

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

Wayne Iverson for Congress

ADDRESS (number and street) ▼

PO Box 420697

Check if different than previously reported. (ACC)

San Diego

CA

92142-0697

2. **FEC IDENTIFICATION NUMBER** ▼

C C00502070

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

CA 52

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 06 / 05 / 2012 in the State of CA

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

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

Election on 06 / 05 / 2012 in the State of CA

5. Covering Period

10 / 01 / 2011 through 12 / 31 / 2011

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 Janet Lynn Iverson

Signature of Treasurer Janet Lynn Iverson

[Electronically Filed]

Date

01 / 25 / 2012

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Wayne Iverson 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))....	14067.37	15461.85
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	14067.37	15461.85
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10118.09	11207.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	1980	1980
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8138.09	9227.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	61234.3	
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).....	55000	

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

Wayne Iverson 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).....	9350	9350
(ii) Unitemized.....	3250	3455
(iii) TOTAL of contributions from individuals ▶	12600	12805
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	1467.37	2656.85
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14067.37	15461.85
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	50000	55000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	50000	55000
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1980	1980
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.02	0.02
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	66047.39	72441.87

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10118.09	11207.57
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
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	10118.09	11207.57

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5305
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	66047.39
25. SUBTOTAL (add Line 23 and Line 24).....	71352.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10118.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	61234.3

**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 30
	<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Robert Odell Jr.

Mailing Address 9632 Grand Isle Lane

City Las Vegas State NV Zip Code 89144-0839

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

Name of Employer Robert H. Odell MD PhD Medical Enterpr Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2011

Transaction ID : A-C54

Amount of Each Receipt this Period
250

Copntribution

B. Full Name (Last, First, Middle Initial)
Dr. Robert Odell Jr.

Mailing Address 9632 Grand Isle Lane

City Las Vegas State NV Zip Code 89144-0839

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

Name of Employer Robert H. Odell MD PhD Medical Enterpr Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 26 / 2011

Transaction ID : A-C87

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Dr. Andrew Zak

Mailing Address 9720 Verlaine Court

City Las Vegas State NV Zip Code 89145-8695

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

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : A-C68

Amount of Each Receipt this Period
250

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 6 OF 30
	<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. George And Julie Watson

Mailing Address 2209 W Timbercreek Circle

City State Zip Code
Wichita KS 67204-2556

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

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : A-C72

Amount of Each Receipt this Period
5000

B. Full Name (Last, First, Middle Initial)
Dr. Andrew Zak

Mailing Address 9720 Verlaine Court

City State Zip Code
Las Vegas NV 89145-8695

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

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2011

Transaction ID : A-C60

Amount of Each Receipt this Period
250
Contribution

C. Full Name (Last, First, Middle Initial)
Dr. Dean Polce

Mailing Address 2259 Aragon Canyon Street

City State Zip Code
Las Vegas NV 89135-1303

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

Name of Employer Self Occupation physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2011

Transaction ID : A-C57

Amount of Each Receipt this Period
250
Contribution

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

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

5500.00

**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 30
	<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Tommy Swate MD

Mailing Address 12605 East Freeway
Suite 600

City Houston State TX Zip Code 77015-5624

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

Name of Employer self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2011

Transaction ID : A-C92

Amount of Each Receipt this Period
250
Contribution

B. Full Name (Last, First, Middle Initial)
Dr. William E Von Tobel

Mailing Address 5 Isleworth Drive

City Henderson State NV Zip Code 89052-6458

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

Name of Employer PMC Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2011

Transaction ID : A-C56

Amount of Each Receipt this Period
250
Contribution

C. Full Name (Last, First, Middle Initial)
Dr. Alfonso Barragan

Mailing Address 55A Pacific Avenue
#359

City Surfside State CA Zip Code 90743

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

Name of Employer self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : A-C61

Amount of Each Receipt this Period
300
Contribution

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 8 OF 30
	<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Susie E Wiegand

Mailing Address 5934 Dirac Street

City San Diego State CA Zip Code 92122-3739

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

Name of Employer Anesthesia Services Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2011

Transaction ID : A-C64

Amount of Each Receipt this Period
 Contribution **300**

B. Full Name (Last, First, Middle Initial)
Mr. Robert S Pritchard

Mailing Address 1627 Gingerwood Cove

City San Diego State CA Zip Code 92130

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

Name of Employer Johnstone Supply Occupation Business Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2011

Transaction ID : A-C52

Amount of Each Receipt this Period
 contribution **500**

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

Mailing Address 9600 Grand Isle Lane

City Las Vegas State NV Zip Code 89144-0840

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

Name of Employer self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2011

Transaction ID : A-C149

Amount of Each Receipt this Period
 Contribution **250**

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

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

1050.00

**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 30
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) Dr. William E Von Tobel		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 26 / 2011	
Mailing Address 5 Isleworth Drive		Transaction ID : A-C86	
City Henderson	State NV	Zip Code 89052-6458	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer PMC	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) Dr. Juliette Madrigal-Dersch		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2011	
Mailing Address 14905 Swallow Tailed Kite		Transaction ID : A-C148	
City Austin	State TX	Zip Code 78738-6545	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer self	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) Mr. Andrew Schlafly		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2011	
Mailing Address 939 Old Chester Road		Transaction ID : A-C94	
City Far Hills	State NJ	Zip Code 07931-2657	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer Self-employed	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

SUBTOTAL of Receipts This Page (optional).....	1000.00
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: PAGE 10 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. James g Marx

Mailing Address PO Box 27199

City State Zip Code
Las Vegas NV 89126-1199

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

Name of Employer self Occupation
self physiican

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 / /
 10 / 22 / 2011

Transaction ID : A-C59

Amount of Each Receipt this Period

 Contribution

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
 / /

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
 / /

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: (check only one)	PAGE 11 OF 30
	<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : A-1102

Amount of Each Receipt this Period
256.7

Inkind: Staff Pay

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : A-198

Amount of Each Receipt this Period
302.35

Inkind: Rent for Office

C. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2011

Transaction ID : A-1101

Amount of Each Receipt this Period
278.8

Inkind: Staff pay

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

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

837.85

**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 12 OF 30
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2011

Transaction ID : A-197

Amount of Each Receipt this Period
302.35

Inkind: **Rent for Office**

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2011

Transaction ID : A-1107

Amount of Each Receipt this Period
6.19

Inkind: **Telephone**

C. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2011

Transaction ID : A-199

Amount of Each Receipt this Period
9.49

Inkind: **Utilities**

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

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

318.03

**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 30
<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2011

Transaction ID : A-I104

Amount of Each Receipt this Period
15

Inkind: **Staff Health Insurance**

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2011

Transaction ID : A-I105

Amount of Each Receipt this Period
15

Inkind: **Staff Health Insurance**

C. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2011

Transaction ID : A-I103

Amount of Each Receipt this Period
266.31

Inkind: **Staff Pay**

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

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

296.31

**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 30
<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2011

Transaction ID : A-1100

Amount of Each Receipt this Period
8.73

Inkind: **Utilities**

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2011

Transaction ID : A-1108

Amount of Each Receipt this Period
6.45

Inkind: **Telephone**

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).....

15.18

1467.37

**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 30
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

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

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57656.85

Date of Receipt
 / /
12 / 15 / 2011

Transaction ID : A-L2

Amount of Each Receipt this Period

50000

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
 / /

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
 / /

Amount of Each Receipt this Period

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

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

50000.00

50000.00

**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 16 OF 30
	<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)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1680**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2011

Transaction ID : A-O144

Amount of Each Receipt this Period
 1680
 qtrly pyt

B. Full Name (Last, First, Middle Initial)
Steller Designs

Mailing Address 6886 Alderwood Drive

City Carlsbad State CA Zip Code 92011-3905

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : A-O146

Amount of Each Receipt this Period
 300
 web design

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).....

1980.00

1980.00

**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 17 OF 30	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. San Diego County Federated Republican Women		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 4221 Bonita Road Unit 20		Amount of Each Disbursement this Period 70 Transaction ID : B-E-119
City Bonita	State CA	
Zip Code 91902-1431	Purpose of Disbursement Campaign Event: Convention	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 6.45 Transaction ID : B-I-108
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address PO Box 301200		Amount of Each Disbursement this Period 83.68 Transaction ID : B-E-30
City Los Angeles	State CA	
Zip Code 90030-1200	Purpose of Disbursement copying at FedEx Kinkos	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2011	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	160.13
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 18 OF 30			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. JCA Com		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address 3755 Avocado Boulevard # 145		Amount of Each Disbursement this Period 188.56
City La Mesa State CA Zip Code 91941-7301	Purpose of Disbursement Administrative/Salary/Overhead: Printing	
Candidate Name	Category/Type 001	Transaction ID : B-E-43
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. SIR SPEEDY		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2011
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 99.13
City San Diego State CA Zip Code 92111-1414	Purpose of Disbursement Administrative/Salary/Overhead: Printing	
Candidate Name	Category/Type 001	Transaction ID : B-E-124
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. SIR SPEEDY		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 438
City San Diego State CA Zip Code 92111-1414	Purpose of Disbursement printing services	
Candidate Name	Category/Type 001	Transaction ID : B-E-113
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	725.69
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 19 OF 30			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Dr. Wayne Iverson			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address PO Box 420697			Amount of Each Disbursement this Period 8.73
City San Diego	State CA	Zip Code 92142-0697	
Purpose of Disbursement Inkind: Utilities		Candidate Name	Transaction ID : B-I-100
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. Aristotle International			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 1680
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement quarterly pyt		Candidate Name	Transaction ID : B-E-143
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type 001	
State:	District:		

Full Name (Last, First, Middle Initial) c. Dr. Wayne Iverson			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2011
Mailing Address PO Box 420697			Amount of Each Disbursement this Period 6.19
City San Diego	State CA	Zip Code 92142-0697	
Purpose of Disbursement Inkind: Telephone		Candidate Name	Transaction ID : B-I-107
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1694.92
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 20 OF 30			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Dr. Wayne Iverson			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2011
Mailing Address PO Box 420697			Amount of Each Disbursement this Period 15 Transaction ID : B-I-104
City San Diego	State CA	Zip Code 92142-0697	
Purpose of Disbursement Inkind: Staff Health Insurance		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. SIR SPEEDY			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 7283 Engineer Road Suite G			Amount of Each Disbursement this Period 186.58 Transaction ID : B-E-116
City San Diego	State CA	Zip Code 92111-1414	
Purpose of Disbursement Administrative/Salary/Overhead: printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Steller Designs			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 6886 Alderwood Drive			Amount of Each Disbursement this Period 300 Transaction ID : B-E-118
City Carlsbad	State CA	Zip Code 92011-3905	
Purpose of Disbursement web design		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	501.58
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 21 OF 30	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. SIR SPEEDY		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2011
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 173.41
City San Diego State CA Zip Code 92111-1414	Purpose of Disbursement Administrative/Salary/Overhead: Printing	
Candidate Name	Category/Type 001	Transaction ID : B-E-131
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Steller Designs		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 6886 Alderwood Drive		Amount of Each Disbursement this Period 150
City Carlsbad State CA Zip Code 92011-3905	Purpose of Disbursement Advertising: web designs	
Candidate Name	Category/Type 004	Transaction ID : B-E-114
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2011
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 302.35
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement Inkind: Rent for Office	
Candidate Name	Category/Type	Transaction ID : B-I-97
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	625.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 30	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. SIR SPEEDY		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 290.93 Transaction ID : B-E-129
City San Diego State CA Zip Code 92111-1414	Purpose of Disbursement Administrative/Salary/Overhead: Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 266.31 Transaction ID : B-I-103
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement Inkind: Staff Pay Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address PO Box 301200		Amount of Each Disbursement this Period 645.98 Transaction ID : B-E-81
City Los Angeles State CA Zip Code 90030-1200	Purpose of Disbursement credit card machine Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1203.22
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 23 OF 30	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial)
A. SIR SPEEDY

Mailing Address 7283 Engineer Road
Suite G

City San Diego State CA Zip Code 92111-1414

Purpose of Disbursement
printing expense

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 21 / 2011

Amount of Each Disbursement this Period
64.65

Transaction ID : B-E-46

Category/Type
001

Full Name (Last, First, Middle Initial)
B. Aristotle International

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Quarterly payment

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 29 / 2011

Amount of Each Disbursement this Period
1680

Transaction ID : B-E-121

Category/Type
001

Full Name (Last, First, Middle Initial)
c. Dr. Wayne Iverson

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

Purpose of Disbursement
Inkind: Rent for Office

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 30 / 2011

Amount of Each Disbursement this Period
302.35

Transaction ID : B-I-98

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 2047.00

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 24 OF 30	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Steller Designs		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 6886 Alderwood Drive		Amount of Each Disbursement this Period 300 Transaction ID : B-E-115
City Carlsbad State CA Zip Code 92011-3905	Purpose of Disbursement Advertising: Web Designs Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Steller Designs		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 6886 Alderwood Drive		Amount of Each Disbursement this Period 300 Transaction ID : B-E-145
City Carlsbad State CA Zip Code 92011-3905	Purpose of Disbursement Advertising: web design Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 15 Transaction ID : B-I-105
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement Inkind: Staff Health Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	615.00
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 25 OF 30	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. San Diego County Federated Republican Women		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address 4221 Bonita Road Unit 20		Amount of Each Disbursement this Period 110 Transaction ID : B-E-123
City Bonita	State CA	
Zip Code 91902-1431	Purpose of Disbursement Campaign Event: Convention	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. San Diego County Federated Republican Women		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 4221 Bonita Road Unit 20		Amount of Each Disbursement this Period 250 Transaction ID : B-E-126
City Bonita	State CA	
Zip Code 91902-1431	Purpose of Disbursement donation/advertising	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2011
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 278.8 Transaction ID : B-I-101
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: Staff pay	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	638.80
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 26 OF 30			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Dr. Wayne Iverson			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2011
Mailing Address PO Box 420697			Amount of Each Disbursement this Period 9.49
City San Diego	State CA	Zip Code 92142-0697	
Purpose of Disbursement Inkind: Utilities		Category/ Type	Transaction ID : B-I-99
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Bank of America			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address PO Box 301200			Amount of Each Disbursement this Period 279.79
City Los Angeles	State CA	Zip Code 90030-1200	
Purpose of Disbursement Fundraising: Fundraiser Las Vegas		Category/ Type	Transaction ID : B-E-122
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. JCA Com			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 3755 Avocado Boulevard # 145			Amount of Each Disbursement this Period 188.56
City La Mesa	State CA	Zip Code 91941-7301	
Purpose of Disbursement printing donation envelopes		Category/ Type	Transaction ID : B-E-112
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	478.84
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 27 OF 30	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 226.43
City San Diego State CA Zip Code 92199-9709	Purpose of Disbursement Administrative/Salary/Overhead: Postage	
Candidate Name	Category/Type 001	Transaction ID : B-E-130
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. County of San Diego		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address Ruffin Road		Amount of Each Disbursement this Period 447.16
City San Diego State CA Zip Code 92123	Purpose of Disbursement voter registration master CD	
Candidate Name	Category/Type 004	Transaction ID : B-E-111
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 256.7
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement Inkind: Staff Pay	
Candidate Name	Category/Type	Transaction ID : B-I-102
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	930.29
TOTAL This Period (last page this line number only).....	9620.23

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L1

Wayne Iverson for Congress

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

[PERSONAL FUNDS]

Election: 2012

Dr. Wayne Iverson

Primary

General

Other (specify) ▼

Mailing Address
PO Box 420697

City State ZIP Code
San Diego CA 92142-0697

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000 0 5000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

14

2011

None

None

0.00

% (apr)

Yes No

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

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

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

NAME OF COMMITTEE (In Full) **Wayne Iverson for Congress** Transaction ID : **SC/10-L2**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Wayne Iverson	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 420697		

City	State	ZIP Code
San Diego	CA	92142-0697

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000	0	50000

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 15 / Y 2011	M / D / Y None	non % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	50000.00
TOTALS This Period (last page in this line only).....	55000.00

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

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

NAME OF COMMITTEE (In Full)

Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JCA Com		Nature of Debt (Purpose): Administrative/Salary/Overhead: Printing
Mailing Address 3755 Avocado Boulevard # 145		
City State	Zip Code	
La Mesa CA	91941-7301	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT43	
188.56		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0	188.56	0

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	55000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	55000.00