REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILNG LABEL OR TYPE OR PRINT

JAN 15 4 16 PM '95

1. NAME OF COMMITTEE (in full)
PACEG Committee

ADDRESS (number and street) [ ] Check if different than previously reported
666 Grand, Box 855

CITY, STATE and ZIP CODE
Des Moines, IA 50304

2. FEC IDENTIFICATION NUMBER
C00074633

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

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[X] January 31 Year End Report
[ ] July 31 Mid Year Report (Non-election Year Only)
[ ] Termination Report

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [ ] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7-1-95 through 12-31-95		
6. (a) Cash on Hand January 1, 1995		$ 2,027.53
(b) Cash on Hand at Beginning of Reporting Period	$ 3,928.37	
(c) Total Receipts (from Line 19)	$ 6,020.63	$ 10,656.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 9,949.00	$ 12,683.97
7. Total Disbursements (from Line 30)	$ 6,745.00	$ 9,479.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 3,204.00	$ 3,204.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
LaVerne C. Millbrandt

Signature of Treasurer
[signature]

Date
1/5/96

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

FEC FORM 3X
(revised 9/93)

FEcAN101

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DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD
FROM: TO:

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2786.21	3546.97	11(a)(i)
ii. Unitemized	3190.21	7092.85	11(a)(ii)
iii. Total (add i and ii) ➤	5976.72	10538.82	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	5976.72	10538.82	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	33.91	117.62	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	6010.63	10656.44	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤			20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	3000.00	4500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	3745.00	4997.97	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	6745.00	9497.97	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	5976.72	10538.82	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	5976.72	10538.82	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FE9AN066

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 3
	FOR LINE NUMBER 11.A.I

SCHEDULE A **ITEMIZED RECIEPTS**

Any information from such reports and statements may not be sold or used by any persons 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)
PACEG COMMITTEE #6112

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt This Period
JOHN RUAN III 465 FOSTER DRIVE DES MOINES, IA 50312	RUAN INCORPORATED	PAYROLL DEDUCTION	749.96
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: VICE PRESIDENT		($41.66 MONTHLY)
	Aggregate Year-to-Date	999.92	($500.00 CHECK)
B. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
PAUL MURPHY 746 CORNELIA JANESVILLE, WI 53545	RUAN TRANSPORT	PAYROLL DEDUCTION	315.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: OPERATIONS MANAGER		($15.00 WEEKLY)
	Aggregate Year-to-Date	575.00	
C. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
MAX VARNER 823 TAMARACK WAY VERONA, WI 53593	RUAN LEASING	PAYROLL DEDUCTION	260.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: DIVISION VICE PRESIDENT		($10.00 WEEKLY)
	Aggregate Year-to-Date	520.00	
D. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
LYNNANN CORREY 8935 FRANKLIN AVE CLIVE, IA 50325	RUAN TRANSPORT	PAYROLL DEDUCTION	100.10
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: DIRECTOR FIN. ANALYSIS		($3.85 WEEKLY)
	Aggregate Year-to-Date	200.20	
E. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
MARGARET GEHRINGER 196 E. IOWA ST. MARYS, IA 50241	RUAN TRANSPORT	PAYROLL DEDUCTION	130.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: MQI MANAGER		($5.00 WEEKLY)
	Aggregate Year-to-Date	260.00	
F. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
FRANK A. HILTON 9201 LAKEWOOD CIRCLE NORWALK, IA 50211	RUAN TRANSPORT	PAYROLL DEDUCTION	104.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: MANAGER OF TECHNICAL		($4.00 WEEKLY)
	Aggregate Year-to-Date	104.00	
G. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
TIMOTHY E. PETIT 2139 17TH AVE MONROE, WI 53566	RUAN TRANSPORT	PAYROLL DEDUCTION	130.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: DRIVER SUPERVISOR		($4.00 WEEKLY)
	Aggregate Year-to-Date	225.00	

SUBTOTAL	of Receipts This Page (optional) →	1,789.06
TOTAL	This Period (last page this line number only) →	

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Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 3
	FOR LINE NUMBER 11.A.I

SCHEDULE A **ITEMIZED RECIEPTS**

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NAME OF COMMITTEE (IN FULL)
PACEG COMMITTEE #6112

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
ROBERT BRIDGERS 101 CHELSEA COURT ROCKY MOUNT, NC 27801 Receipt For: Primary X General Other (specify):	RUAN LEASING Occupation MANAGER OF TRANS. SEV Aggregate Year-to-Date	PAYROLL DEDUCTION 260.00	130.00 ($5.00 WEEKLY)
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
OSCAR FLORES 7851 KENWOOD COMMERCE CITY, CO 80022 Receipt For: Primary X General Other (specify):	RUAN LEASING Occupation SERVICE MANAGER Aggregate Year-to-Date	PAYROLL DEDUCTION 260.00	130.00 ($5.00 WEEKLY)
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
STEVEN LARSON 7204 COLBY AVE DES MOINES, IA 50311 Receipt For: Primary X General Other (specify):	RUAN LEASING Occupation CORPORATE SALES MGR Aggregate Year-to-Date	PAYROLL DEDUCTION 250.12	125.06 ($4.81 WEEKLY)
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
DONALD LARUE 533 SOUTH PLANE BURLINGTON, IA 52601 Receipt For: Primary X General Other (specify):	RUAN LEASING Occupation DIV. SAFETY MANAGER Aggregate Year-to-Date	PAYROLL DEDUCTION 205.00	130.00 ($5.00 WEEKLY)
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
WAYNE ROSWICK 7012 RIVER SHORE LANE CHAMPLIN, MN 55316 Receipt For: Primary X General Other (specify):	RUAN LEASING Occupation V.P. WESTERN DIVISION Aggregate Year-to-Date	PAYROLL DEDUCTION 208.00	104.00 ($4.00 WEEKLY)
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
CHARLES SPANG 9111 LAUREL RIDGE TRAIL CHARLOTTE, NC 28269 Receipt For: Primary X General Other (specify):	RUAN LEASING Occupation V.P. OF SALES Aggregate Year-to-Date	PAYROLL DEDUCTION 208.00	104.00 ($4.00 WEEKLY)
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
AARON THORSEN 2700 E. 175TH ST LANSING, IL 60438 Receipt For: Primary X General Other (specify):	RUAN LEASING Occupation MANAGER OF TRANS. SEV Aggregate Year-to-Date	PAYROLL DEDUCTION 250.12	125.06 ($4.81 WEEKLY)

SUBTOTAL	of Receipts This Page (optional)	848.12
TOTAL	This Period (last page this line number only)	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 3 FOR LINE NUMBER 11.A.I

SCHEDULE A **ITEMIZED RECIEPTS**

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NAME OF COMMITTEE (IN FULL)
PACEG COMMITTEE #6112

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month, day, year)	Amount of Each Receipt This Period
GARY ALVORD 5405 SW MCKINLEY DES MOINES, IA 50321 Receipt For: [ ] Primary [X] General [ ] Other (specify):	RUAN, INCORPORATED PRESIDENT, TRUCKING Aggregate Year-to-Date 249.96	PAYROLL DEDUCTION	20.83 ($20.83 MONTHLY)
B. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
WILLIAM GILES 2902 KENDALLWOOD CIRCLE DES MOINES, IA 50322 Receipt For: [ ] Primary [X] General [ ] Other (specify)	RUAN, INCORPORATED VP OF RESEARCH/ENG. Aggregate Year to Date 276.00	PAYROLL DEDUCTION	138.00 ($23.00 MONTHLY)
C. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
D. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
E. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
F. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
G. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (Month, day, year)**	**Amount of Each Receipt This Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		

SUBTOTAL	of Receipts This Page (optional)	158.83
TOTAL	This Period (last page this line number only)	2,796.01

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 23

Any information from such reports and Statements may not be sold or used by any persons 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)
PACEG COMMITTEE #6112

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
PEOPLE FOR GANSKE 521 EAST LOCUST DES MOINES, IA 50309	GREG GANSKE REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07-20-95	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
THE MAJORITY ANNIVERSARY DINNER 425 SECOND STREET N.E. WASHINGTON, DC 20002	SENATE MAJORITY SUPPORT Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10-31-95	2,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (Month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (Month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (Month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (Month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (Month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (Month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (Month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL	of Disbursements This Page (optional) ▶	3,000.00
TOTAL	This Period (last page this line number only) ▶	3,000.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 3 FOR LINE NUMBER 29

Any information from such reports and Statements may not be sold or used by any persons 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)
PACEG COMMITTEE #6112

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
BRAND FOR STATE REPRESENTATIVE 3910 HWY V18 CHELSEA, IA 52215	BILL BRAND REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07-20-95	100.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR SENATOR RIFE P.O. BOX 842 DURANT, IA 52747	JACK RIFE, JR. SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07-20-95	150.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
CORBETT FOR REPRESENTATIVE P.O. BOX 9300 CEDAR RAPIDS, IA 52409	RON CORBETT REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07-26-95	500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
CORBETT FOR REPRESENTATIVE P.O. BOX 9300 CEDAR RAPIDS, IA 52409	RON CORBETT REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-01-95	250.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
JIM LIND FOR SENATE P.O. BOX 2100 WATERLOO, IA 50704	JIM LIND SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-08-95	150.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
KRAMER FOR STATE SENATE COMMITTEE 1209 ASHWORTH ROAD WEST DES MOINES, IA 50265	MARY KRAMER SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-08-95	100.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
IVERSON FOR SENATE 963 GLENDALE PK. DR. HAMPTON, IA 50441	STEWART IVERSON, JR SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-25-95	100.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
MICKLE FOR COUNCIL 1011 45TH STREET DES MOINES, IA 50311	BOB MICKLE ~~MAYOR~~ COUNCIL Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-29-95	500.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
LUNDBY FOR IOWA SENATE 1240 14TH STREET MARION, IA 52302	MARY LUNDBY SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-13-95	100.00

SUBTOTAL	of Disbursements This Page (optional)	1,950.00
TOTAL	This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 29

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NAME OF COMMITTEE (IN FULL)
PACEG COMMITTEE #6112

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR GOOD GOVERNMENT 707 EAST LOCUST DES MOINES, IA 50309	MERLIN BARTZ SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-13-95	75.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
COMMITTEE TO RE-ELECT EDDIE 1101 PIERCE DRIVE STORM LAKE, IA 50588	RUSSELL EDDIE REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-15-95	80.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
FREEMAN FOR SENATE COMMITTEE P.O. BOX 1132 STORM LAKE, IA 50588	MARY LOU FREEMAN SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-15-95	80.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
PEOPLE FOR CONNERS 1244 EAST 29TH STREET DES MOINES, IA 50317	JOHN CONNERS REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-25-95	100.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
COMMITTEE TO ELECT METCALF 4017 MARY LYNN DRIVE URBANDALE, IA 50322	JANET METCALF REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-25-95	100.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
REDFERN FOR SENATE 315 CLAY ST. CEDAR FALLS, IA 50613	DON REDFERN SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-25-95	100.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
FLAGG FOR MAYOR 2715 GRAND AVE DES MOINES, IA 50312	GEORGE FLAGG MAYOR Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10-03-95	500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF DAVE SCHRADER RR 2 MONROE, IA 50170	DAVE SCHRADER REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-06-95	100.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
COMMITTEE TO ELECT MINNETTE 640 STUART CT. #4 IOWA CITY, IA 52245	MINNETTE DODERER REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-06-95	100.00

SUBTOTAL of Disbursements This Page (optional) ► 1,235.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 29

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NAME OF COMMITTEE (IN FULL)
PACEG COMMITTEE #6112

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR CONNOLLY 1800 FLORAVIEW DRIVE DUBUQUE, IA 52001	MICHAEL CONNOLLY SENATE Disbursement for: Primary [X] General [ ] Other (specify)	11-06-95	100.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
BENNETT SENATE COMMITTEE 402 ZOBEL IDA GROVE, IA 51445	WAYNE BENNETT SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-06-95	100.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
THE COMMITTEE TO ELECT GRUNDBERG TO THE HOUSE 4016 OAK FOREST DR. DES MOINES, IA 50312	BETTY GRUNDBERG REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-06-95	100.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
KIBBIE FOR SENATE P.O. BOX 316 EMMETSBURG, IA 50536	JOHN KIBBIE SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-06-95	100.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
THE CHURCHILL FOR STATE HOUSE COMMITTEE 5920 VILLAGE CIRCLE JOHNSTON, IA 50131	STEVEN CHURCHILL REPRESENTATIVE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-06-95	100.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
IOWA ETHICS AND DISCLOSURE BOARD 514 E. LOCUST, SUITE 104 DES MOINES, IA 50309	REPORT FILED LATE Disbursement for: [ ] Primary [ ] General [X] Other (specify) SEE ABOVE	11-07-95	10.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR BOSWELL 202 N. ELM ST. LAMONI, IA 50140	LEONARD BOSWELL SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-30-95	150.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
KAY KING FOR SENATE 202 SOUTH H INDIANOLA, IA 50125	KAY KING SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10-28-94	(100.00) (CHECK LOST)
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL	of Disbursements This Page (optional) ►	560.00
TOTAL	This Period (last page this line number only) ►	3,745.00

Duplicated Form

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
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☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

J.A.Q.
PREPARER

1/16/96
DATE PREPARED

FEC FORM 70-2 (12/92)

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