

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

Schultz for Iowa

ADDRESS (number and street)

PO Box 3522

Check if different than previously reported. (ACC)

Urbandale

IA

50323

2. FEC IDENTIFICATION NUMBER ▼

C C00556001

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IA

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

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2014

through

M M / D D / Y Y Y Y
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 David Overholtzer

Signature of Treasurer David Overholtzer

[Electronically Filed]

Date

M M / D D / Y Y Y Y
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.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Schultz for Iowa

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

	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))....	0.00	287169.57
(b) Total Contribution Refunds (from Line 20(d))	1500.00	2520.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-1500.00	284649.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5482.19	282964.25
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	19.08
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5482.19	282945.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1704.40	
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 12/2003)

Write or Type Committee Name

Schultz for Iowa

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).....	0.00	221355.00
(ii) Unitemized.....	0.00	37440.71
(iii) TOTAL of contributions from individuals ▶	0.00	258795.71
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	28373.86
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	287169.57
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	19.08
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	287188.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5482.19	282964.25
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	1500.00	2520.00
(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)).....	1500.00	2520.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6982.19	285484.25

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8686.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	8686.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6982.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1704.40

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N
Transaction ID :

Form/Schedule:
Transaction ID:

**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 6 OF 11			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Schultz for Iowa

Full Name (Last, First, Middle Initial) A. Joshua A. Treat		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 3522		Amount of Each Disbursement this Period 300.00 Transaction ID : BAA68DB9B68A148D6BE3
City Urbandale	State IA	
Zip Code 50323-0522	Purpose of Disbursement Management Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

Full Name (Last, First, Middle Initial) B. IRS		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address Internal Revenue Service Center		Amount of Each Disbursement this Period 568.01 Transaction ID : B3D1E198F2B1249D2998
City Fresno	State CA	
Zip Code 93888-0001	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

Full Name (Last, First, Middle Initial) c. Nolan Bursch		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1134 Cummins Pkwy		Amount of Each Disbursement this Period 332.76 Transaction ID : B94D1F1F938144DE9975
City Des Moines	State IA	
Zip Code 50311-2117	Purpose of Disbursement Mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1200.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Schultz for Iowa

Full Name (Last, First, Middle Initial) A. Mark Schultz		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 528 29th St		Amount of Each Disbursement this Period 230.14 Transaction ID : B019DB889FD604B7D930
City Des Moines	State IA Zip Code 50317-2351	
Purpose of Disbursement Mileage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) B. IA Workforce Development		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1000 East Grand Ave		Amount of Each Disbursement this Period 290.75 Transaction ID : BDA5749C162CA4595AD9
City Des Moines	State IA Zip Code 50319-1007	
Purpose of Disbursement Unemployment Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 2135 NW 108th St		Amount of Each Disbursement this Period 45.00 Transaction ID : B6AA7F2C27CE04C8685A
City Clive	State IA Zip Code 50325-3830	
Purpose of Disbursement Stamps	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	565.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11			
	<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)
Schultz for Iowa

Full Name (Last, First, Middle Initial) A. Treasurer, State of Iowa		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 10466		Amount of Each Disbursement this Period 1029.00 Transaction ID : B83F28DC5B0DF4CBF9CE
City Des Moines	State IA	
Zip Code 50306-0466	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

Full Name (Last, First, Middle Initial) B. Boy Scouts Troop 100		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 6123 Scout Trail		Amount of Each Disbursement this Period 500.00 Transaction ID : B784B4E4DC52F4BDF914
City Des Moines	State IA	
Zip Code 50321-1601	Purpose of Disbursement Community Outreach	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

Full Name (Last, First, Middle Initial) c. Matt Schultz		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address PO Box 3522		Amount of Each Disbursement this Period 415.01 Transaction ID : B30B523AADC72474FA44
City Urbandale	State IA	
Zip Code 50323-0522	Purpose of Disbursement Mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1944.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11			
	<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)
Schultz for Iowa

Full Name (Last, First, Middle Initial) A. Mark Schultz		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 528 29th St		Amount of Each Disbursement this Period 600.32 Transaction ID : BFFDCF5F9D4444ACA987
City Des Moines	State IA Zip Code 50317-2351	
Purpose of Disbursement Mileage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Peoples Trust & Savings Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 12701 University Ave		Amount of Each Disbursement this Period 10.60 Transaction ID : B25C9537B09E14D27B71
City Clive	State IA Zip Code 50325-8246	
Purpose of Disbursement Bank Charges	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Young for Iowa, Inc		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address PO Box 162		Amount of Each Disbursement this Period 1150.00 Transaction ID : B8C9CEDED1625344569F0
City Van Meter	State IA Zip Code 50261-0162	
Purpose of Disbursement Contribution	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1760.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 11			
	<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)
Schultz for Iowa

Full Name (Last, First, Middle Initial) A. Peoples Trust & Savings Bank			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 12701 University Ave			Amount of Each Disbursement this Period 10.60 Transaction ID : B097249209FBA40EDAB2
City Clive	State IA	Zip Code 50325-8246	
Purpose of Disbursement Bank Charges		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State:	District:		

Full Name (Last, First, Middle Initial) 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		Category/ Type	
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.			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		Category/ Type	
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).....	10.60
TOTAL This Period (last page this line number only).....	5482.19

**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 11			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schultz for Iowa

Full Name (Last, First, Middle Initial) A. Andrew Flynn		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 3611 Caulder Ave		Amount of Each Disbursement this Period 1500.00 Transaction ID : BAB9EE68DC8FA4335B6C
City Des Moines	State IA Zip Code 50321-1843	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
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).....	1500.00
TOTAL This Period (last page this line number only).....	1500.00