

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND</b>		3. FEC Identification Number <b>C</b> C90013897
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2001 FOREST AVENUE		
(c) City, State and ZIP Code DES MOINES IA 50311		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

5. COVERING PERIOD:

FROM	M M M	/	D D D	/	Y Y Y Y Y Y
	10		01		2014
THROUGH	M M M	/	D D D	/	Y Y Y Y Y Y
	11		04		2014

6. TOTAL CONTRIBUTIONS.....	58000.00
7. TOTAL INDEPENDENT EXPENDITURES .....	60001.04

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

**DATE**

*[Electronically Filed]*

Matthew Covington

Matthew Covington

10/17/2014

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

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

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 FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

<b>A. Full Name (Last, First, Middle Initial)</b> Service Employees International Union Committee on Political Education		Date of Receipt 10 / 10 / 2014
Mailing Address 1800 Massachusetts Ave NW		<b>Transaction ID : F56.000001</b>
City Washington, DC	State Zip Code 20036	
FEC ID number of contributing federal political committee. <b>C</b> C00004036		Amount of Each Receipt this Period 58000.00
Name of Employer Occupation		

<b>B. Full Name (Last, First, Middle Initial)</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation		

<b>C. Full Name (Last, First, Middle Initial)</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation		

<b>D. Full Name (Last, First, Middle Initial)</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	58000.00
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	58000.00

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Josh Journey Heinz		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 2280.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000001
Purpose of Expenditure Canvassing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Patrick Stall		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1462.50	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000002
Purpose of Expenditure canvassing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aaron Janson		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1462.50	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000003
Purpose of Expenditure canvassing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	5205.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Carrie Fisher		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1462.50	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.000004

Full Name (Last, First, Middle Initial) of Payee Michael Patz		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1267.50	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.000005

Full Name (Last, First, Middle Initial) of Payee L C Printing		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 401 SW 8th Street		Amount 7833.00	
City Des Moines	State IA	Zip Code 50309	
Purpose of Expenditure printing, mail services		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.000006

(a) SUBTOTAL of Itemized Independent Expenditures.....	10563.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee US Cellular		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address Dept. 0205		Amount 109.28	
City Palatine	State IL	Zip Code 60055	
Purpose of Expenditure data plan for canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15877.28		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kaija Carter		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 650.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 16527.28		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Erickson Agency		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 8299 50th Avenue		Amount 649.50	
City Prole	State IA	Zip Code 50229	
Purpose of Expenditure consulting, material design		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 17176.78		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	1408.78
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Karla Bromwell		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 100.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		17276.78	

Transaction ID : F57.000010

Full Name (Last, First, Middle Initial) of Payee Madeline Cano		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 159.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		17435.78	

Transaction ID : F57.000011

Full Name (Last, First, Middle Initial) of Payee Matthew Covington		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 571.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		18006.78	

Transaction ID : F57.000012

(a) SUBTOTAL of Itemized Independent Expenditures.....	830.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Hugh Espey		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 632.40	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		18639.18	

Transaction ID : F57.000013

Full Name (Last, First, Middle Initial) of Payee Bridget Fagan		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 111.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing, material development		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		18750.18	

Transaction ID : F57.000014

Full Name (Last, First, Middle Initial) of Payee Emily Harmon		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 92.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		18842.18	

Transaction ID : F57.000015

(a) SUBTOTAL of Itemized Independent Expenditures.....	835.40
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Adam Mason		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 287.02	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.000016	

Full Name (Last, First, Middle Initial) of Payee Jess Mazour		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 77.50	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.000017	

Full Name (Last, First, Middle Initial) of Payee Natalie Snyders		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 300.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing, advertisement development		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.000018	

(a) SUBTOTAL of Itemized Independent Expenditures.....	664.52
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Eight Seven Central		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2014	
Mailing Address 424 East Locust Street		Amount 546.57	
City Des Moines	State IA	Zip Code 50309	Transaction ID : F57.000019
Purpose of Expenditure clothing apparel for canvassers	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 20053.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Katie Bryan		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 115.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000020
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 20168.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gabus Ford		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2014	
Mailing Address 4545 Merle Hay Road		Amount 923.26	
City Des Moines	State IA	Zip Code 50310	Transaction ID : F57.000021
Purpose of Expenditure van rental for canvassing	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21091.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1584.83
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Kum and Go		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2211 University Avenue		Amount 50.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000022
Purpose of Expenditure gas for canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21141.53		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 1140 24th Street		Amount 30.80	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000023
Purpose of Expenditure lodging for canvasser	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21172.33		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee KJMC		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 1169 25th Street		Amount 2000.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000024
Purpose of Expenditure radio advertising	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23172.33		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2080.80
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Cityview		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 414 61st Street		Amount 1785.00	
City Des Moines	State IA	Zip Code 50312	Transaction ID : F57.000025
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24957.33		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee El Enfoque		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address PO Box 145		Amount 375.00	
City Perry	State IA	Zip Code 50220	Transaction ID : F57.000026
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 25332.33		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee El Viento		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address PO Box 7746		Amount 520.00	
City Urbandale	State IA	Zip Code 50323	Transaction ID : F57.000027
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 25852.33		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2680.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Northern Iowan		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address L011 Maucker Union		Amount 2096.25	
City Cedar Falls	State IA	Zip Code 50614	Transaction ID : F57.000028
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27948.58		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Daily Iowan		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address E131 Adler Journalism Building		Amount 5212.62	
City Iowa City	State IA	Zip Code 52242	Transaction ID : F57.000029
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33161.20		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Iowa State Daily		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 108 Hamilton Hall		Amount 3308.00	
City Ames	State IA	Zip Code 50011	Transaction ID : F57.000030
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 36469.20		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	10616.87
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee The Quad City Times		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 500 E 3rd Street		Amount 4833.00	
City Davenport	State IA	Zip Code 52801	Transaction ID : F57.000031
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 41302.20		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee The Des Moines Register		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 400 Locust Street		Amount 6651.56	
City Des Moines	State IA	Zip Code 50309	Transaction ID : F57.000032
Purpose of Expenditure newspaper advertising	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 47953.76		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Josh Journey Heinz		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 2280.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000033
Purpose of Expenditure canvassing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2280.00		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13764.56
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Patrick Stall		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1462.50	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000034
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3742.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Aaron Janson		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1462.50	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000035
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5205.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Carrie Fisher		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1462.50	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000036
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6667.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	4387.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Michael Patz		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 1267.50	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000037
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7935.00		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 1140 24th Street		Amount 30.80	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000038
Purpose of Expenditure lodging for canvasser	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7965.80		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee US Cellular		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address Dept. 0205		Amount 109.28	
City palatine	State IL	Zip Code 60055	Transaction ID : F57.000039
Purpose of Expenditure data plan for canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8075.08		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1407.58
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Kaija Carter		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 650.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000040
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8725.08		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Erickson Agency		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 8299 50th Avenue		Amount 649.50	
City Prole	State IA	Zip Code 50229	Transaction ID : F57.000041
Purpose of Expenditure consulting, material design	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9374.58		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Karla Bromwell		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest ave		Amount 67.28	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000042
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9441.86		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1366.78
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Madeline Cano		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 159.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Transaction ID : F57.000043
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014 9600.86	

Full Name (Last, First, Middle Initial) of Payee Matthew Covington		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Avenue		Amount 71.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Transaction ID : F57.000044
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014 9671.86	

Full Name (Last, First, Middle Initial) of Payee Hugh Espey		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 147.60	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Transaction ID : F57.000045
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014 9819.46	

(a) SUBTOTAL of Itemized Independent Expenditures.....	377.60
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Bridget Fagan		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 111.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000046
Purpose of Expenditure canvassing, material development	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9930.46		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Emily Harmon		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 92.00	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000047
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10022.46		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Adam Mason		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 179.50	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000048
Purpose of Expenditure canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10201.96		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	382.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Jess Mazour		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 77.50	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.000049	

Full Name (Last, First, Middle Initial) of Payee Natalie Snyders		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 133.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.000050	

Full Name (Last, First, Middle Initial) of Payee Eight Seven Central		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 424 East Locust Street		Amount 546.56	
City Des Moines	State IA	Zip Code 50309	
Purpose of Expenditure clothing apparel for canvassers		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : F57.000051	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	757.06
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Katie Bryan		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2001 Forest Ave		Amount 115.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure canvassing		Category/ Type	Transaction ID : F57.000052
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014	
		11074.02	

Full Name (Last, First, Middle Initial) of Payee Gabus Ford		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 4545 Merle Hay Road		Amount 923.26	
City Des Moines	State IA	Zip Code 50310	
Purpose of Expenditure van rental for canvassing		Category/ Type	Transaction ID : F57.000053
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014	
		11997.28	

Full Name (Last, First, Middle Initial) of Payee Kum and Go		Date of Public Distribution/Dissemination 10 / 01 / 2014	
Mailing Address 2211 University Ave		Amount 50.00	
City Des Moines	State IA	Zip Code 50311	
Purpose of Expenditure gas for canvassing		Category/ Type	Transaction ID : F57.000054
Name of Federal Candidate Supported or Opposed by Expenditure: Staci Appel		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 03
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
		2014	
		12047.28	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1088.26
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	60001.04