

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Jobs, Opportunity and New Ideas PAC

ADDRESS (number and street) 500 CUMMINGS CENTER SUITE 4400  
C/O RED CURVE SOLUTION  
BEVERLY MA 01915

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00566851

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

### 4. TYPE OF REPORT

- (a) Quarterly Reports:
  - April 15 Quarterly Report (Q1)
  - July 15 Quarterly Report (Q2)
  - October 15 Quarterly Report (Q3)
  - January 31 Year-End Report (YE)
  - July 31 Mid-Year Report (Non-election Year Only) (MY)
  - Termination Report (TER)

- (b) Monthly Report Due On:
  - Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 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 [ ]

- (d) 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 / 2014 through [MM] / [DD] / [YYYY] 09 / 30 / 2014

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 BRUCE NILSON

Signature of Treasurer BRUCE NILSON [Electronically Filed] Date 10 / 15 / 2014

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Jobs, Opportunity and New Ideas PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="15671.65"/>	<input type="text" value="15671.65"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="15671.65"/>	<input type="text" value="15671.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8000.00"/>	<input type="text" value="8000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7671.65"/>	<input type="text" value="7671.65"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Jobs, Opportunity and New Ideas PAC

Report Covering the Period: From: 07 / 01 / 2014 To: 09 / 30 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	15671.65	15671.65
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	15671.65	15671.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15671.65	15671.65

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4000.00	4000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4000.00	4000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	4000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8000.00	8000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	8000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4000.00	4000.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4000.00	4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Jobs, Opportunity and New Ideas PAC**

**A. ALICE BUTLER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 S. GRAND VIEW

City DUBUQUE	State IA	Zip Code 52003
-----------------	-------------	-------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2014

**Transaction ID : SA12.4119**

Amount of Each Receipt this Period  

5000.00
---------

**JFC TRANSFER - ERNST VICTORY FUND**

**[MEMO ITEM]**

**B. JOHN BUTLER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 S. GRAND VIEW

City DUBUQUE	State IA	Zip Code 52003
-----------------	-------------	-------------------

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

Name of Employer CUTTINGHAM AND BUTLER	Occupation EXECTUTIVE CHAIRMAN
---	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2014

**Transaction ID : SA12.4121**

Amount of Each Receipt this Period  

5000.00
---------

**JFC TRANSFER - ERNST VICTORY FUND**

**[MEMO ITEM]**

**C. ERNST VICTORY FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 CUMMINGS CENTER SUITE 4400  
C/O RED CURVE SOLUTIONS

City BEVERLY	State MA	Zip Code 01915
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00566984

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 172.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2014

**Transaction ID : SA12.4109**

Amount of Each Receipt this Period  

172.80
--------

**JFC TRANSFER - SEE MEMO ATTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	172.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**Jobs, Opportunity and New Ideas PAC**

**A. ERNST VICTORY FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 CUMMINGS CENTER SUITE 4400  
 C/O RED CURVE SOLUTIONS  
 City BEVERLY State MA Zip Code 01915  
 FEC ID number of contributing federal political committee. **C** C00566984  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 8408.01

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA12.4108**  
 Amount of Each Receipt this Period  
 8235.21  
 JFC TRANSFER - SEE MEMO ATTRIBUTION

**B. ERNST VICTORY FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 CUMMINGS CENTER SUITE 4400  
 C/O RED CURVE SOLUTIONS  
 City BEVERLY State MA Zip Code 01915  
 FEC ID number of contributing federal political committee. **C** C00566984  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 15671.65

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA12.4138**  
 Amount of Each Receipt this Period  
 7263.64  
 JFC TRANSFER - SEE MEMO ATTRIBUTION

**C. MICHAEL HUMES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2711 EAGLE HEIGHTS COURT  
 City BETTENDORF State IA Zip Code 52722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 19 / 2014  
**Transaction ID : SA12.4123**  
 Amount of Each Receipt this Period  
 200.00  
 JFC TRANSFER - ERNST VICTORY FUND  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15498.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Jobs, Opportunity and New Ideas PAC**

**A. JAMES STANARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 LINDEN LANE

City CHATHAM State NJ Zip Code 07928

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA12.4150**

Amount of Each Receipt this Period  
 5000.00

JFC TRANSFER - ERNST VICTORY FUND

**[MEMO ITEM]**

**B. JANET STANARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 LINDEN LANE

City CHATHAM State NJ Zip Code 07928

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA12.4139**

Amount of Each Receipt this Period  
 5000.00

JFC TRANSFER - ERNST VICTORY FUND

**[MEMO ITEM]**

**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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15671.65

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Jobs, Opportunity and New Ideas PAC**

Full Name (Last, First, Middle Initial)

**A. NEW STRATEGIES GROUP**

Mailing Address 3923 BYRON STREET

City HOUSTON State TX Zip Code 77005

Purpose of Disbursement  
STRATEGY CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

Transaction ID : **SB21B.4147**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. RED CURVE SOLUTIONS**

Mailing Address 500 CUMMINGS CENTER  
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

Transaction ID : **SB21B.4143**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. VENIBLE LLP**

Mailing Address PO BOX 62727

City BALTIMORE State MD Zip Code 21264

Purpose of Disbursement  
LEGAL CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

Transaction ID : **SB21B.4148**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Jobs, Opportunity and New Ideas PAC**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement  
CANDIDATE CONTRIBUTION

011

Candidate Name  
**RODNEY LELAND BLUM**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IA District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.4135

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. KING FOR CONGRESS**

Mailing Address 202 W 2ND ST.  
PO BOX 398

City WALL LAKE State IA Zip Code 51466

Purpose of Disbursement  
CANDIDATE CONTRIBUTION

011

Candidate Name  
**STEVE MR. KING**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IA District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.4137

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MILLER-MEEKS FOR CONGRESS**

Mailing Address P.O. BOX 1570

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement  
CANDIDATE CONTRIBUTION

011

Candidate Name  
**MARIANNETTE JANE MILLER-MEEKS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IA District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.4136

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Jobs, Opportunity and New Ideas PAC**

Full Name (Last, First, Middle Initial)

**A. YOUNG FOR IOWA, INC.**

Mailing Address PO BOX 162

City VAN METER State IA Zip Code 50261

Purpose of Disbursement  
CANDIDATE CONTRIBUTION

Candidate Name  
**DAVID YOUNG**

Office Sought:  House  
 Senate  
 President  
State: IA District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SB23.4134**

Amount of Each Disbursement this Period

<input type="text" value="1000.00"/>
--------------------------------------

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

<input type="text"/>
----------------------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

<input type="text"/>
----------------------

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

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

<input type="text" value="1000.00"/>
--------------------------------------

<input type="text" value="4000.00"/>
--------------------------------------