

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

Miller-Meeks for Congress

ADDRESS (number and street)

P.O. Box 1570

Check if different than previously reported. (ACC)

Ottumwa

IA

52501

2. FEC IDENTIFICATION NUMBER ▼

C C00558825

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IA

02

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 11 / 04 / 2014 in the State of IA

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

10 / 01 / 2014

through

10 / 15 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Charles Seberg

Signature of Treasurer Charles Seberg

[Electronically Filed]

Date

10 / 22 / 2014

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Miller-Meeks for 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))....	60813.02	798309.57
(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)).....	60813.02	798309.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	116175.95	717583.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	351.10	351.10
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	115824.85	717232.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	91926.97	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Miller-Meeks for 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).....	27074.00	452397.99
(ii) Unitemized.....	11215.95	167906.52
(iii) TOTAL of contributions from individuals ▶	38289.95	620304.51
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	22000.00	172443.50
(d) The Candidate.....	523.07	5561.56
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	60813.02	798309.57
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	5000.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	351.10	351.10
15. OTHER RECEIPTS (Dividends, Interest, etc.)	4850.00	5850.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	66014.12	809510.67

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	116175.95	717583.70
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	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) ►	116175.95	717583.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	142088.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	66014.12
25. SUBTOTAL (add Line 23 and Line 24).....	208102.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	116175.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	91926.97

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Leah Adams

Mailing Address 1020 Teg Dr

City Iowa City State IA Zip Code 52246

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11207

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Donald Atwood

Mailing Address 1608 Packwood Rd

City Fairfield State IA Zip Code 52556

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

Name of Employer self Occupation farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
335.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11AI.11902

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Joan U. Axel

Mailing Address 208 W Second St #300

City Muscatine State IA Zip Code 52761

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

Name of Employer self Occupation attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11936

Amount of Each Receipt this Period
250.00

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

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

800.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Edwin Barker

Mailing Address 6 Lime Kiln Lane NE

City Iowa City State IA Zip Code 52240

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1660.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11216

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ronald Berges

Mailing Address 111 E Golf Ave

City Ottumwa State IA Zip Code 52501

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

Name of Employer Mahaska Health Partnership Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11357

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Sharon Bertroche

Mailing Address 3221 Falcon Dr NE

City Cedar Rapids State IA Zip Code 52402

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

Name of Employer Mercy Care Physicians Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11222

Amount of Each Receipt this Period
150.00

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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Cheryl Brenton

Mailing Address 5494 Lakeview Dr

City State Zip Code
Clear Lake IA 50428

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

Name of Employer self Occupation homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.11937

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Duayne Buescher

Mailing Address 18294 Irish Ridge Rd

City State Zip Code
Sperry IA 52650

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

Name of Employer self Occupation farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.11450

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Willis Bywater

Mailing Address 621 S Summit St

City State Zip Code
Iowa City IA 52240

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

Name of Employer Economy Advertising Co. Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.11381

Amount of Each Receipt this Period
500.00

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

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

825.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Peter Clausen

Mailing Address 2849 Small Ct

City Camanche State IA Zip Code 52730

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

Name of Employer Clausen Supply Company Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11313

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Arleigh Clemens

Mailing Address 1450 High Country Rd

City Coralville State IA Zip Code 52241

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.11396

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Harvey Condon

Mailing Address P.O. Box 185

City Fairfield State IA Zip Code 52632

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11931

Amount of Each Receipt this Period
100.00

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

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

410.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Carol Crain

Mailing Address 313 E Central Park Ave

City Davenport State IA Zip Code 52803

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11256

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Ross DeValois

Mailing Address 18 Bedford Ct

City Iowa City State IA Zip Code 52240

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

Name of Employer MidAmerican Securities Occupation financial planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11329

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Linda Duffy

Mailing Address 7400 Jersey Ridge Rd

City Davenport State IA Zip Code 52807

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

Name of Employer Per Mar Security Service Occupation Board Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11AI.11298

Amount of Each Receipt this Period
1000.00

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

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

1450.00

**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 59
	<input checked="" type="checkbox"/> 11a 12 <input 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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Michael Durkee

Mailing Address 3686 Forestgate Dr NE

City Iowa City State IA Zip Code 52240

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

Name of Employer Steindler Orthopedic Clinic Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.11229

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Candy Elwell

Mailing Address 4000 Turnberry Dr

City West Des Moines State IA Zip Code 50265

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 12 / 2014

Transaction ID : SA11AI.11877

Amount of Each Receipt this Period
400.00

Reattribute: Elwell, Dennis 10/10/2014

C. Full Name (Last, First, Middle Initial)
Dennis Elwell

Mailing Address P.O. Box 187

City Ankeny State IA Zip Code 50021

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

Name of Employer Denny Elwell Company Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.11421

Amount of Each Receipt this Period
2000.00

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

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

2450.00

**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 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Elwell

Mailing Address P.O. Box 187

City State Zip Code
Ankeny IA 50021

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

Name of Employer Occupation
Denny Elwell Company executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 / /

Transaction ID : SA11AI.11876

Amount of Each Receipt this Period

Reattribute: Elwell, Candy 10/12/2014

B. Full Name (Last, First, Middle Initial)
R Joseph Ewing

Mailing Address 29 Forest Hill Place NE

City State Zip Code
Iowa City IA 52240

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

Name of Employer Occupation
Mercy Iowa City physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 / /

Transaction ID : SA11AI.11401

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
R Joseph Ewing

Mailing Address 29 Forest Hill Place NE

City State Zip Code
Iowa City IA 52240

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

Name of Employer Occupation
Mercy Iowa City physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 / /

Transaction ID : SA11AI.11225

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 12 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Lee Friell

Mailing Address 6791 NW 57th St

City Johnston State IA Zip Code 50131

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

Name of Employer retired Occupation military

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11946

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Charles R Fuerste

Mailing Address 2930 Spring Oaks Court

City Dubuque State IA Zip Code 52001

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

Name of Employer Fuerste Eye Clinic Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.11290

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Sharon Ginty

Mailing Address 807 Timber Ct

City Coralville State IA Zip Code 52241

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

Name of Employer Mercy Hospital Occupation pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.11380

Amount of Each Receipt this Period
500.00

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

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

800.00

**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 13 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Dianne Glenney

Mailing Address 2891 - 150th St

City Muscatine State IA Zip Code 52761

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

Name of Employer Glenn Ridge Farms Inc Occupation farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **910.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 11 / 2014

Transaction ID : SA11AI.11904

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Jeanne Goche-Horihan

Mailing Address P.O. Box 743

City West Branch State IA Zip Code 52358

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

Name of Employer self Occupation hospital administration

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11218

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Douglas Goschke

Mailing Address 9623 Enclave Cir

City Port Saint Lucie State FL Zip Code 34986

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

Name of Employer Cotter Home Services LLC Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11AI.11415

Amount of Each Receipt this Period
1000.00

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

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

1800.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Catherine Grawe

Mailing Address 1908 South Ridge Dr

City State Zip Code
Coralville IA 52241

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

Name of Employer self Occupation sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
360.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.11368

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Catherine Grawe

Mailing Address 1908 South Ridge Dr

City State Zip Code
Coralville IA 52241

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

Name of Employer self Occupation sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11950

Amount of Each Receipt this Period
140.00

C. Full Name (Last, First, Middle Initial)
Timothy Hagle

Mailing Address 3105 Friendship St

City State Zip Code
Iowa City IA 52405

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

Name of Employer University of Iowa Occupation professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11AI.11289

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: (check only one)	PAGE 15 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Garry Hamdorf

Mailing Address 2545 Bluffwood Dr

City Iowa City	State IA	Zip Code 52245
-------------------	-------------	-------------------

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

Name of Employer 4 Seasons LaserWash	Occupation executive
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
825.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		14		2014

Transaction ID : SA11AI.11234

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Curt Hames

Mailing Address 4001 Tama St

City Marion	State IA	Zip Code 52302
----------------	-------------	-------------------

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

Name of Employer Hames Homes Sales	Occupation executive
---------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2014

Transaction ID : SA11AI.11420

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Curt Hames

Mailing Address 4001 Tama St

City Marion	State IA	Zip Code 52302
----------------	-------------	-------------------

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

Name of Employer Hames Homes Sales	Occupation executive
---------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		11		2014

Transaction ID : SA11AI.11498

Amount of Each Receipt this Period
-400.00

Reattribute: Hames, Normal 10/11/2014

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 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Cynthia Hames

Mailing Address 3840 Stoney Pointe Lane NE

City North Liberty State IA Zip Code 52317

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

Name of Employer Iowa City Regina Occupation teacher/coach

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11223

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Norma Hames

Mailing Address 4001 Tama St

City Marion State IA Zip Code 52302

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 11 / 2014

Transaction ID : SA11AI.11499

Amount of Each Receipt this Period
 400.00

Reattribute: Hames, Curt 10/9/2014

C. Full Name (Last, First, Middle Initial)
Lois Hanser

Mailing Address 1813 Snaggy Ridge Rd

City Tipton State IA Zip Code 52772

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.11382

Amount of Each Receipt this Period
 250.00

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

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

1150.00

**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 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Christopher Hauptert

Mailing Address 34450 Red Oak Ln

City State Zip Code
Cumming IA 50061

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

Name of Employer Occupation
Iowa Retina Consultants physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.11304

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
William Hofmann

Mailing Address 18192 - 243rd St

City State Zip Code
Pleasant Valley IA 52767

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

Name of Employer Occupation
retired physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.11490

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Stephen Hunter

Mailing Address 3735 Lacina Dr SW

City State Zip Code
Iowa City IA 52240

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

Name of Employer Occupation
University of Iowa Hospitals physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11227

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: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 18 OF 59

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Jerry Jochims

Mailing Address 10976 Wildlife Lakes Dr

City State Zip Code
 West Burlington IA 52655

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 08 2014

Transaction ID : SA11AI.11302

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
G. Frank Judisch

Mailing Address 603 River St

City State Zip Code
 Iowa City IA 52246

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

Name of Employer University of Iowa Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 13 2014

Transaction ID : SA11AI.11221

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
John Kammermeyer

Mailing Address 116 Ferson Ave

City State Zip Code
 Iowa City IA 52246

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

Name of Employer Iowa City Allergy Clinic Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 13 2014

Transaction ID : SA11AI.11214

Amount of Each Receipt this Period
 100.00

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

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

1350.00

**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 19 OF 59
	<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)
Miller-Meeks for Congress

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

Mailing Address 3305 142nd Ave

City Ottumwa	State IA	Zip Code 52501
-----------------	-------------	-------------------

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

Name of Employer Keith Law Firm PC	Occupation attorney
---------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		01		2014

Transaction ID : SA11AI.11474

Amount of Each Receipt this Period
200.00

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

Mailing Address 4950 Sheffield Place

City Iowa City	State IA	Zip Code 52245
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FEC ID number of contributing federal political committee. **C**

Name of Employer none	Occupation retired
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		08		2014

Transaction ID : SA11AI.11403

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert Kuntz

Mailing Address 904 Huron St

City Mediapolis	State IA	Zip Code 52637
--------------------	-------------	-------------------

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

Name of Employer self	Occupation farmer
--------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		10		2014

Transaction ID : SA11AI.11449

Amount of Each Receipt this Period
50.00

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

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

500.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Sandra Land

Mailing Address 4727 135th St

City State Zip Code
Clinton IA 52732

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2014

Transaction ID : SA11AI.11412

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Sue Latham

Mailing Address 356 Park Terrace SE

City State Zip Code
Cedar Rapids IA 52403

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

Name of Employer none Occupation homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : SA11AI.11203

Amount of Each Receipt this Period
1500.00

Designated Debt Relief

C. Full Name (Last, First, Middle Initial)
Roger Leahy

Mailing Address 2096 Nutmeg Ave

City State Zip Code
Farifield IA 52556

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

Name of Employer Overland Sheepskin Co. Occupation owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : SA11AI.11316

Amount of Each Receipt this Period
100.00

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

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

2100.00

**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 21 OF 59
	<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)
Miller-Meeks for Congress

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

Mailing Address 1714 Blaine Ln

City State Zip Code
Decatur IL 62521

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

Name of Employer self Occupation
self Ophthalmology

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2014

Transaction ID : SA11AI.11463

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Sheryl Lee

Mailing Address 2962 Woodland Dr

City State Zip Code
Burlington IA 52601

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

Name of Employer self Occupation
self homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11AI.11440

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
John Linder

Mailing Address 3736 NE Cottage Reserve Rd

City State Zip Code
Solon IA 52333

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

Name of Employer self Occupation
Linder Tire Service owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : SA11AI.11210

Amount of Each Receipt this Period
500.00

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

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

2250.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Ann Lipsky

Mailing Address 3500 Cottage Grove Ave SE

City Cedar Rapids State IA Zip Code 52403

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

Name of Employer Smulekoff's Furniture Co. Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2114.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11944

Amount of Each Receipt this Period
2014.00

B. Full Name (Last, First, Middle Initial)
Lowell Luhman

Mailing Address 2035 Rochester Ct

City Iowa City State IA Zip Code 52245

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

Name of Employer retired Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11945

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Cara Matteson

Mailing Address 10828 Memorial Park Rd

City Burlington State IA Zip Code 52601

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

Name of Employer information requested Occupation information requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.12032

Amount of Each Receipt this Period
200.00

Reattribute: Matteson, Larry 10/14/14

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

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

2264.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Larry Matteson

Mailing Address 10828 Memorial Park Rd

City Burlington State IA Zip Code 52601

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

Name of Employer Matteson Marine Service Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.11255

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Larry Matteson

Mailing Address 10828 Memorial Park Rd

City Burlington State IA Zip Code 52601

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

Name of Employer Matteson Marine Service Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.12031

Amount of Each Receipt this Period
-200.00

Reattribute: Matteson, Cara 10/15/14

C. Full Name (Last, First, Middle Initial)
Jeanita McNulty

Mailing Address 7016 - 124th St

City Blue Grass State IA Zip Code 52726

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

Name of Employer Iowa Federation of Republican Occupation director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.11239

Amount of Each Receipt this Period
50.00

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

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

50.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
David Meier

Mailing Address 15175 240th St

City Eldridge State IA Zip Code 52748

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

Name of Employer Iowa 80 Group Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.11503

Amount of Each Receipt this Period
 900.00

Reattribute: Meier, Delia 10/6/14

B. Full Name (Last, First, Middle Initial)
Delia Meier

Mailing Address 15175 - 240th St

City Eldridge State IA Zip Code 52748

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

Name of Employer Iowa 80 Group Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.11414

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Delia Meier

Mailing Address 15175 - 240th St

City Eldridge State IA Zip Code 52748

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

Name of Employer Iowa 80 Group Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.11502

Amount of Each Receipt this Period
 -900.00

Reattribute: Meier, David 10/10/14

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

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

1000.00

**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 25 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Janet Merfeld

Mailing Address 3000 Cornerstone Court

City Cedar Rapids State IA Zip Code 52403

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

Name of Employer Radiation Oncology of C.R. Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 12 / 2014

Transaction ID : SA11AI.11431

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jeff Messerschmitt

Mailing Address 1118 Hayne St

City Ottumwa State IA Zip Code 52501

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

Name of Employer Messerschmitt Ice Service Occupation owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11353

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Edwin Mulholland

Mailing Address 2880 Silver Oak Trail

City Marion State IA Zip Code 52302

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.11236

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Eugene Othon

Mailing Address 1201 Woodlawn Ave

City Clinton State IA Zip Code 52732

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11355

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Dale Petersen

Mailing Address 3225 Shamrock Dr

City Iowa City State IA Zip Code 52245

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11193

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Donald Racheter

Mailing Address 34 Kearney Court

City Iowa City State IA Zip Code 52246

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

Name of Employer Public Interest Institute Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11935

Amount of Each Receipt this Period
 210.00

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

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

810.00

**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 27 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Paul Rohlf

Mailing Address 2412 E River Dr

City Davenport State IA Zip Code 52803

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11AI.11297

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jerry Schimmelpfennig

Mailing Address 1508 S Linden Place

City Mt. Pleasant State IA Zip Code 52641

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

Name of Employer Lomont Molding Inc Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.11437

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Charles Skaugstad

Mailing Address 524 W Park Rd

City Iowa City State IA Zip Code 52246

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

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11AI.11495

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: (check only one)	PAGE 28 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Gregory Skuta

Mailing Address 1516 Sweetbriar Ct

City	State	Zip Code
Edmond	OK	73034

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

Name of Employer	Occupation
University of Oklahoma	Ophthalmologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11AI.11295

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Robert Staley

Mailing Address 405 Hutchinson Ave

City	State	Zip Code
Iowa City	IA	52246

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

Name of Employer	Occupation
University of Iowa	Orthodontist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.11903

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Michael Swanson

Mailing Address 2846 E 42nd Ct

City	State	Zip Code
Davenport	IA	52807

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

Name of Employer	Occupation
Anesthesia & Analgesia, PC	Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11AI.11281

Amount of Each Receipt this Period
500.00

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

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

800.00

**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 29 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Deborah Thornton

Mailing Address 631 Scott Park DR

City Iowa City State IA Zip Code 52245

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

Name of Employer Public Interest Institute Occupation Research Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.11468

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Deborah Thornton

Mailing Address 631 Scott Park DR

City Iowa City State IA Zip Code 52245

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

Name of Employer Public Interest Institute Occupation Research Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11901

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Dennis Tripp

Mailing Address 2238 Oak Tree Rd

City Muscatine State IA Zip Code 52761

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

Name of Employer Stanley Consultants Inc. Occupation engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.11352

Amount of Each Receipt this Period
240.00

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

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

640.00

**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 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Richard Von Maur Jr.

Mailing Address 2930 Crestline Dr

City Davenport State IA Zip Code 52803

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

Name of Employer Von Maur Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.11452

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
James Wachendorf

Mailing Address 801 Timber Ct

City Coralville State IA Zip Code 52241

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

Name of Employer Mid-American Securities Occupation Investment Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **860.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11213

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ann Weber

Mailing Address 2157 Terra Lane

City Coralville State IA Zip Code 52241

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

Name of Employer University of Iowa Occupation secretary/biostatistics

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : SA11AI.11217

Amount of Each Receipt this Period
100.00

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

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

300.00

**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 31 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Wenstrand

Mailing Address 1702 Oakland Mills Rd

City Mt. Pleasant	State IA	Zip Code 52641
----------------------	-------------	-------------------

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

Name of Employer B Lawrence Steel Products Inc	Occupation executive
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2014

Transaction ID : SA11AI.11293

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Kirk Whalen

Mailing Address 1727 Westminster Cir

City Davenport	State IA	Zip Code 52807
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FEC ID number of contributing federal political committee. **C**

Name of Employer Heart of American Management	Occupation executive
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.11340

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Herbert Wilson

Mailing Address 1 Oaknoll Ct

City Iowa City	State IA	Zip Code 52246
-------------------	-------------	-------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2014

Transaction ID : SA11AI.11377

Amount of Each Receipt this Period
100.00

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

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

1150.00

**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 32 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
David Yearian

Mailing Address **PO Box 232**

City **Williamsburg** State **IA** Zip Code **52361**

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

Name of Employer **Rose Haven** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.11951

Amount of Each Receipt this Period
250.00

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 M / D D D / Y Y 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 M / D 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).....

250.00

27074.00

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

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

FOR LINE NUMBER: PAGE 33 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address 655 Beach Street

City San Francisco State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11C.11423

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11C.11253

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG State IL Zip Code 60173

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11C.11424

Amount of Each Receipt this Period
 4000.00

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

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

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 34 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
FOXX PAC

Mailing Address 22780 INDIAN CREEK DRIVE SUITE 100

City State Zip Code
DULLES VA 20166

FEC ID number of contributing federal political committee. **C** C00525212

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11C.11469

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GOP GENERATION Y FUND

Mailing Address PO BOX 9055

City State Zip Code
PEORIA IL 61612

FEC ID number of contributing federal political committee. **C** C00448191

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11C.11470

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
JOBS, ECONOMY AND BUDGET FUND (JEB FUND)

Mailing Address PO BOX 30844

City State Zip Code
BETHESDA MD 20824

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11C.11422

Amount of Each Receipt this Period
2500.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 35 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
MAKING A RESPONSIBLE STAND FOR HOUSEHOLDS IN AMERICA (MARSHA PAC)

Mailing Address **PO BOX 3241**

City **BRENTWOOD** State **TN** Zip Code **37024**

FEC ID number of contributing federal political committee. **C C00409276**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2014

Transaction ID : **SA11C.11434**

Amount of Each Receipt this Period
2000.00

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 M / D D D / Y Y 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 M / D 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).....

2000.00

22000.00

**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 36 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9491.92

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		02		2014

Transaction ID : SA11D.11989

Amount of Each Receipt this Period
38.00

In-kind - travel

B. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9509.92

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		04		2014

Transaction ID : SA11D.11991

Amount of Each Receipt this Period
18.00

In-kind - travel

C. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9589.86

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		05		2014

Transaction ID : SA11D.11993

Amount of Each Receipt this Period
79.94

In-kind - travel

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

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

135.94

**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 37 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City State Zip Code
OTTUMWA IA 52501

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9613.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11D.11996

Amount of Each Receipt this Period
 _____ 23.70

In-kind - travel

B. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City State Zip Code
OTTUMWA IA 52501

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9638.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11D.11998

Amount of Each Receipt this Period
 _____ 25.00

In-kind - travel

C. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City State Zip Code
OTTUMWA IA 52501

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9662.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11D.12000

Amount of Each Receipt this Period
 _____ 24.00

In-kind - travel

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

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

_____ 72.70

**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 38 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City State Zip Code
OTTUMWA IA 52501

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9687.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11D.12002

Amount of Each Receipt this Period
25.00
 In-kind - travel

B. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City State Zip Code
OTTUMWA IA 52501

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9726.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2014

Transaction ID : SA11D.12004

Amount of Each Receipt this Period
38.68
 In-kind - travel

C. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City State Zip Code
OTTUMWA IA 52501

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9761.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2014

Transaction ID : SA11D.12006

Amount of Each Receipt this Period
35.40
 In-kind - travel

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

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

99.08

**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 39 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
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FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9773.09

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		12		2014

Transaction ID : SA11D.12008

Amount of Each Receipt this Period

11.45

 In-kind - travel

B. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
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FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9817.62

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		12		2014

Transaction ID : SA11D.12010

Amount of Each Receipt this Period

44.53

 In-kind - travel

C. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
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FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9876.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		12		2014

Transaction ID : SA11D.12012

Amount of Each Receipt this Period

58.80

 In-kind - travel

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

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

114.78

**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 40 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9911.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		12		2014

Transaction ID : SA11D.12014

Amount of Each Receipt this Period

84.57

In-kind - travel

B. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9939.99

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		12		2014

Transaction ID : SA11D.12016

Amount of Each Receipt this Period

28.57

In-kind - travel

C. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA	State IA	Zip Code 52501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self	Occupation physician
-----------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9960.99

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		13		2014

Transaction ID : SA11D.12018

Amount of Each Receipt this Period

21.00

In-kind - parking

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

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

84.57

**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 41 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA State IA Zip Code 52501

FEC ID number of contributing federal political committee. **C H8IA02043**

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9976.99

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 13 / 2014

Transaction ID : SA11D.12020

Amount of Each Receipt this Period
16.00

In-kind - travel

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 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 Y Y

Amount of Each Receipt this Period

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

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

16.00

523.07

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

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

FOR LINE NUMBER: PAGE 42 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address **77 W Wacker Dr**

City **Chicago** State **IA** Zip Code **60601**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **351.10** _____

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : SA14.12026

Amount of Each Receipt this Period
 _____ **351.10** _____

Airfair

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).....

_____ **351.10** _____

_____ **351.10** _____

**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 43 OF 59
	<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)
Miller-Meeks for Congress

A. Johnson County Republican Central Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1384
 City Iowa City State IA Zip Code 52244
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014
Transaction ID : SA15.11418
 Amount of Each Receipt this Period
 2000.00

B. Lee County Republican Central Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 281
 City Ft. Madison State IA Zip Code 52627
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2014
Transaction ID : SA15.11460
 Amount of Each Receipt this Period
 500.00

C. Muscatine County Republican Women
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 180th St
 City Muscatine State IA Zip Code 52761
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : SA15.11251
 Amount of Each Receipt this Period
 500.00

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

3000.00

**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 44 OF 59
	<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)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial)
Scott County Republican Central Committee

Mailing Address P.O. Box 534

City State Zip Code
Bettendorf IA 52722

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA15.11244

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Wapello County Republican Central Committee

Mailing Address P.O. Box 851

City State Zip Code
Ottumwa IA 52501

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA15.11410

Amount of Each Receipt this Period
600.00

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

Amount of Each Receipt this Period

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

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

1600.00

4600.00

**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 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. Bankers Advertising Co.		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 2800 Highway 6 East		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.11205
City Iowa City	State IA	
Zip Code 52240	Purpose of Disbursement Signs	Category/ Type 004
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. Bankers Advertising Co.		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 2800 Highway 6 East		Amount of Each Disbursement this Period 105.55 Transaction ID : SB17.11325
City Iowa City	State IA	
Zip Code 52240	Purpose of Disbursement Signs	Category/ Type 004
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) c. Alex Fulton		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 130 15th St		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.11894
City Silvis	State IL	
Zip Code 61282	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	3605.55
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 46 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. Tracie Gibler		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1208 Hutchinson Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.11964
City Ottumwa	State IA	
Zip Code 52501		Category/ Type 001
Purpose of Disbursement Wages		
Candidate Name Miller-Meeks for Congress		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. Haley O'Neil LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO Box 16015		Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.12027
City Alexandria	State VA	
Zip Code 22302		Category/ Type 001
Purpose of Disbursement Research Consulting		
Candidate Name Miller-Meeks for Congress		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02	

Full Name (Last, First, Middle Initial) c. Matthew Horihan		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address P.O. Box 743		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.11965
City West Branch	State IA	
Zip Code 52358		Category/ Type 001
Purpose of Disbursement Wages		
Candidate Name Miller-Meeks for Congress		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	12500.00
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 47 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. Blake Lanum		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address First Avenue		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.11893
City Coralville	State IA	
Purpose of Disbursement Wages	Category/ Type 001	
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: IA	District: 02	

Full Name (Last, First, Middle Initial) B. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 38.00 Transaction ID : SB17.11990
City OTTUMWA	State IA	
Purpose of Disbursement In-kind - travel	Category/ Type 002	
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: IA	District: 02	

Full Name (Last, First, Middle Initial) C. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 18.00 Transaction ID : SB17.11992
City OTTUMWA	State IA	
Purpose of Disbursement In-kind - travel	Category/ Type 002	
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: IA	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	2556.00
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 48 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. MARIANNETTE JANE MILLER-MEEKS

Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement In-kind - travel

Candidate Name Miller-Meeks for Congress

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: IA District: 02

Date of Disbursement: 10 / 05 / 2014

Amount of Each Disbursement this Period: 79.94

Transaction ID : SB17.11994

Category/Type: 002

B. MARIANNETTE JANE MILLER-MEEKS

Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement In-kind - travel

Candidate Name Miller-Meeks for Congress

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: IA District: 02

Date of Disbursement: 10 / 06 / 2014

Amount of Each Disbursement this Period: 23.70

Transaction ID : SB17.11997

Category/Type: 002

C. MARIANNETTE JANE MILLER-MEEKS

Full Name (Last, First, Middle Initial)
MARIANNETTE JANE MILLER-MEEKS

Mailing Address 11674 90TH ST

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement In-kind - travel

Candidate Name Miller-Meeks for Congress

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: IA District: 02

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17.11999

Category/Type: 002

SUBTOTAL of Disbursements This Page (optional) 128.64

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 49 OF 59			
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 24.00 Transaction ID : SB17.12001
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.12003
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) C. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 38.68 Transaction ID : SB17.12005
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	87.68
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 50 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 91.83 Transaction ID : SB17.12007
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 02	

Full Name (Last, First, Middle Initial) B. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 11.45 Transaction ID : SB17.12009
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 02	

Full Name (Last, First, Middle Initial) C. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 44.53 Transaction ID : SB17.12011
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	91.83
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 51 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 58.80 Transaction ID : SB17.12013
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 35.00 Transaction ID : SB17.12015
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) C. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 28.57 Transaction ID : SB17.12017
City OTTUMWA	State IA	
Zip Code 52501	Purpose of Disbursement In-kind - travel	Category/ Type 002
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	122.37
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 52 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 21.00 Transaction ID : SB17.12019
City OTTUMWA State IA Zip Code 52501	Purpose of Disbursement In-kind - parking Category/Type 002	
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

Full Name (Last, First, Middle Initial) B. MARIANNETTE JANE MILLER-MEEKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 11674 90TH ST		Amount of Each Disbursement this Period 16.00 Transaction ID : SB17.12021
City OTTUMWA State IA Zip Code 52501	Purpose of Disbursement In-kind - travel Category/Type 002	
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

Full Name (Last, First, Middle Initial) c. Minuteman Press - Davenport		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 3523 Eastern Ave #4		Amount of Each Disbursement this Period 269.49 Transaction ID : SB17.11873
City Davenport State IA Zip Code 52807	Purpose of Disbursement Printing Category/Type 003	
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

SUBTOTAL of Disbursements This Page (optional).....	306.49
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 53 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. Murphy USA		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 907 E Baker St		Amount of Each Disbursement this Period 35.40
City Mt. Pleasant	State IA	
Purpose of Disbursement travel	Zip Code 52641	Category/ Type 002
Candidate Name Miller-Meeks for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. Murphy USA		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 907 E Baker St		Amount of Each Disbursement this Period 28.57
City Mt. Pleasant	State IA	
Purpose of Disbursement travel	Zip Code 52641	Category/ Type 002
Candidate Name Miller-Meeks for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02	

Full Name (Last, First, Middle Initial) c. North Court BP		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 1301 N Court St		Amount of Each Disbursement this Period 11.45
City Ottumwa	State IA	
Purpose of Disbursement travel	Zip Code 52501	Category/ Type 002
Candidate Name Miller-Meeks for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 54 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. North Court BP		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 1301 N Court St		Amount of Each Disbursement this Period 44.53
City Ottumwa	State IA	
Zip Code 52501	Purpose of Disbursement travel	Transaction ID : SB17.12024
Candidate Name Miller-Meeks for Congress	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: IA District: 02		

Full Name (Last, First, Middle Initial) B. Office Max #320		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 320 W Kimberly Rd		Amount of Each Disbursement this Period 3.16
City Davenport	State IA	
Zip Code 52806	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11870
Candidate Name Miller-Meeks for Congress	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

Full Name (Last, First, Middle Initial) c. Office Max #320		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 320 W Kimberly Rd		Amount of Each Disbursement this Period 5.87
City Davenport	State IA	
Zip Code 52806	Purpose of Disbursement Office supplies	Transaction ID : SB17.11988
Candidate Name Miller-Meeks for Congress	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

SUBTOTAL of Disbursements This Page (optional).....	9.03
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 55 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. Rising Tide Media Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 226 S Fayette St		Amount of Each Disbursement this Period 23792.77 Transaction ID : SB17.11891
City Alexandria	State IA	
Purpose of Disbursement Media - TV	Category/Type 004	
Candidate Name Miller-Meeks for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 02	

Full Name (Last, First, Middle Initial) B. Matthew Sauvage		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1307 College Ave		Amount of Each Disbursement this Period 4200.00 Transaction ID : SB17.11963
City Davenport	State IA	
Purpose of Disbursement Wages	Category/Type 001	
Candidate Name Miller-Meeks for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 02	

Full Name (Last, First, Middle Initial) c. SBM Advertising		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 38 Indian Trail		Amount of Each Disbursement this Period 607.25 Transaction ID : SB17.11966
City Searcy	State AR	
Purpose of Disbursement Printing	Category/Type 004	
Candidate Name Miller-Meeks for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	28600.02
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 56 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. Strategic Media Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 1911 North Fort Myer Dr		Amount of Each Disbursement this Period 31434.00 Transaction ID : SB17.11969
City Arlington	State VA	
Zip Code 22209	Purpose of Disbursement Advertising - TV	Category/ Type 004
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. Strategic Media Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 1911 North Fort Myer Dr		Amount of Each Disbursement this Period 34834.00 Transaction ID : SB17.11985
City Arlington	State VA	
Zip Code 22209	Purpose of Disbursement Advertising - TV	Category/ Type 004
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) c. Stripe Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 1.88 Transaction ID : SB17.11956
City San Francisco	State CA	
Zip Code 94110	Purpose of Disbursement Credit Card Fees	Category/ Type 003
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	66269.88
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 57 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. Stripe Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 271.61 Transaction ID : SB17.11364
City San Francisco	State CA	
Zip Code 94110	Purpose of Disbursement Credit Card Fee	Category/ Type 003
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) B. U.S. Bancorp		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 800 Nicollet Mall		Amount of Each Disbursement this Period 280.34 Transaction ID : SB17.11986
City Minneapolis	State MN	
Zip Code 55402	Purpose of Disbursement Bank Charge	Category/ Type 001
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

Full Name (Last, First, Middle Initial) C. U.S. Postal Service - Moline		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 514 17th St		Amount of Each Disbursement this Period 196.00 Transaction ID : SB17.11987
City Moline	State IL	
Zip Code 61265	Purpose of Disbursement Postage	Category/ Type 003
Candidate Name Miller-Meeks for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	747.95
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 58 OF 59	
	<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)
Miller-Meeks for Congress

Full Name (Last, First, Middle Initial) A. U.S. Postal Service - Ottumwa		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 616 W 2nd St		Amount of Each Disbursement this Period 490.00
City Ottumwa State IA Zip Code 52501	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : SB17.11981
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Postal Service - Ottumwa		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 616 W Second St		Amount of Each Disbursement this Period 274.40
City Ottumwa State IA Zip Code 52501	Purpose of Disbursement Postage	
Candidate Name Miller-Meeks for Congress	Category/Type 003	Transaction ID : SB17.11871
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

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:	
State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	764.40
TOTAL This Period (last page this line number only).....	115789.39

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Miller-Meeks for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bankers Advertising Co.	Nature of Debt (Purpose): Printing
Mailing Address 2800 Highway 6 East	
City State Zip Code Iowa City IA 52240	

Outstanding Balance Beginning This Period <input type="text" value="1605.55"/>	Transaction ID : SD10.7526	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1605.55"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>