

# 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  
King for Congress

ADDRESS (number and street) PO Box 398  
202 W 2nd St  
Wall Lake IA 51466-0398  
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C C00373563 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 04 / 01 / 2015 through M M / D D / Y Y Y Y 06 / 30 / 2015

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 Craig Williams  
Signature of Treasurer Craig Williams [Electronically Filed] Date M M / D D / Y Y Y Y 07 / 15 / 2015

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  
**King for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	90692.49	145242.29
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	90692.49	145142.29
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	111107.78	280228.68
(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)).....	111107.78	280228.68
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	73600.99	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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

**King for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	26243.00	44664.00
(ii) Unitemized.....	52949.49	80078.29
(iii) TOTAL of contributions from individuals ▶	79192.49	124742.29
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	11500.00	20500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	90692.49	145242.29
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	724.95	3605.39
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	91417.44	148847.68

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	111107.78	280228.68
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	100.00
(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	100.00
21. OTHER DISBURSEMENTS .....	2500.00	9500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	113607.78	289828.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	95791.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	91417.44
25. SUBTOTAL (add Line 23 and Line 24).....	187208.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	113607.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	73600.99

**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 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jim Vollmer**

Mailing Address 504 6th St. SW

City Spencer	State IA	Zip Code 51301-6243
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FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation Self
-----------------------	--------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2015

**Transaction ID : A4ACE1F6E504D4750A42**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. George Gourley**

Mailing Address 3156 Briggs Woods Rd.

City Stanhope	State IA	Zip Code 50246-7550
------------------	-------------	------------------------

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

Name of Employer self	Occupation Farmer
-----------------------	----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : AB80A695D1D224876BC0**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Augusta H. Petrone**

Mailing Address PO Box 1037

City Dublin	State NH	Zip Code 03444-1037
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Teacher
----------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : AA7EBD85000B54DB293F**

Amount of Each Receipt this Period  
550.00

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

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

750.00

**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 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

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

Mailing Address 418 Oak Tree Rd.

City Manheim State PA Zip Code 17545-9406

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

Name of Employer self Occupation construction

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2015

**Transaction ID : ABFCF76CA66734F64999**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William D Swaim TTEE**

Mailing Address 1400 Maxhelen Blvd  
Apt 1301

City Waterloo State IA Zip Code 50701-9567

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2015

**Transaction ID : A4CB7EC578DE64E12909**

Amount of Each Receipt this Period  
**300.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Delmar E. Spronk**

Mailing Address 1427 Elm Ct

City Sheldon State IA Zip Code 51201-1828

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

Name of Employer Drs. Spronk, Vander Griend & Radke Occupation Optometrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2015

**Transaction ID : A2F523B75DAD248E9AA1**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John L Brouillard**

Mailing Address 374 Stilson Canyon Rd

City Chico	State CA	Zip Code 95928-9117
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2015

**Transaction ID : A2B891DAE08C3424F8FF**

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Patricia C. Rosenberg**

Mailing Address 1924 Pinehurst Ln

City Waterloo	State IA	Zip Code 50701-4512
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FEC ID number of contributing federal political committee. **C**

Name of Employer Waterloo CS District	Occupation Teacher
--	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2015

**Transaction ID : A09A80B6268534A569F9**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Frank J Rose**

Mailing Address 904 Country Club Dr.

City Spencer	State IA	Zip Code 51301
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2015

**Transaction ID : A74BB2C5224F8435CAC2**

Amount of Each Receipt this Period  
100.00

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

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

675.00

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

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

FOR LINE NUMBER: PAGE 8 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert W Eason**

Mailing Address 819 220th St.

City State Zip Code  
Scranton IA 51462

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

Name of Employer self Occupation farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : AC285CFB2C02540CF800**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John A Paul**

Mailing Address 40962 Brothers Ave

City State Zip Code  
Henderson IA 51541-4048

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

Name of Employer Western Iowa Mutual Insurance Occupation manager/president

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2015

**Transaction ID : AD8E52D1BB3844D908FB**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1405 N Shore Dr

City State Zip Code  
Clear Lake IA 50428-1237

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

Name of Employer Sukup Manufacturing Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A7EFD FCC8771E47DA8B1**

Amount of Each Receipt this Period  
1000.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James C Carter Jr.**

Mailing Address 8424 Paseo Del Ocaso

City La Jolla State CA Zip Code 92037-3023

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2015**

**Transaction ID : A60CECB4B42B54D6B93D**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Roby Larson**

Mailing Address 3305 SE Glenstone Dr. Unit 213  
Unit 213

City Grimes State IA Zip Code 50111-5076

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

Name of Employer self Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 06 / 2015**

**Transaction ID : AFF5A46820B4C4F479B1**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 5465 Mills Civic Pkwy  
Ste 400

City West Des Moines State IA Zip Code 50266-5321

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

Name of Employer Kirke Financial Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 23 / 2015**

**Transaction ID : AE4A8673F45474A4490D**

Amount of Each Receipt this Period  
**100.00**

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

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

**450.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Darin Massner**

Mailing Address 4784 545th Ave

City WEST BEND State IA Zip Code 50597-8030

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

Name of Employer Country Maid, Inc Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 09 / 2015**

**Transaction ID : AFBF7E356516F45A0A42**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David P Beeck**

Mailing Address 3917 110th St.

City Miles State IA Zip Code 52064-9615

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 15 / 2015**

**Transaction ID : AEDE2AC5EEB58404E8BB**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2064 Republic Ave. W

City Monroe State IA Zip Code 50170-8706

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

Name of Employer self Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 20 / 2015**

**Transaction ID : A23D6100FA5E44C50809**

Amount of Each Receipt this Period  
**250.00**

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

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

**450.00**

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

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

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

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Eric Kopp**

Mailing Address 724 Duncan St

City State Zip Code  
Gallatin TN 37066-3516

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2015

**Transaction ID : A162FDC9466004E45A2E**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James C Carter Jr.**

Mailing Address 8424 Paseo Del Ocaso

City State Zip Code  
La Jolla CA 92037-3023

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 11 / 2015

**Transaction ID : A3153A12056414B27A87**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 32400 Wildwood Dr

City State Zip Code  
Adel IA 50003-8606

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

Name of Employer Occupation  
Toyota of Des Moines Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 09 / 2015

**Transaction ID : A712205370B34405FB4E**

Amount of Each Receipt this Period  
1000.00

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

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

1550.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 61

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NAME OF COMMITTEE (In Full)  
**King for Congress**

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

Mailing Address 700 NE 4th St

City State Zip Code  
Grimes IA 50111-8779

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

Name of Employer Occupation  
Sogeti LLC It Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : AEB922AC3D9B642CB981**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Rod B Laidler**

Mailing Address 109 Circle Dr

City State Zip Code  
Lake City IA 51449-1430

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

Name of Employer Occupation  
self Auctioneer/Farmer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2015

**Transaction ID : A65E7C547C4D24A83B93**

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James O Andrew**

Mailing Address 1227 Rushridge Road

City State Zip Code  
Jefferson IA 50129-2306

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

Name of Employer Occupation  
Andrew Farms, Inc. Farmer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
475.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A19B6FD7F727A4B65AA1**

Amount of Each Receipt this Period  
 300.00

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

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

700.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**King for Congress**

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

Mailing Address 302 Little John Rd

City Estherville State IA Zip Code 51334-1878

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

Name of Employer NorthStar Bank Occupation Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : A310DD1E9C1C944B8B84**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Eric Kopp**

Mailing Address 724 Duncan St

City Gallatin State TN Zip Code 37066-3516

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2015

**Transaction ID : A704E150EE8F8481693D**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William B Hotaling**

Mailing Address 125 Quassaick Ave.

City New Windsor State NY Zip Code 12553-6635

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2015

**Transaction ID : A1B727AB767D34612A1C**

Amount of Each Receipt this Period  
 500.00

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

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

1050.00

**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 14 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Duane J. Bundt**

Mailing Address 30278 170th Street

City State Zip Code  
Glidden IA 51443

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

Name of Employer Occupation  
Self Employed Farming

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 07 / 2015

**Transaction ID : ABAA11727F9DF4C2F997**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Christensen**

Mailing Address 9801 Hollow Tree Dr

City State Zip Code  
Lincoln NE 68512-9539

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

Name of Employer Occupation  
Joe Christensen, Inc. Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 09 / 2015

**Transaction ID : A3116F622E3024DFFA8F**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Wesley R Fiala TTEE**

Mailing Address 16954 200th St.  
Wesley R. Fiala Rev Trst

City State Zip Code  
Mason City IA 50401-9019

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 08 / 2015

**Transaction ID : A94968C8F1F8340FAA74**

Amount of Each Receipt this Period  
300.00

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

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

850.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Rasch**

Mailing Address 1834 Johnson Ave

City State Zip Code  
Fort Dodge IA 50501-8572

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

Name of Employer Occupation  
Rasch Farms Farmer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
256.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A1BC1F68140AE40F180F**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Frank A Vanden Berg**

Mailing Address 904 9th St.

City State Zip Code  
Sheldon IA 51201-2025

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

Name of Employer Occupation  
self Truck Driver

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 11 / 2015

**Transaction ID : ADFEE8CF1613D49AE84A**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1075 Castlerock Ln.

City State Zip Code  
N. Tustin CA 92705-2070

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

Name of Employer Occupation  
self Real Estate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2015

**Transaction ID : ADD756C1AC84946FABD7**

Amount of Each Receipt this Period  
200.00

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

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

725.00

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

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

FOR LINE NUMBER: PAGE 16 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan V Brunoff**

Mailing Address 334 W Cedar St.

City State Zip Code  
New Holland PA 17557-1202

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2015

**Transaction ID : AF6AF76686FA84800AE3**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Malloy**

Mailing Address PO Box 128

City State Zip Code  
Goldfield IA 50542-0128

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

Name of Employer Occupation  
self Lawyer/Farmer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : AE9D2774AEED3480D983**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Roger R. Heckathorn**

Mailing Address 904 7th Ave

City State Zip Code  
Alton IA 51003-8535

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

Name of Employer Occupation  
Dejong Oil & Repair Inc Mechanic

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : A2B0C7FD317D64941A76**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 17 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Harry J Vanderpol**

Mailing Address 3858 Kingbird Ave

City State Zip Code  
Hospers IA 51238-8052

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2015

**Transaction ID : ACCF3B45674E24D48804**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5040 Glenbrook Terrace NW

City State Zip Code  
Washington DC 20016-2602

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

Name of Employer Occupation  
self Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A7FBF482BF4F043C79B6**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan V Brunoff**

Mailing Address 334 W Cedar St.

City State Zip Code  
New Holland PA 17557-1202

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015

**Transaction ID : AE348505E9BEB4B1BA7D**

Amount of Each Receipt this Period  
50.00

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 18 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wesley R Fiala TTEE**

Mailing Address 16954 200th St.  
Wesley R. Fiala Rev Trst

City Mason City State IA Zip Code 50401-9019

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 11 / 2015**

**Transaction ID : AB13543B3F38A4D69BED**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John C Vander Haag**

Mailing Address PO Box 550  
408 Sunrise Ave

City Sanborn State IA Zip Code 51248-0550

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 05 / 2015**

**Transaction ID : AF6B3389C13D14EB998F**

Amount of Each Receipt this Period  
**750.00**

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

Mailing Address 2404 Manhattan Boulevard

City Spirit Lake State IA Zip Code 51360-7544

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

Name of Employer G.M. Jensen Company Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 08 / 2015**

**Transaction ID : AB31EB4DD571F4FDF9EB**

Amount of Each Receipt this Period  
**2700.00**

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

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

**3600.00**

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

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

FOR LINE NUMBER: PAGE 19 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Donald J Ewing**

Mailing Address 9 S Watch Rd

City Meredith State NH Zip Code 03253-5641

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 10 / 2015**

**Transaction ID : AB40927FCE9ED4C8B951**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Jane D Rogers**

Mailing Address 605 Cherry Ave.

City New Providence State IA Zip Code 50206-8081

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2015**

**Transaction ID : A9C26953250A645AFB8E**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address 1008 NW Rolling Rock Road

City Ankeny State IA Zip Code 50023-6002

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

Name of Employer Barton Solvents, Inc. Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 26 / 2015**

**Transaction ID : AE973B865097B435999F**

Amount of Each Receipt this Period  
**1500.00**

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

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

**1675.00**

**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 20 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Arnold Winter**

Mailing Address 118 N 7th Ave.

City Sheldon State IA Zip Code 51201-0250

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2015

**Transaction ID : A64D6575823BF4B53A5D**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jo Ann Baughman**

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370-1269

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **365.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2015

**Transaction ID : A1EC11F454A6E447C99D**

Amount of Each Receipt this Period  
**33.00**

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

Mailing Address 1357 Obanion Rd.

City Dunlap State IA Zip Code 51529-4115

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2015

**Transaction ID : A94F86F320C284AC08E5**

Amount of Each Receipt this Period  
**100.00**

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

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

**233.00**

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

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

FOR LINE NUMBER: PAGE 21 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Clarence Hoffman**

Mailing Address 616 Parkview Drive

City Denison State IA Zip Code 51442-1224

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

Name of Employer self Occupation Insurance Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2015

**Transaction ID : A90DB555F5E8248C9801**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Milo I Noble**

Mailing Address 1304 Greta St

City Cherokee State IA Zip Code 51012-2210

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2015

**Transaction ID : A0DC86F5FEA334BA5BB0**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1834 Johnson Ave

City Fort Dodge State IA Zip Code 50501-8572

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

Name of Employer Rasch Farms Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2015

**Transaction ID : AAB4DD5D8EF4F4EA8B21**

Amount of Each Receipt this Period  
 15.00

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

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

515.00

**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 22 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frank A Vanden Berg**

Mailing Address 904 9th St.

City Sheldon State IA Zip Code 51201-2025

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

Name of Employer self Occupation Truck Driver

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2015

**Transaction ID : A4B63F554D2D249BD8E0**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James W Cravens Sr.**

Mailing Address 2124 Manhattan Blvd

City Spirit Lake State IA Zip Code 51360-7541

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2015

**Transaction ID : ADB8F8BA7BB87469D86B**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 714 Boston Ave NE

City Orange City State IA Zip Code 51041-1114

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2015

**Transaction ID : A351D33DAFF5D464CA1B**

Amount of Each Receipt this Period  
300.00

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

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

1600.00

**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 23 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles J Schafer**

Mailing Address 4970 59th Avenue S

City Saint Petersburg State FL Zip Code 33715-1620

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

Name of Employer Agri Drain Corporation Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2015

**Transaction ID : A06BA41121517497DB56**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William B Hotaling**

Mailing Address 125 Quassaick Ave.

City New Windsor State NY Zip Code 12553-6635

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : AE0EFE65BB0B14D2A8DD**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 2404 Manhattan Boulevard

City Spirit Lake State IA Zip Code 51360-7544

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2015

**Transaction ID : AD827DD54305C4FD0A86**

Amount of Each Receipt this Period  
2700.00

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

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

5100.00

**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 24 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Rasch**

Mailing Address 1834 Johnson Ave

City Fort Dodge	State IA	Zip Code 50501-8572
--------------------	-------------	------------------------

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

Name of Employer Rasch Farms	Occupation Farmer
---------------------------------	----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**231.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2015**

**Transaction ID : A918580B1A8A045B2980**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Schmidt**

Mailing Address 2516 Ridgetop Rd

City Ames	State IA	Zip Code 50014-4563
--------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 06 / 2015**

**Transaction ID : A0051EFC31B9F476FBE2**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Larry R. Walsh**

Mailing Address 2321 Saint Anthonys Pl.

City Sioux City	State IA	Zip Code 51108-3602
--------------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 11 / 2015**

**Transaction ID : A6040D6218E094F00AFD**

Amount of Each Receipt this Period  
**500.00**

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

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

**1025.00**

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

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

FOR LINE NUMBER: PAGE 25 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Eric Kopp**

Mailing Address 724 Duncan St

City State Zip Code  
Gallatin TN 37066-3516

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2015

**Transaction ID : ABF26E592BDB24BD1B8C**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Jo Ann Baughman**

Mailing Address PO Box 1269

City State Zip Code  
Philomath OR 97370-1269

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
410.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015

**Transaction ID : A2416AB49C21C4C9A837**

Amount of Each Receipt this Period  
45.00

**C.** Full Name (Last, First, Middle Initial)  
**Wesley R Fiala TTEE**

Mailing Address 16954 200th St.  
Wesley R. Fiala Rev Trst

City State Zip Code  
Mason City IA 50401-9019

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2015

**Transaction ID : A258C435F20254A3E8EB**

Amount of Each Receipt this Period  
300.00

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

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

445.00

**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 26 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James C Carter Jr.**

Mailing Address 8424 Paseo Del Ocaso

City State Zip Code  
La Jolla CA 92037-3023

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 10 / 2015

**Transaction ID : AF4ECC71A92DC48DBBDD**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Frank A Vanden Berg**

Mailing Address 904 9th St.

City State Zip Code  
Sheldon IA 51201-2025

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

Name of Employer Occupation  
self Truck Driver

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 02 / 2015

**Transaction ID : A04BF582F183F43179AF**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 900 N 90th St  
Apt 238

City State Zip Code  
Omaha NE 68114-8806

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

Name of Employer Occupation  
Retired retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
335.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 11 / 2015

**Transaction ID : A7438AC61439C4D7ABB8**

Amount of Each Receipt this Period  
300.00

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

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

850.00

26243.00

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

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

FOR LINE NUMBER: PAGE 27 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A. Associated Builders & Contractors**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4250 Fairfax Drive  
 Floor 9  
 City State Zip Code  
 Arlington VA 22203-1665  
 FEC ID number of contributing federal political committee. **C C30001333**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : AFB25C7FE07E413688F**  
 Amount of Each Receipt this Period  
 2500.00

**B. Leadership Matters for America**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 98  
 City State Zip Code  
 Mendham NJ 07945-0098  
 FEC ID number of contributing federal political committee. **C C00571778**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 14 / 2015  
**Transaction ID : ABA60E4F4D7984752867**  
 Amount of Each Receipt this Period  
 2300.00

**C. American Veterinary Medical Association Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1910 Sunderland Place NW  
 City State Zip Code  
 Washington DC 20036-1608  
 FEC ID number of contributing federal political committee. **C C00114132**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : A01FC477C8C1141EE857**  
 Amount of Each Receipt this Period  
 1000.00

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

5800.00

**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 28 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A. Rain and Hail Insurance Society PAC**

Full Name (Last, First, Middle Initial)  
Rain and Hail Insurance Society PAC

Mailing Address 9200 Northpark Drive  
Suite 300

City Johnston State IA Zip Code 50131-3006

FEC ID number of contributing federal political committee. **C** C00279505

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2015

**Transaction ID : A22B161EBC20E4E3DAFE**

Amount of Each Receipt this Period  
 1000.00

**B. American Principles**

Full Name (Last, First, Middle Initial)  
American Principles

Mailing Address 20533 Biscayne Boulevard  
Suite 250

City Miami State FL Zip Code 33180-1529

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2015

**Transaction ID : A57D24AAE109A47A6A1C**

Amount of Each Receipt this Period  
 500.00

**C. SarahPAC**

Full Name (Last, First, Middle Initial)  
SarahPAC

Mailing Address PO Box 7711

City Arlington State VA Zip Code 22207-0711

FEC ID number of contributing federal political committee. **C** C00458588

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AAA81AE7DF01145919BC**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 29 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leadership Matters for America**

Mailing Address PO Box 98

City State Zip Code  
Mendham NJ 07945-0098

FEC ID number of contributing federal political committee. **C C00571778**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2015

**Transaction ID : A56B0612005E14BA9B51**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**United Parcel Service Inc. PAC (UPSPAC)**

Mailing Address 55 Glenlake Pkwy

City State Zip Code  
Atlanta GA 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2015

**Transaction ID : A5527686DA94445A5933**

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).....

3200.00

11500.00

**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 30 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Smart Media Group**

Mailing Address 814 King Street  
Suite 400

City Alexandria State VA Zip Code 22314-3069

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
306.84

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2015

**Transaction ID : A1B04970E3B234D2096D**

Amount of Each Receipt this Period  
306.84

Media Refund

**B.** Full Name (Last, First, Middle Initial)  
**US Post Office, DC**

Mailing Address 2000 14th Street NW  
Suite 104

City Washington State DC Zip Code 20009-5093

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
418.11

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2015

**Transaction ID : AEB1EEA1C74E44C6C9C3**

Amount of Each Receipt this Period  
418.11

Postage Refund

**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).....

724.95

724.95

**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 31 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2015</b>
Mailing Address <b>144 2nd Street Floor 1</b>		Amount of Each Disbursement this Period <b>79.72</b>
City <b>San Francisco</b>	State <b>CA</b> Zip Code <b>94105-3718</b>	
Purpose of Disbursement	<b>003</b>	<b>Transaction ID : BAED56EAD68264E369D1</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2015</b>
Mailing Address <b>3060 Williams Drive Suite 200</b>		Amount of Each Disbursement this Period <b>80.19</b>
City <b>Fairfax</b>	State <b>VA</b> Zip Code <b>22031-4642</b>	
Purpose of Disbursement <b>Payroll Processing</b>	<b>001</b>	<b>Transaction ID : B5D792EA19E8D4391A03</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mailsmart Logistics</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2015</b>
Mailing Address <b>7160 Columbia Gateway Dr.</b>		Amount of Each Disbursement this Period <b>9729.94</b>
City <b>Columbia</b>	State <b>MD</b> Zip Code <b>21046-2103</b>	
Purpose of Disbursement <b>printing &amp; mailing service</b>	<b>001</b>	<b>Transaction ID : B4A976B9B264945DA953</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>9889.85</b>
<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 32 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Global Payments</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2015</b>
Mailing Address <b>10705 Red Run Boulevard</b>		Amount of Each Disbursement this Period <b>67.04</b> <b>Transaction ID : B55B8311F91DA48289CD</b>
City <b>Owings Mills</b> State <b>MD</b> Zip Code <b>21117-5134</b>	Purpose of Disbursement <b>credit card services</b> <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 10 / 2015</b>
Mailing Address <b>777 Big Timber Road</b>		Amount of Each Disbursement this Period <b>348.87</b> <b>Transaction ID : B178CC9ABBDDDB438DA92</b>
City <b>Elgin</b> State <b>IL</b> Zip Code <b>60123-1488</b>	Purpose of Disbursement <b>cell phone service</b> <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2015</b>
Mailing Address <b>3060 Williams Drive Suite 200</b>		Amount of Each Disbursement this Period <b>93.42</b> <b>Transaction ID : B21B16970769B4E8284A</b>
City <b>Fairfax</b> State <b>VA</b> Zip Code <b>22031-4642</b>	Purpose of Disbursement <b>Payroll Processing</b> <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>509.33</b>
<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 33 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 223.10 <b>Transaction ID : B231B3F2F66104E95968</b>
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement travel	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 8.50 <b>Transaction ID : BE4F9710451374D1AB88</b>
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement travel	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 375.26 <b>Transaction ID : BA749260A04C8499CAE9</b>
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement catering	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	606.86
<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 34 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wall Lake Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 129 Center Street		Amount of Each Disbursement this Period 36.63 <b>Transaction ID : B655B486EF59E401583E</b>
City Wall Lake	State IA	
Zip Code 51466-7704	Purpose of Disbursement fuel	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mailsmart Logistics</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 7160 Columbia Gateway Dr.		Amount of Each Disbursement this Period 350.81 <b>Transaction ID : BFE524E0A43CD44D8A03</b>
City Columbia	State MD	
Zip Code 21046-2103	Purpose of Disbursement printing & mailing service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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 Brown Direct Mail, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 731 Divot Drive		Amount of Each Disbursement this Period 4042.28 <b>Transaction ID : B969BD57B39524724BB4</b>
City Fernley	State NV	
Zip Code 89408-6674	Purpose of Disbursement Fundraising Letter	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4429.72
<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 35 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Heartland Marketing Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 110 N Main Street		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : B632BFCB4F14C41E39BE</b>
City Early	State IA	
Zip Code 50535-5011		Category/ Type 001
Purpose of Disbursement marketing services		
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Patriot Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 13755 Sunrise Valley Drive Suite 450		Amount of Each Disbursement this Period 958.15 <b>Transaction ID : B51A24A0C2D9640E6920</b>
City Herndon	State VA	
Zip Code 20171-4682		Category/ Type 001
Purpose of Disbursement data management		
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Direct Concepts</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 44084 Riverside Parkway Suite 350		Amount of Each Disbursement this Period 1175.00 <b>Transaction ID : B1900DD4720074F6D81C</b>
City Lansdowne	State VA	
Zip Code 20176-6823		Category/ Type 001
Purpose of Disbursement printing & mailing services		
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4633.15
<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 36 OF 61	
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Richard Norman Company</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 22 / 2015</b>
Mailing Address <b>44084 Riverside Parkway Suite 350</b>		Amount of Each Disbursement this Period <b>7286.34</b> <b>Transaction ID : B49CC7087C0D6465C87C</b>
City <b>Lansdowne</b> State <b>VA</b> Zip Code <b>20176-6823</b>	Purpose of Disbursement <b>direct mail management</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Big Eye Direct</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 22 / 2015</b>
Mailing Address <b>13860 Redskin Drive</b>		Amount of Each Disbursement this Period <b>886.54</b> <b>Transaction ID : B332ED1605D8C46149D5</b>
City <b>Herndon</b> State <b>VA</b> Zip Code <b>20171-3208</b>	Purpose of Disbursement <b>printing &amp; mailing services</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Donor Bureau, Llc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 22 / 2015</b>
Mailing Address <b>1900 N Culpeper Street</b>		Amount of Each Disbursement this Period <b>299.86</b> <b>Transaction ID : BFEE6508CC84640888EF</b>
City <b>Arlington</b> State <b>VA</b> Zip Code <b>22207-2003</b>	Purpose of Disbursement <b>list management</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>8472.74</b>
<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 37 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Valley Press, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 22 / 2015</b>
Mailing Address <b>5 E Montgomery Avenue</b>		Amount of Each Disbursement this Period <b>955.65</b>
City <b>Bala Cynwyd</b> State <b>PA</b> Zip Code <b>19004-2331</b>	Purpose of Disbursement <b>printing</b>	<b>001</b> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Integram</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 22 / 2015</b>
Mailing Address <b>22695 Commerce Center Court</b>		Amount of Each Disbursement this Period <b>11552.37</b>
City <b>Dulles</b> State <b>VA</b> Zip Code <b>20166-2037</b>	Purpose of Disbursement <b>printing &amp; mailing</b>	<b>001</b> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Tri-State Envelope Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 22 / 2015</b>
Mailing Address <b>777 Weaver Boulevard</b>		Amount of Each Disbursement this Period <b>742.00</b>
City <b>Wapello</b> State <b>IA</b> Zip Code <b>52653</b>	Purpose of Disbursement <b>mail stationery</b>	<b>001</b> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>13250.02</b>
<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 38 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Washington Intelligence Bureau</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 4128 Pepsi Place		Amount of Each Disbursement this Period 1120.59 <b>Transaction ID : B8B0ADDCC297246DC87A</b>
City Chantilly	State VA Zip Code 20151-1501	
Purpose of Disbursement list mngmt & data entry	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wall Lake Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 129 Center Street		Amount of Each Disbursement this Period 43.68 <b>Transaction ID : B65E1DB90A80A432D8D0</b>
City Wall Lake	State IA Zip Code 51466-7704	
Purpose of Disbursement fuel	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 80.19 <b>Transaction ID : BA280546713334742812</b>
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Processing	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1244.46
<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 39 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2015</b>
Mailing Address <b>144 2nd Street Floor 1</b>		Amount of Each Disbursement this Period <b>400.30</b> <b>Transaction ID : B8880CCD2129B459BAE1</b>
City <b>San Francisco</b>	State <b>CA</b> Zip Code <b>94105-3718</b>	
Purpose of Disbursement <b>credit card fees</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2015</b>
Mailing Address <b>300 1st Street SE</b>		Amount of Each Disbursement this Period <b>117.00</b> <b>Transaction ID : B91B1CE00736D425B974</b>
City <b>Washington</b>	State <b>DC</b> Zip Code <b>20003-1801</b>	
Purpose of Disbursement <b>catering</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Host</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2015</b>
Mailing Address <b>East Capitol St NE &amp; First St SE</b>		Amount of Each Disbursement this Period <b>236.25</b> <b>Transaction ID : BA733BE6BEDB64B8A81E</b>
City <b>Washington</b>	State <b>DC</b> Zip Code <b>20004</b>	
Purpose of Disbursement <b>catering</b>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>753.55</b>
<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 40 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 77 W Wacker Drive		Amount of Each Disbursement this Period 380.10 <b>Transaction ID : B6C6C44A9EC30474C853</b>
City Chicago State IL Zip Code 60601-1604	Purpose of Disbursement travel 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 682.60 <b>Transaction ID : B1878351469B64C21944</b>
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement travel 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B8555F50C547B40408FD</b>
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement travel 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1087.70
<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 41 OF 61	
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Two Rivers Capitol Development</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 400 Locust Street Suite 330		Amount of Each Disbursement this Period 2096.17 <b>Transaction ID : B3DF72C27209F4BDE844</b>
City Des Moines State IA Zip Code 50309-2450	Purpose of Disbursement fundraising commission Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Harris Media LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 661 S Congress Avenue Suite 400		Amount of Each Disbursement this Period 2504.96 <b>Transaction ID : B938FE3146F374EDBADF</b>
City Austin State TX Zip Code 78704-1722	Purpose of Disbursement consulting & versamail Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 777 Big Timber Road		Amount of Each Disbursement this Period 342.60 <b>Transaction ID : B743B124A18064998A87</b>
City Elgin State IL Zip Code 60123-1488	Purpose of Disbursement cell phone service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4943.73
<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 42 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Budget Rent-a-car</b>		M M / D D / Y Y Y Y 05 / 12 / 2015
Mailing Address 458 Woodruff Rd		Amount of Each Disbursement this Period
City Greenville	State SC	Zip Code 29607-6608
Purpose of Disbursement car rental	Category/Type 001	
Candidate Name	Transaction ID : <b>BF44A3A62BF894A208DC</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Global Payments</b>		M M / D D / Y Y Y Y 05 / 12 / 2015
Mailing Address 10705 Red Run Boulevard		Amount of Each Disbursement this Period
City Owings Mills	State MD	Zip Code 21117-5134
Purpose of Disbursement credit card services	Category/Type 001	
Candidate Name	Transaction ID : <b>B8CDA0416C20E4252BFA</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. Crowne Plaza</b>		M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address 851 Congaree Rd		Amount of Each Disbursement this Period
City Greenville	State SC	Zip Code 29607
Purpose of Disbursement lodging	Category/Type 002	
Candidate Name	Transaction ID : <b>BBBE79C36D137483C924</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	756.42
<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 43 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Crowne Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address 851 Congaree Rd		Amount of Each Disbursement this Period 4.24
City Greenville	State SC	
Zip Code 29607	Purpose of Disbursement meals	<b>Transaction ID : BEF17EBD1E1384D2AA1A</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 89.11
City Fairfax	State VA	
Zip Code 22031-4642	Purpose of Disbursement Payroll Processing	<b>Transaction ID : B87F90839DFBA4A09A1A</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wall Lake Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 129 Center Street		Amount of Each Disbursement this Period 58.66
City Wall Lake	State IA	
Zip Code 51466-7704	Purpose of Disbursement fuel	<b>Transaction ID : B5E286718BF5C453A8D8</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	152.01
<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 44 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Washington Intelligence Bureau</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 27 / 2015</b>
Mailing Address <b>4128 Pepsi Place</b>		Amount of Each Disbursement this Period <b>1250.29</b> <b>Transaction ID : B9557EB950E204266BA8</b>
City <b>Chantilly</b> State <b>VA</b> Zip Code <b>20151-1501</b>	Purpose of Disbursement <b>list mngmt &amp; data entry</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Mailsmart Logistics</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 27 / 2015</b>
Mailing Address <b>7160 Columbia Gateway Dr.</b>		Amount of Each Disbursement this Period <b>518.90</b> <b>Transaction ID : B0F34FE265E2844A09A4</b>
City <b>Columbia</b> State <b>MD</b> Zip Code <b>21046-2103</b>	Purpose of Disbursement <b>Printing and Mailing Service</b> Category/Type <b>003</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. The Richard Norman Company</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 27 / 2015</b>
Mailing Address <b>44084 Riverside Parkway Suite 350</b>		Amount of Each Disbursement this Period <b>3643.17</b> <b>Transaction ID : B99493136E3E94A8C81D</b>
City <b>Lansdowne</b> State <b>VA</b> Zip Code <b>20176-6823</b>	Purpose of Disbursement <b>direct mail management</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5412.36</b>
<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 45 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Steve Brown Direct Mail, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015
Mailing Address 731 Divot Drive		Amount of Each Disbursement this Period 4273.26 <b>Transaction ID : BA3BAEB04F350465087C</b>
City Fernley State NV Zip Code 89408-6674	Purpose of Disbursement Fundraising Letter Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Patriot Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015
Mailing Address 13755 Sunrise Valley Drive Suite 450		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : B01944EA4C17E4F16920</b>
City Herndon State VA Zip Code 20171-4682	Purpose of Disbursement data management Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Direct Concepts</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015
Mailing Address 44084 Riverside Parkway Suite 350		Amount of Each Disbursement this Period 475.00 <b>Transaction ID : B3A494910AA094AAAB56</b>
City Lansdowne State VA Zip Code 20176-6823	Purpose of Disbursement printing & mailing services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4788.26
<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 46 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Meredith Morgan &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015
Mailing Address 22780 Indian Creek Drive Ste. 100			Amount of Each Disbursement this Period 3091.43 <b>Transaction ID : B3AF644A6EB6B4E47AAF</b>
City Sterling	State VA	Zip Code 20166-6716	
Purpose of Disbursement Direct Mail Production		Category/ Type 003	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Robertson Mailing List Company</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015
Mailing Address 44084 Riverside Parkway Suite 350			Amount of Each Disbursement this Period 4797.77 <b>Transaction ID : B41F0D709E8FA4E52BAD</b>
City Leesburg	State VA	Zip Code 20176-6823	
Purpose of Disbursement direct mail list management		Category/ Type 001	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Wall Lake Country Store</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2015
Mailing Address 129 Center Street			Amount of Each Disbursement this Period 43.00 <b>Transaction ID : BFAEBA49B3D664163997</b>
City Wall Lake	State IA	Zip Code 51466-7704	
Purpose of Disbursement fuel		Category/ Type 001	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7932.20
<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 47 OF 61	
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 3.84
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement credit card fees	Category/Type 003	<b>Transaction ID : BB4D642A4316E4A93818</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 84.15
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Processing	Category/Type 001	<b>Transaction ID : B28DFA28B7FCE4518BEB</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Global Payments</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 10705 Red Run Boulevard		Amount of Each Disbursement this Period 150.35
City Owings Mills	State MD Zip Code 21117-5134	
Purpose of Disbursement credit card services	Category/Type 001	<b>Transaction ID : B4C2E8F1891004BF7A08</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	238.34
<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 48 OF 61	
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. DeLullo &amp; Associates LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 11 / 2015</b>
Mailing Address <b>815 King Street Suite 308 # 269864664</b>		Amount of Each Disbursement this Period <b>6000.00</b> <b>Transaction ID : B16C9185CEB9D4F2BA15</b>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22314-5020</b>	Purpose of Disbursement <b>fundraising services</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 15 / 2015</b>
Mailing Address <b>777 Big Timber Road</b>		Amount of Each Disbursement this Period <b>344.57</b> <b>Transaction ID : B1806960E6C884D6E945</b>
City <b>Elgin</b> State <b>IL</b> Zip Code <b>60123-1488</b>	Purpose of Disbursement <b>cell phone service</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 15 / 2015</b>
Mailing Address <b>3060 Williams Drive Suite 200</b>		Amount of Each Disbursement this Period <b>89.14</b> <b>Transaction ID : B61A8CD57822841CFB23</b>
City <b>Fairfax</b> State <b>VA</b> Zip Code <b>22031-4642</b>	Purpose of Disbursement <b>Payroll Processing</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6433.71</b>
<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 49 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. GoDaddy</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 14455 N Hayden Road Suite 219		Amount of Each Disbursement this Period 181.12 <b>Transaction ID : BAA0CF2C6F8BD479C941</b>
City State Zip Code Scottsdale AZ 85260-6993	Purpose of Disbursement online hosting	
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wall Lake Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 129 Center Street		Amount of Each Disbursement this Period 51.05 <b>Transaction ID : B1A746FF8ABCE4EBC85C</b>
City State Zip Code Wall Lake IA 51466-7704	Purpose of Disbursement fuel	
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 546.16 <b>Transaction ID : B95293B9F53924B0CB3B</b>
City State Zip Code Washington DC 20003-1801	Purpose of Disbursement catering	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	778.33
<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 50 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Direct Concepts</b>		M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 44084 Riverside Parkway Suite 350		Amount of Each Disbursement this Period
City Lansdowne	State VA	Zip Code 20176-6823
Purpose of Disbursement printing & mailing services	Category/Type 001	
Candidate Name	Transaction ID : <b>BD7446F063DEE4C24B9A</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. The Richard Norman Company</b>		M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 44084 Riverside Parkway Suite 350		Amount of Each Disbursement this Period
City Lansdowne	State VA	Zip Code 20176-6823
Purpose of Disbursement direct mail management	Category/Type 001	
Candidate Name	Transaction ID : <b>B3D241047D21A45CA960</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. PayChex</b>		M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period
City Fairfax	State VA	Zip Code 22031-4642
Purpose of Disbursement Payroll: See Below	Category/Type 001	
Candidate Name	Transaction ID : <b>BA8B3B335BF944F2D911</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9497.37
<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 51 OF 61	
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lindsay J. King</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 1200.00 Transaction ID : BC9013E1918FD48D9B71
City Wall Lake State IA Zip Code 51466-7044	Purpose of Disbursement wages for office management Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Candidate Name	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Stevens</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 218 Brenleigh Ct		Amount of Each Disbursement this Period 1000.00 Transaction ID : BF1AA66788C724723985
City Simpsonville State SC Zip Code 29680-7418	Purpose of Disbursement wages for online management Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Candidate Name	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jeff King</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 2708.34 Transaction ID : B54848CC58EED40F1A79
City Wall Lake State IA Zip Code 51466-7044	Purpose of Disbursement wages for campaign chair Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Candidate Name	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 52 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 445.86
City Fairfax	State VA	
Zip Code 22031-4642	Purpose of Disbursement employer tax expense	Transaction ID : <b>BB5A639F9273E4ED8AD4</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Steve King</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 3897 Esther Avenue		Amount of Each Disbursement this Period 215.82
City Kiron	State IA	
Zip Code 51448-8003	Purpose of Disbursement Reimbursement: See Below	Transaction ID : <b>B72380DA3A62649BB8B2</b>
Candidate Name <b>Mr. Steve King</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Courtyard Marriott</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 2200 Southwood Dr.		Amount of Each Disbursement this Period 215.82
City Nashua	State NH	
Zip Code 03063-1802	Purpose of Disbursement Lodging	Transaction ID : <b>BAC21FFCA25954A919EB</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	215.82
<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 53 OF 61	
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Steve King</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 3897 Esther Avenue		Amount of Each Disbursement this Period 37.65 <b>Transaction ID : BCCBED4D65EF34495A19</b>
City Kiron	State IA Zip Code 51448-8003	
Purpose of Disbursement Reimbursement: See Below		Category/ Type
Candidate Name <b>Mr. Steve King</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 4271.96 <b>Transaction ID : B519C03C387554C95913</b>
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll: See Below		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lindsay J. King</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : B6BDB881131624210932</b>
City Wall Lake	State IA Zip Code 51466-7044	
Purpose of Disbursement wages for office management		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4309.61
<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 54 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jeff King</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2015</b>
Mailing Address <b>508 Center Street</b>		Amount of Each Disbursement this Period <b>2708.34</b>
City <b>Wall Lake</b> State <b>IA</b> Zip Code <b>51466-7044</b>	Purpose of Disbursement <b>wages for campaign chair</b>	<b>001</b> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : B9A3EC28735904CF5BF7</b>
State: District:	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2015</b>
Mailing Address <b>3060 Williams Drive Suite 200</b>		Amount of Each Disbursement this Period <b>363.62</b>
City <b>Fairfax</b> State <b>VA</b> Zip Code <b>22031-4642</b>	Purpose of Disbursement <b>employer tax expense</b>	<b>001</b> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : B79355C3E9D0D49C3845</b>
State: District:	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2015</b>
Mailing Address <b>3060 Williams Drive Suite 200</b>		Amount of Each Disbursement this Period <b>4265.96</b>
City <b>Fairfax</b> State <b>VA</b> Zip Code <b>22031-4642</b>	Purpose of Disbursement <b>Payroll: See Below</b>	<b>001</b> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : BF4B1354BE6894A569C9</b>
State: District:	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4265.96</b>
<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 55 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 357.62
City Fairfax	State VA	Zip Code 22031-4642
Purpose of Disbursement employer tax expense	001 Category/ Type	
Candidate Name		<b>Transaction ID : BAA5356C928474DEBA53</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. Lindsay J. King</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 1200.00
City Wall Lake	State IA	Zip Code 51466-7044
Purpose of Disbursement wages for office management	001 Category/ Type	
Candidate Name		<b>Transaction ID : BE7AF1528C0664265981</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>c. Jeff King</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 2708.34
City Wall Lake	State IA	Zip Code 51466-7044
Purpose of Disbursement wages for campaign chair	001 Category/ Type	
Candidate Name		<b>Transaction ID : B07F70E0093A64925B65</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 56 OF 61			
	<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	

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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 5363.46
City Fairfax	State VA	
Zip Code 22031-4642	Purpose of Disbursement Payroll: See Below	<b>Transaction ID : B8831082A74E44D18824</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lindsay J. King</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 1200.00
City Wall Lake	State IA	
Zip Code 51466-7044	Purpose of Disbursement wages for office management	<b>Transaction ID : B21B66C5549F54A6F880</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Michael Stevens</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2015
Mailing Address 218 Brenleigh Ct		Amount of Each Disbursement this Period 1000.00
City Simpsonville	State SC	
Zip Code 29680-7418	Purpose of Disbursement wages for online management	<b>Transaction ID : B5741AB5994984BB99BA</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5363.46
<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 57 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jeff King</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 2708.34
City Wall Lake	State IA Zip Code 51466-7044	
Purpose of Disbursement wages for campaign chair	Category/Type 001	Transaction ID : <b>BC58A5F14498E424C834</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 455.12
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement employer tax expense	Category/Type 001	Transaction ID : <b>B26EA0A8D212C487E98E</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 5363.46
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll: See Below	Category/Type 001	Transaction ID : <b>B54D9BEF3EEE741E7A88</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5363.46
<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 58 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 455.12
City Fairfax	State VA	
Zip Code 22031-4642	Purpose of Disbursement employer tax expense	Transaction ID : <b>BEC6426B5AF554D61A83</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Stevens</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 218 Brenleigh Ct		Amount of Each Disbursement this Period 1000.00
City Simpsonville	State SC	
Zip Code 29680-7418	Purpose of Disbursement wages for online management	Transaction ID : <b>B6857D411FD524E4292E</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lindsay J. King</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 1200.00
City Wall Lake	State IA	
Zip Code 51466-7044	Purpose of Disbursement wages for office management	Transaction ID : <b>BD47551B623D746F58D1</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 59 OF 61	
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jeff King</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2015</b>
Mailing Address 508 Center Street		Amount of Each Disbursement this Period <b>2708.34</b>
City Wall Lake	State IA	
Zip Code 51466-7044	Purpose of Disbursement wages for campaign chair	<b>Transaction ID : B5E3CC68C6B104A4A8CA</b>
Candidate Name	Category/ Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2015</b>
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period <b>4265.96</b>
City Fairfax	State VA	
Zip Code 22031-4642	Purpose of Disbursement Payroll: See Below	<b>Transaction ID : B564F0E37C76344B4A36</b>
Candidate Name	Category/ Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2015</b>
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period <b>357.62</b>
City Fairfax	State VA	
Zip Code 22031-4642	Purpose of Disbursement employer tax expense	<b>Transaction ID : B22F4CEB902CB4E60A12</b>
Candidate Name	Category/ Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4265.96</b>
<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 60 OF 61			
	<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)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lindsay J. King</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : B45BD2B595ED548DEA4F</b>
City Wall Lake	State IA Zip Code 51466-7044	
Purpose of Disbursement wages for office management	Category/Type 001	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jeff King</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 508 Center Street		Amount of Each Disbursement this Period 2708.34 <b>Transaction ID : B9D9CF87943F941EE997</b>
City Wall Lake	State IA Zip Code 51466-7044	
Purpose of Disbursement wages for campaign chair	Category/Type 001	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <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 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	109594.38

**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 61 OF 61
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**King for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mother Emaunel Hope Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address PO Box 304		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : BAA687D27002340C6835</b>
City Charleston	State SC	
Zip Code 29402-0304	Purpose of Disbursement donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Emanuel AME Church</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 110 Calhoun St.		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : BD266DA14EE874299BC4</b>
City Charleston	State SC	
Zip Code 29401-3510	Purpose of Disbursement donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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	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:	

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