address 420 E Main St

City Denver State IA Zip Code 50622

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

Name of Employer Schumacher Elevator Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2013

**Transaction ID : SA11AI.4338**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

3100.00

7200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Branded Apparel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2013
Mailing Address 4995 Chandler Court		Amount of Each Disbursement this Period 820.00
City Marion	State IA Zip Code 52302	
Purpose of Disbursement	Category/Type 004	<b>Transaction ID : SB17.4360</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank Hills</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2013
Mailing Address 3610 Williams Blvd. SW		Amount of Each Disbursement this Period 253.00
City Cedar Rapids	State IA Zip Code 52404	
Purpose of Disbursement	Category/Type 002	<b>Transaction ID : SB17.4351</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bank Hills</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2013
Mailing Address 3610 Williams Blvd. SW		Amount of Each Disbursement this Period 253.00
City Cedar Rapids	State IA Zip Code 52404	
Purpose of Disbursement	Category/Type 002	<b>Transaction ID : SB17.4364</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1326.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bank Hills</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 3610 Williams Blvd. SW		Amount of Each Disbursement this Period 253.00
City Cedar Rapids	State IA	
Zip Code 52404	Purpose of Disbursement 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank Hills</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2013
Mailing Address 3610 Williams Blvd. SW		Amount of Each Disbursement this Period 250.00
City Cedar Rapids	State IA	
Zip Code 52404	Purpose of Disbursement 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Taylor Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address 7707 Hampshire Ct NE		Amount of Each Disbursement this Period 500.00
City Cedar Rapids	State IA	
Zip Code 52402	Purpose of Disbursement 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1003.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Taylor Nelson</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013		
Mailing Address 7707 Hampshire Ct NE			Amount of Each Disbursement this Period 500.00		
City Cedar Rapids	State IA	Zip Code 52402	Transaction ID : SB17.4371		
Purpose of Disbursement		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Taylor Nelson</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2013		
Mailing Address 7707 Hampshire Ct NE			Amount of Each Disbursement this Period 500.00		
City Cedar Rapids	State IA	Zip Code 52402	Transaction ID : SB17.4390		
Purpose of Disbursement		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Jennifer Newhard</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2013		
Mailing Address 1721 29th Street NW			Amount of Each Disbursement this Period 500.00		
City Cedar Rapids	State IA	Zip Code 52405	Transaction ID : SB17.4368		
Purpose of Disbursement		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Newhard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2013
Mailing Address 1721 29th Street NW		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.4369</b>
City Cedar Rapids State IA Zip Code 52405	Purpose of Disbursement 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Jennifer Newhard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 1721 29th Street NW		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4370</b>
City Cedar Rapids State IA Zip Code 52405	Purpose of Disbursement 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Jennifer Newhard</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2013
Mailing Address 1721 29th Street NW		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4386</b>
City Cedar Rapids State IA Zip Code 52405	Purpose of Disbursement 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Allegra Printing and Imaging</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2013
Mailing Address 3939 16th Ave SW		Amount of Each Disbursement this Period 678.72
City Cedar Rapids	State IA	
Zip Code 52404	Purpose of Disbursement 003	<b>Transaction ID : SB17.4349</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Allegra Printing and Imaging</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2013
Mailing Address 3939 16th Ave SW		Amount of Each Disbursement this Period 55.21
City Cedar Rapids	State IA	
Zip Code 52404	Purpose of Disbursement 003	<b>Transaction ID : SB17.4363</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Allegra Printing and Imaging</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2013
Mailing Address 3939 16th Ave SW		Amount of Each Disbursement this Period 802.39
City Cedar Rapids	State IA	
Zip Code 52404	Purpose of Disbursement 003	<b>Transaction ID : SB17.4373</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1536.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Steve Rathje</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2013
Mailing Address PO Box 9361		Amount of Each Disbursement this Period 1017.91 <b>Transaction ID : SB17.4365</b>
City Cedar Rapids	State IA	
Zip Code 52409	Purpose of Disbursement 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Steve Rathje</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2013
Mailing Address PO Box 9361		Amount of Each Disbursement this Period 506.93 <b>Transaction ID : SB17.4381</b>
City Cedar Rapids	State IA	
Zip Code 52409	Purpose of Disbursement 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Steve Rathje</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address PO Box 9361		Amount of Each Disbursement this Period 406.40 <b>Transaction ID : SB17.4391</b>
City Cedar Rapids	State IA	
Zip Code 52409	Purpose of Disbursement 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1931.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 14
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Precision Signz</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2013
Mailing Address 1055 Valley Dr.		Amount of Each Disbursement this Period 1450.00
City Bettendorf	State IA Zip Code 52722	
Purpose of Disbursement	Category/Type 004	<b>Transaction ID : SB17.4400</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Doug Wagner</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address 654 Grant Wood Drive SE		Amount of Each Disbursement this Period 1250.00
City Cedar Rapids	State IA Zip Code 52403	
Purpose of Disbursement	Category/Type 001	<b>Transaction ID : SB17.4352</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Doug Wagner</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2013
Mailing Address 654 Grant Wood Drive SE		Amount of Each Disbursement this Period 2500.00
City Cedar Rapids	State IA Zip Code 52403	
Purpose of Disbursement	Category/Type 001	<b>Transaction ID : SB17.4367</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STEVE RATHJE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Doug Wagner</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013		
Mailing Address 654 Grant Wood Drive SE			Amount of Each Disbursement this Period 1250.00		
City Cedar Rapids	State IA	Zip Code 52403	Transaction ID : SB17.4389		
Purpose of Disbursement		001 Category/Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Doug Wagner</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2013		
Mailing Address 654 Grant Wood Drive SE			Amount of Each Disbursement this Period 1250.00		
City Cedar Rapids	State IA	Zip Code 52403	Transaction ID : SB17.4397		
Purpose of Disbursement		001 Category/Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code			
Purpose of Disbursement					
Candidate Name		Category/Type			
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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	15996.56