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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		an Authorized				Office Use Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT		mple: If typir r the lines.	ng, type	12FE4M5	
Stanley Consultants Inc	., PAC					
	<u> </u>					
ADDRESS (number and street)	225 Iowa Aven	ue				
Check if different				1		
than previously reported. (ACC)	Muscatine				LIA L	52761
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦			STATE A	ZIP CODE ▲
C C00415224		3. IS THIS REPORT	~	IEW N) OR	AM (A	MENDED)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due em	Mar 20 (M3)		lun 20 (M6)	Η.	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1) (c) 12-D	Apr 20 (M4)		Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2	PRE	E-Election ort for the:	Primary (12P Convention (General Special	
October 15 Quarterly Report (Q3	· ·	ort for the.	Convention	120)	Орсска	(120)
January 31 Year-End Report (YE		Election on	11 /	04	2014	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		Oay ST-Election ort for the:	General (30G	S)	Runoff (30R) Special (30S)
Termination Report (TER)	Пор	Election on	M = M /	D	Y	in the State of
5. Covering Period 10	/ DID /	2014	through	10	15	2014
I certify that I have examined this	Report and to	the best of my know	wledge and b	pelief it is tru	e, correct an	d complete.
Type or Print Name of Treasurer	Travis Engelke	9				
Signature of Treasurer Travis	Engelke		[Electronically	Filed]	ate 10	21 / 2014
NOTE: Submission of false, erroned	ous, or incomple	te information may su	bject the pers	son signing th	is Report to t	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Stanley Consultants Inc., PAC 10 2014 10 2014 Report Covering the Period: 15 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 30911.92 January 1, 2014 (b) Cash on Hand at 30810.90 Beginning of Reporting Period..... 2459.98 61.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 30871.90 33371.90 6(a) and 6(c) for Column B)..... 5220.00 7720.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 25651.90 25651.90 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) 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 3X (Rev. 06/2004)

Write or Type Committee Name

Stanley	Consultants	Inc.,	PAC
---------	-------------	-------	-----

		COLUMN B		
I. Receipts	I. Receipts COLUMN A Total This Period			
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	20.00	4007.00		
(i) Itemized (use Schedule A)	20.00	1007.68		
		4450.00		
(ii) Unitemized	41.00	1452.30		
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	61.00	2459.98		
Lines IT(a)(i) and (ii)	7 01.00	2-100.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees				
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)▶	61.00	2459.98		
. Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
. All Loans Received	0.00	0.00		
. All Loans neceived	7	3.00		
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures	0.00	0.00		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
. Refunds of Contributions Made	7			
to Federal Candidates and Other				
Political Committees	0.00	0.00		
. Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
. Transfers from Non-Federal and Levin Funds				
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
_				
(b) Levin Funds (from Schedule H5)	0.00	0.00		
() T. 1 T. ((11 := ()) := ())	0.00			
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	61.00	2459.98		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	61.00	2459.98		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

. Op (a)	erating Expenditures: Allocated Federal/Non-Federal	Total This Period	Calendar Year-to-Date
. ,		·	
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b)	Other Federal Operating		
(0)	Expenditures Total Operating Expenditures	0.00	0.00
(c)	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Tra	ansfers to Affiliated/Other Party		
	mmitteesntributions to	0.00	0.00
and	deral Candidates/Committees d Other Political Committees	5220.00	7720.00
	lependent Expenditures se Schedule E)	0.00	0.00
Co	ordinated Party Expenditures		
(us	U.S.C. §441a(d)) se Schedule F)	0.00	0.00
Loa	an Repayments Made	0.00	0.00
Loa Rei	ans Madefunds of Contributions To:	0.00	0.00
	Individuals/Persons Other Than Political Committees	0.00	0.00
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees		0.00
	(such as PACs)	0.00	0.00
(d)	Total Contribution Refunds		
	(add Lines 28(a), (b), and (c)) ▶	0.00	0.00
. Oth	ner Disbursements	0.00	0.00
Fed	deral Election Activity (2 U.S.C. §431(20))		
	Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) I ederal Strate		
	(ii) "Levin" Share	0.00	0.00
(b)	Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c)	Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	al Disbursements (add Lines 21(c), 22,		
23,	, 24, 25, 26, 27, 28(d), 29 and 30(c))	5220.00	7720.00
	ral Federal Disbursements		
	btract Line 21(a)(ii) and Line 30(a)(ii) m Line 31)	5220.00	7720.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	61.00	2459.98
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	61.00	2459.98
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s)	FOR L			:	PAGE	:	6 OF	-
for each category of the Detailed Summary Page	X 11	·	11b		11c		12	
	l 🗆 13	3	14		15		16	

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) Stanley Consultants Inc., PAC		
Full Name (Last, First, Middle Initial) Anthony Mardambek Mailing Address 4630 Fact Kelly Drive		Date of Receipt
Mailing Address 4639 East Kelly Drive		10 06 Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.7878
Gilbert	AZ 85234	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	payroll deduct
Stanley Consultants, Inc.	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) 3.		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Lacif neceipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Passint this Davied
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		20.00
TOTAL This Period (last page this line number		20.00

for each Detailed nts may	Zip Code 50704 2015 General	21b 27 sed by any perso	22 28a on for the p solicit confidence of 10	23 24 25 28 29 Durpose of soliciting contributions tributions from such committee. Disbursement O1 2014 action ID: SB23.7895 of Each Disbursement this Period 800.00
and add	Zip Code 50704 2015 General	sed by any person ical committee to	Date of	Disbursement O1 2014 action ID : SB23.7895 of Each Disbursement this Period
and add	Zip Code 50704 2015 General	Category/	Date of 10	Disbursement O1 2014 action ID : SB23.7895 of Each Disbursement this Period
nt For:	50704 2015 General		10	action ID : SB23.7895 of Each Disbursement this Period
nt For:	50704 2015 General		10	action ID : SB23.7895 of Each Disbursement this Period
nt For:	50704 2015 General		10	action ID : SB23.7895 of Each Disbursement this Period
nt For:	50704 2015 General		10	action ID : SB23.7895 of Each Disbursement this Period
nt For:	50704 2015 General		10 Transa	o1 2014 action ID : SB23.7895 of Each Disbursement this Period
nt For:	50704 2015 General			of Each Disbursement this Peric
nt For:	2015 X General			of Each Disbursement this Peric
rimary	X General		Amount	
rimary	X General			800.00
rimary	X General	Турс		, , , , , , , , , , , , , , , , , , , ,
				Disbursement
			10	01 2014
ate A	Zip Code 52761		Transa	action ID : SB23.7893
		· · · · ·	Amount	of Each Disbursement this Perio
		Category/ Type		550.00
rimary	X General			
			Date of	Disbursement
			10	01 2014
ate -	Zip Code 61244		Transa	action ID : SB23.7884
		Category/	Amount	of Each Disbursement this Period 1000.00
rimary	X General	Туре		7 7 7
				2350.00
rritt	nt For: imary ther (spe	nt For: 2015 imary	Category/ Type Int For: 2015 Imary Seneral Inher (specify) Interest Seneral Interest Sen	te Zip Code A 52761 Amount Category/ Type Transite Zip Code ther (specify) ▼ Date of Transite Zip Code Category/ Type Category/ Type Transite Zip Code Category/ Type Amount Category/ Type Transite Zip Code Category/ Type Amount Category/ Type Amount Category/ Type Transite Zip Code Category/ Typ

ITEMIZED DISBURSEMENTS	Use separate sche	dula/a\ I	NUMBER: PAGE 8 OF 9
	for each category of Detailed Summary	of the Control of	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Stanley Consultants Inc., PAC	ie and address of an	y political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)			
A. Governor Branstad 2010			Date of Disbursement
Mailing Address 3590 190th Street			10 01 2014
,	State Zip Code	е	Transaction ID : SB23.7886
Urbandale Purpose of Disbursement	IA 50322		- 174110404101112 1 022011000
check			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
		Type	1000.00
Senate President	nent For: 2015 Primary ∑ Gei Other (specify) ▼	neral	
State: IA District: 04			
Full Name (Last, First, Middle Initial)			Data of Diahuraamant
B. Hein for Statehouse			Date of Disbursement
Mailing Address 11989 Richland Rd.			10 01 2014
Monticello	State Zip Code IA 52310	e	Transaction ID : SB23.7896
Purpose of Disbursement check			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	120.00
Senate	nent For: 2015 Primary	neral	
President State: District:			
State: District: Full Name (Last, First, Middle Initial)			Date of Disbursement
State: District: Full Name (Last, First, Middle Initial)			Date of Disbursement 10 01 2014
State: District: Full Name (Last, First, Middle Initial) C. LOEBSACK FOR CONGRESS Mailing Address P.O. Box 3013 City lowa City	State Zip Code IA 52244	е	M M / D D / Y Y Y Y
State: District: Full Name (Last, First, Middle Initial) C. LOEBSACK FOR CONGRESS Mailing Address P.O. Box 3013 City Iowa City Purpose of Disbursement	•	е	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State: District: Full Name (Last, First, Middle Initial) C. LOEBSACK FOR CONGRESS Mailing Address P.O. Box 3013 City Iowa City	•	Category/	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State: District: Full Name (Last, First, Middle Initial) C. LOEBSACK FOR CONGRESS Mailing Address P.O. Box 3013 City Solution City Purpose of Disbursement check Candidate Name Office Sought: House Disbursen	nent For: 2015		Transaction ID : SB23.7888 Amount of Each Disbursement this Period
State: District: Full Name (Last, First, Middle Initial) C. LOEBSACK FOR CONGRESS Mailing Address P.O. Box 3013 City Iowa City Purpose of Disbursement check Candidate Name Office Sought: House Senate President	nent For: 2015 Primary Ger Other (specify)	Category/ Type	Transaction ID : SB23.7888 Amount of Each Disbursement this Period

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SCHEDULE B (FEC Form 3X)	Han annual of the Co	FOR LINE	NUMBER:	PAGE 9 OF 9
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orling	,	
	Detailed Summary Page	21b 27		23 24 25 26 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Stanley Consultants Inc., PAC				
Full Name (Last, First, Middle Initial)				
A. Pat Murphy for Iowa			Date of Disk	pursement
Mailing Address P.O. Box 692			10	01 2014
,	State Zip Code		Transactio	n ID : SB23.7890
Dubuque Purpose of Disbursement	IA 52004			
check			Amount of E	ach Disbursement this Period
Candidate Name		Category/ Type		250.00
Office Sought: House Disburser	nent For: 2015 Primary General Other (specify)	туре		
Full Name (Last, First, Middle Initial)				
В.			Date of Disb	oursement
Mailing Address				
City	State Zip Code			
Purpose of Disbursement		· · · ·	Amount of E	ach Disbursement this Period
Candidate Name		Category/ Type		
President	nent For: Primary General Other (specify)	7.		
State: District:				
Full Name (Last, First, Middle Initial) C.			Date of Disk	
Mailing Address			M M /	D D / Y Y Y Y Y
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type		ach Disbursement this Period
President	nent For: Primary General Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		·····		250.00
TOTAL This Period (last page this line number only)		·····		5220.00