

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
JEFF BARTH CONGRESS

ADDRESS (number and street) PO BOX 1732
Check if different than previously reported. (ACC) SIOUX FALLS SD 57101

2. FEC IDENTIFICATION NUMBER C C00498915
3. IS THIS REPORT NEW (N) OR AMENDED (A) SD 01

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[] April 15 Quarterly Report (Q1)
[X] July 15 Quarterly Report (Q2)
[] October 15 Quarterly Report (Q3)
[] January 31 Year-End Report (YE)
[] Termination Report (TER)
(b) 12-Day PRE-Election Report for the:
[] Primary (12P) [] General (12G) [] Runoff (12R)
[] Convention (12C) [] Special (12S)
Election on MM/DD/YYYY in the State of
(c) 30-Day POST-Election Report for the:
[] General (30G) [] Runoff (30R) [] Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY
05 / 17 / 2012 through 06 / 30 / 2012

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 John Claussen

Signature of Treasurer John Claussen [Electronically Filed] Date MM/DD/YYYY 07 / 13 / 2012

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

Office Use Only table with 8 columns and 1 row.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

JEFF BARTH CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	10378.00	32910.30
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	10378.00	32910.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20912.12	65216.90
(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)).....	20912.12	65216.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	32306.60	

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

JEFF BARTH CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3650.00	19258.60
(ii) Unitemized.....	4753.00	9957.00
(iii) TOTAL of contributions from individuals ▶	8403.00	29215.60
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	1975.00	3694.70
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10378.00	32910.30
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	10000.00	32322.97
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	10000.00	32322.97
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	20378.00	65233.27

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20912.12	65216.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	16.37	16.37
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	16.37	16.37
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20928.49	65233.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	550.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	20378.00
25. SUBTOTAL (add Line 23 and Line 24).....	20928.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20928.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**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 5 OF 29
	<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)
JEFF BARTH CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven Abbott

Mailing Address 369 California Street

City Waterloo State IA Zip Code 50703

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

Name of Employer Centurylink Occupation Data Technician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4739

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Edward Barth

Mailing Address 236 St Mark Way

City Westminster State MD Zip Code 21157

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2012

Transaction ID : SA11AI.4488

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Eugene Barth

Mailing Address 5 Dos Posos

City Orinda State CA Zip Code 94563

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4464

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 6 OF 29
	<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)
JEFF BARTH CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrew Duncan

Mailing Address 1911 Calle Caliche

City Austin State TX Zip Code 78733

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

Name of Employer RGM Advisors Occupation Finance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dr. P James Eckhoff

Mailing Address 4517 S River Oaks Dr

City Sioux Falls State SD Zip Code 57105

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2012

Transaction ID : SA11AI.4561

Amount of Each Receipt this Period
 250.00

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

Mailing Address 13029 Bogus Jim Road

City Rapid City State SD Zip Code 57702

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

Name of Employer Dunn County Tax Service Occupation Tax Preparer & Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4737

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 29
	<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)
JEFF BARTH CONGRESS

A. Full Name (Last, First, Middle Initial)
Peggy Gibson

Mailing Address 1010 Valley View Ct

City Huron	State SD	Zip Code 57350
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FEC ID number of contributing federal political committee. **C**

Name of Employer State of South Dakota	Occupation SD State Representative
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Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4486

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
David Lietz

Mailing Address 4727 48th ST NW

City Washington	State DC	Zip Code 20016
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lietz Law Firm	Occupation Lawyer
------------------------------------	----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4733

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Catherine Piersol

Mailing Address 4407 S Vista Lane

City Sioux Falls	State SD	Zip Code 57105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Piersol Law Firm	Occupation Lawyer
--------------------------------------	----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2012

Transaction ID : SA11AI.4508

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 8 OF 29
	<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)
JEFF BARTH CONGRESS

A. Full Name (Last, First, Middle Initial)
Marsha Tracy

Mailing Address 1049 Calle Contento

City: Glendale State: CA Zip Code: 91208

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

Name of Employer: N/A Occupation: N/A

Receipt For: 2012
 Primary General
 Other (specify)

Occupation: N/A

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 01 / 2012

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
W Preston Woodall Jr.

Mailing Address 1102 Noth Tacoma Ave

City: Tacoma State: WA Zip Code: 98403

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 06 / 06 / 2012

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period: 100.00

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

Amount of Each Receipt this Period

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

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

600.00

3650.00

**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 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JEFF BARTH CONGRESS

A. Full Name (Last, First, Middle Initial)
JEFF BARTH

Mailing Address **PO BOX 1732**

City **SIoux FALLS** State **SD** Zip Code **57101**

FEC ID number of contributing federal political committee. **C H2SD01033**

Name of Employer Candidate _____ Occupation Candidate _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
36042.67

Date of Receipt
 M M / D D / Y Y Y Y
06 / 22 / 2012

Transaction ID : SA11D.4758

Amount of Each Receipt this Period
1975.00

B. 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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

1975.00

1975.00

**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 10 OF 29	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b
	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JEFF BARTH CONGRESS

A. Full Name (Last, First, Middle Initial) JEFF BARTH		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012
Mailing Address PO BOX 1732		Transaction ID : SA13A.4460
City SIOUX FALLS	State Zip Code SD 57101	
FEC ID number of contributing federal political committee. C H2SD01033		Amount of Each Receipt this Period 10000.00
Name of Employer Candidate	Occupation Candidate	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 34067.67	

B. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA13A

Transaction ID : SA13A.4460

Canidate has elected to forgive outstanding personal loan. Letter to follow in the mail.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 29			
	<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)
JEFF BARTH CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement MM / DD / YYYY 06 / 01 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 190.36 Transaction ID : SB17.4756
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 001	
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Disbursement MM / DD / YYYY 06 / 06 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 51.02 Transaction ID : SB17.4757
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 001	
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) c. ActBlue		Date of Disbursement MM / DD / YYYY 06 / 13 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 25.70 Transaction ID : SB17.4763
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 001	
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

SUBTOTAL of Disbursements This Page (optional).....	267.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 29			
	<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)
JEFF BARTH CONGRESS

Full Name (Last, First, Middle Initial) A. Scott Hofer		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 1920 S Summit Ave		Amount of Each Disbursement this Period 292.92 Transaction ID : SB17.4743
City Sioux Falls	State SD	
Purpose of Disbursement Wages		Category/ Type 001
Candidate Name JEFF BARTH CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) B. Scott Hofer		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 1920 S Summit Ave		Amount of Each Disbursement this Period 292.92 Transaction ID : SB17.4745
City Sioux Falls	State SD	
Purpose of Disbursement Wages		Category/ Type 001
Candidate Name JEFF BARTH CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) c. Scott Hofer		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 1920 S Summit Ave		Amount of Each Disbursement this Period 292.92 Transaction ID : SB17.4746
City Sioux Falls	State SD	
Purpose of Disbursement Wages		Category/ Type 001
Candidate Name JEFF BARTH CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

SUBTOTAL of Disbursements This Page (optional).....	878.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 29			
	<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)
JEFF BARTH CONGRESS

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address P.O. Box 105083		Amount of Each Disbursement this Period 309.36 Transaction ID : SB17.4752
City Atlanta State GA Zip Code 30348-5083	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address P.O. Box 105083		Amount of Each Disbursement this Period 77.17 Transaction ID : SB17.4753
City Atlanta State GA Zip Code 30348-5083	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address P.O. Box 105083		Amount of Each Disbursement this Period 5.44 Transaction ID : SB17.4754
City Atlanta State GA Zip Code 30348-5083	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

SUBTOTAL of Disbursements This Page (optional).....	391.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 29			
	<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)
JEFF BARTH CONGRESS

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address P.O. Box 105083		Amount of Each Disbursement this Period 23.04 Transaction ID : SB17.4755
City Atlanta	State GA	
Zip Code 30348-5083	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SD District: 01	

Full Name (Last, First, Middle Initial) B. Limestone, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address 4301 W 57th St, Suite 132		Amount of Each Disbursement this Period 344.50 Transaction ID : SB17.4751
City Sioux Falls	State SD	
Zip Code 57108	Purpose of Disbursement Bookkeeping	Category/ Type 001
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SD District: 01	

Full Name (Last, First, Middle Initial) c. MediaOne		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 3918 S Western Ave		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.4764
City Sioux Falls	State SD	
Zip Code 57105	Purpose of Disbursement Television Advertisements	Category/ Type 004
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SD District: 01	

SUBTOTAL of Disbursements This Page (optional).....	10367.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 29		
	<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)
JEFF BARTH CONGRESS

Full Name (Last, First, Middle Initial) A. MediaOne		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 3918 S Western Ave		Amount of Each Disbursement this Period 5594.00
City Sioux Falls	State SD	
Zip Code 57105	Purpose of Disbursement Advertising	Transaction ID : SB17.4748
Candidate Name JEFF BARTH CONGRESS	Category/ Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) B. MediaOne		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address 3918 S Western Ave		Amount of Each Disbursement this Period 3323.83
City Sioux Falls	State SD	
Zip Code 57105	Purpose of Disbursement Advertising	Transaction ID : SB17.4749
Candidate Name JEFF BARTH CONGRESS	Category/ Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8917.83
TOTAL This Period (last page this line number only).....	20823.18

**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 17 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JEFF BARTH CONGRESS

Full Name (Last, First, Middle Initial) A. JEFF BARTH		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address PO BOX 1732		Amount of Each Disbursement this Period 16.37 Transaction ID : SB19A.4769
City SIOUX FALLS State SD Zip Code 57101	Purpose of Disbursement Loan payment Category/Type 009	
Candidate Name JEFF BARTH CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 01		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16.37
TOTAL This Period (last page this line number only).....	16.37

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4135**
JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
JEFF BARTH Primary
 Mailing Address PO BOX 1732 General
 Other (specify) ▼

City State ZIP Code
 SIOUX FALLS SD 57101

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred M 07 / D 01 / Y 2011	Date Due M M / D D / Y 11/06/2012	Interest Rate 2.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	--------------------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	[] 5000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4154

JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

JEFF BARTH

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 1732

City

State

ZIP Code

SIoux FALLS

SD

57101

Original Amount of Loan

684.80

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

684.80

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

07

29

2011

11/06/12

2.00

% (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

684.80

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4155

JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

JEFF BARTH

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 1732

City

State

ZIP Code

SIoux FALLS

SD

57101

Original Amount of Loan

291.92

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

291.92

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08 / 12 / 2011

11/06/12

2.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

291.92

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4156**
JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) JEFF BARTH	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1732		

City	State	ZIP Code
SIoux FALLS	SD	57101

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
222.60	0.00	222.60

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 08 / D 15 / Y 2011	M M / D D / Y 11/06/12	2.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	222.60
TOTALS This Period (last page in this line only).....	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4317

JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

JEFF BARTH

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 1732

City

State

ZIP Code

SIoux FALLS

SD

57101

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3000.00

0.00

3000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

M M / D D / Y Y Y Y
10 / 24 / 2011

2.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

3000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4318**
JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) JEFF BARTH	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1732		

City	State	ZIP Code
SIoux FALLS	SD	57101

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
373.65	0.00	373.65

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 24 / Y 2011	M / D / Y 11/06/2012	2.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	373.65
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4319

JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

JEFF BARTH

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 1732

City

State

ZIP Code

SIoux FALLS

SD

57101

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

11^M

18^D

2011^Y

11/06/2012^Y

2.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

10000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4320**
JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
JEFF BARTH Primary
 Mailing Address PO BOX 1732 General
 Other (specify) ▼

City State ZIP Code
 SIOUX FALLS SD 57101

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 / 21 / 2011	11/06/2012	2.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	1000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4321**
JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
JEFF BARTH Primary
Mailing Address PO BOX 1732 General
 Other (specify) ▼

City State ZIP Code
SIOUX FALLS SD 57101

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
500.00 0.00 500.00

TERMS Date Incurred Date Due Interest Rate Secured:
M^M 12 / D^D 12 / Y^Y 2011 / M^M / D^D / Y^Y 11/06/2012 2.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 500.00
TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4448

JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

JEFF BARTH

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 1732

City

State

ZIP Code

SIoux FALLS

SD

57101

Original Amount of Loan

1250.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1250.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 09 /

Y 2012 Y

M /

D /

Y 11/6/2012 Y

2.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

1250.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4460

JEFF BARTH CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

JEFF BARTH

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 1732

City

State

ZIP Code

SIoux FALLS

SD

57101

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

16.37

9983.63

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 30 /

Y 2012 Y

M /

D /

Y 11/6/2012 Y

2.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....

9983.63

TOTALS This Period (last page in this line only).....

32306.60

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Form/Schedule: SC/10

Transaction ID : SC/10.4460

Canidate has elected to forgive outstanding personal loan. Letter to follow in the mail.

Form/Schedule:

Transaction ID: