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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Auth	orized Com	mittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing er the lines.	g, type	12FE4M5	
Wayne Iverson for C	ongress					
<u>.</u>		1 1 1 1				
ADDRESS (number and street)	PO Box 420697					
Check if different than previously reported. (ACC)	San Diego				CA 9	2142-0697
2. FEC IDENTIFICATION	NUMBER ▼	CITY A			STATE A	ZIP CODE
C C00502070	3	3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT CA 52
4. TYPE OF REPORT ((a) Quarterly Reports: April 15 Quarter	(b)	12-Day PRE	-Election Repor		X General (12	
July 15 Quarter	y Report (Q2)	ш	Convention (1		Special (12	
October 15 Qua	rterly Report (Q3)	Election on	11	06	2012	in the CA State of
January 31 Year	-End Report (YE) (c)	30-Day POS	T-Election Rep	ort for the	e:	
			General (30G)		Runoff (30F	Special (30S)
Termination Rep	ort (TER)	Election on	M M /	D D	/ Y Y Y Y	in the State of
5. Covering Period	10 01 Y	^Y Y Y 2012	through	M 10	M / D D /	Y Y Y Y 2012
I certify that I have examined Type or Print Name of Treasu		-	nowledge and b	pelief it is	true, correct and	complete.
Signature of Treasurer J	anet Lynn Iverson		[Electronically F	iled]	Date 10	/ 23 / Y Y Y Y Y Y 2012
NOTE: Submission of false, em	oneous, or incomplete in	nformation may	subject the pers	on signin	g this Report to the	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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Write or Type Committee Name

Wayne Iverson for Congress

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	0	35184.52
	(b) Total Contribution Refunds (from Line 20(d))	0	500
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0	34684.52
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	200	108320.66
	(b) Total Offsets to Operating Expenditures (from Line 14)	0	2005
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	200	106315.66
8.	Cash on Hand at Close of Reporting Period (from Line 27)	3368.88	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	75000	

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

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Wayne Iverson for Congress

D 10 : " D : 1	_	10	/ D D D 01	7 Y Y Y Y 2012		10 /	D D /	2012
Report Covering the Period:	From:	10	UI	2012	To:	10	1.7	2012

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	CONTRIBUTIONS (other than loans) FROM:		
(2	a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized	0	23905 23905
(b (c	· ·	0	5000
(c (e	,	0	6279.52 35184.52
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0	0
3. L (a (b (c	Candidate	0 0	75000 0 75000
Е	OFFSETS TO OPERATING XPENDITURES Refunds, Rebates, etc.)	0	2005
	OTHER RECEIPTS Dividends, Interest, etc.)	0	0.02
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0	112189.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

rsements

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II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	200	108320.66
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0	0
	(b) Of All Other Loans	0	0
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0	500
	(b) Political Party Committees (c) Other Political Committees (such as PACs)	0	0
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0	500
21.	OTHER DISBURSEMENTS	0	0
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	200	108820.66
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	3568.88
24	TOTAL RECEIPTS THIS PERIOD (from Line	0	
25.	SUBTOTAL (add Line 23 and Line 24)		3568.88
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	200
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		3368.88

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

5

	il
X	13a
	13h

(check only one) Detailed Summary Page Transaction ID: SC/10-L1 NAME OF COMMITTEE (In Full) Wayne Iverson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dr. Wayne Iverson General Mailing Address Other (specify) \blacktriangledown PO Box 420697 City State ZIP Code CA 92142-0697 San Diego Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000 0 5000 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D14 2011 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

×	13a
	13b

Detailed Summary Page Transaction ID: SC/10-L2 NAME OF COMMITTEE (In Full) Wayne Iverson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dr. Wayne Iverson General Mailing Address Other (specify) \blacktriangledown PO Box 420697 City State ZIP Code CA 92142-0697 San Diego Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 50000 0 50000 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 15 ^м 12^м 2011 non Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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	13h

Detailed Summary Page Transaction ID: SC/10-L3 NAME OF COMMITTEE (In Full) Wayne Iverson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dr. Wayne Iverson General Mailing Address Other (specify) \blacktriangledown PO Box 420697 City State ZIP Code CA 92142-0697 San Diego Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 20000 0 20000 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D21 ^D ^M 03^M Ž012 NONE Ňoně % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 20000.00 TOTALS This Period (last page in this line only) 75000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.